

The Department of Vermont Health Access Clinical Criteria

Subject: Commodes, sitz baths, raised toilet seats, toilet frames, and other toileting devices

Last Review: May 5, 2023

Past Revisions: December 21, 2021, February 18, 2020, April 4, 2017, June 6, 2016, June 2, 2015, October 30, 2014, June 4, 2013, March 20, 2012, January 26, 2011, June 17, 2009, and 2004

***Please note: Most current content changes will be highlighted in yellow.**

Description of Service or Procedure

A commode chair is a device which serves as a toilet or toilet seat, but which is not connected to a plumbing system. It may be positioned over an existing toilet to provide support or may be freestanding. Certain commode devices have positioning components for additional postural support.

A sitz bath is a device which allows soaking of the perineal area to relieve discomfort from perineal ailments such as hemorrhoids, anal fissures, or an episiotomy.

A raised toilet seat is a device which sits on the toilet bowl, increasing the height of the bowl, to facilitate a sit-to-stand transfer or proper hip/knee angle after an injury or surgery.

A toilet frame is a device which attaches to the toilet seat bolts, creating armrests for the toilet, to facilitate a sit-to-stand transfer and to prevent lateral balance loss.

Bedpans and urinals are devices which enable toileting for individuals who cannot access a toilet or commode.

Disclaimer

Coverage is limited to that outlined in Medicaid Rule or Health Care Administrative Rules that pertains to the member's aid category. Prior Authorization (PA) is only valid if the member is eligible for the applicable item or service on the date of service.

Medicaid Rule

Medicaid and Health Care Administrative Rules can be found at <https://humanservices.vermont.gov/rules-policies/health-care-rules/health-care-administrative-rules-hcar/adopted-rules>



7102.2	Prior Authorization Determination
4.101	Medical Necessity for Covered Services
4.104	Medicaid Non-Covered Services
4.209	Durable Medical Equipment
4.106	Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services

Coverage Position

Toileting equipment may be covered for members:

- When the device is prescribed by a licensed medical provider, enrolled in the Vermont Medicaid program, operating within their scope of practice as described on the Vermont Office of Professional Regulation's website*, Statute, or Rule who is knowledgeable regarding toileting equipment, and who provides medical care to the member AND
- When the clinical criteria below are met.

* Vermont's Office of Professional Regulation's website: <https://sos.vermont.gov/opr/>

Coverage Criteria

A **commode chair** may be covered for members who:

- Are unable to access the standard toilet facilities in their home due to a medical condition OR
- Have a medical condition that results in the need for additional support(s) to facilitate toileting.

An extra wide/heavy duty commode chair may be appropriate for members who meet the above guidelines AND have a hip width greater than or equal to 23 inches and/or weigh more than 300 pounds.

For coverage of a commode chair with positioning components, additional documentation is required to demonstrate the medical necessity of the specific device requested, as well as for each additional component. Unsuccessful trial/consideration of all less expensive devices must be documented. Certain devices can be used for both toileting and bathing and may be more properly coded as a bath/shower chair. A home assessment is required to ensure that the requested device fits in the home setting and meets the medical needs of the member.

A **sitz bath** may be covered for members who have a documented ailment in the perineal area that is treatable by the use of a sitz bath.

A **raised toilet seat** may be covered for members who cannot perform safe sit-to-stand transfers from the toilet due to leg muscle weakness, injury, or surgical precautions. This device may not be appropriate for individuals with balance issues.

A **toilet frame** may be covered for members who cannot perform safe sit-to-stand transfers from the toilet due to leg muscle weakness or surgical precautions, or who have balance issues that require upper extremity stabilization during toileting.

Bedpans and urinals may be covered for members who cannot access a toilet or commode because of a medical condition.

Considerations: Mobile commodes must be used with caution because the commode may move during a transfer even when the brakes are applied. Care must also be taken for members with fragile skin during transfers and when sitting upon a non-padded commode. Use of a commode without a caregiver present may result in a safety risk for some members with balance, judgment and/or mobility impairments. Raised toilet seats may provide inadequate stability for members with balance issues.

For devices that require prior authorization, a Physical or Occupational Therapist home assessment is required to determine the correct device, given the member's medical condition, their mobility status, and the physical plant of the home. A trial or close simulation of the device is required to ensure that the device will meet the medical needs of the member. Members may also require instruction from a physical or occupational therapist in techniques to use and care for the device properly.

Rental devices: Particular care must be provided by the supplying provider to minimize the risk of germ transmission between users of the device. Disposable liners should be considered for all toileting devices. New buckets must always accompany the provision of rental commodes.

Early and Periodic Screening, Diagnostic and Treatment (EPSDT): Vermont Medicaid will provide comprehensive services and furnish all Medicaid coverable, appropriate, and medically necessary services needed to correct and ameliorate health conditions for Medicaid members under age 21.

Please note, Vermont Medicaid Clinical Criteria is reviewed based on available literature, evidence-based guidelines/standards, Medicaid rule and policy, and Medicare coverage determinations that may be appropriate to incorporate when applicable.

Clinical criteria for repeat service or procedure

Repeat services are covered when the device requires replacement before the DME limitation time frame (see DME Limitations list on the VT Medicaid Portal under Provider Resources at <http://vtmedicaid.com/#/resources>) for one of the following reasons:

- The device has been outgrown OR
- The device no longer meets the medical needs of the member OR
- The device is no longer functional through normal wear and tear or when the useful lifetime has been reached (HCAR Rule 4.209).

Type of service or procedure covered

Commodes, raised toilet seats, toilet frames, sitz baths, bedpans, and urinals.

Type of service or procedure not covered (this list may not be all inclusive)

Duplicate devices for multiple bathrooms are not covered.

Any device that requires a home modification is not covered. For example, the DVHA does not cover grab bars for walls alongside toilets, because they are permanently affixed to the wall, require specific placement into wall studs for safety, and are not placed by medical supply providers to ensure proper placement and security. Toilet frames and raised toilet seats are not considered home modifications because they are not permanently affixed, require no tools to install and can be correctly placed by any lay person.

Bidets are not covered because per the Centers for Medicare and Medicaid (CMS) National Coverage Determination 280.1, Durable Medical Equipment Reference List, they are not “primarily and customarily used to serve a medical purpose” (2005). Morbidly obese beneficiaries who cannot reach to wipe themselves should be referred to an Occupational Therapist for assessment of the use of wiping tools.

Coding guidelines

DVHA follows CMS coding guidance as in Local Coverage Article A52461. A column II code is included in the allowance for the corresponding column I code when provided at the same time.

Column I	Column II
E0163	E0167
E0165	E0167
E0168	E0167
E0170	E0167, E0627, E0629
E0171	E0167, E0627, E0629

Supplying providers should not use generic procedure codes to request toileting devices when there is a more specific code. Per the Vermont Medicaid General Provider Manual section 3.4 (see <http://vtmedicaid.com/#/manuals>), providers are responsible for proper use of coding as defined in the current coding manuals (e.g., AMA CPT, HCPCS). Please submit the most specific procedure code(s) available. Additional components are included in the code for the base device.

References

Centers for Medicare & Medicaid Services. (n.d.). *Early and periodic screening, diagnostic, and treatment*. Medicaid.gov. <https://www.medicaid.gov/medicaid/benefits/epsdt/index.html>

Centers for Medicare & Medicaid Services. (2020, January 1). *Local coverage determination - commodes L33736*. Medicare Coverage Database. Retrieved March 22, 2023, from <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33736>

Centers for Medicare & Medicaid Services. (2020, January 1). *Local coverage article – commodes – policy article A52461*. Medicare Coverage Database. Retrieved March 22, 2023, from <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52461>

Centers for Medicare & Medicaid Services. (2005, May 5). *National coverage determination 280.1 – durable medical equipment reference list*. Medicare Coverage Database. Retrieved March 22, 2023 from, <https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?&&NCDId=190&ncdver=1&NCDSect=280.1&bc=BEAAAAAAAAQAAA A%3D%3D>

Delaney, M. B. (2014). Declaring war on clostridium difficile and other GI pathogens: A review of disposable commode products. *Journal of Nursing & Care*, 3(05). doi: 0.4172/2167-1168.1000195

- Kawanabe, E., Suzuki, M., Tanaka, S., Sasaki, S., & Hamaguchi, T. (2018). Impairment in toileting behavior after a stroke. *Geriatrics & Gerontology International*, 18(8), 1166–1172. <https://doi.org/10.1111/ggi.13435>
- Koike, Y., Sumigawa, K., Koeda, S., Shiina, M., Fukushi, H., Tsuji, T., Hara, C., & Tsushima, H. (2015). Approaches for improving the toileting problems of hemiplegic stroke patients with poor standing balance. *Journal of Physical Therapy Science*, 27(3), 877–881. <https://doi.org/10.1589/jpts.27.877>
- Lam, K., Shi, Y., Boscardin, J., & Covinsky, K. E. (2021). Unmet need for equipment to help with bathing and toileting among older US adults. *JAMA Internal Medicine*, 181(5), 662. <https://doi.org/10.1001/jamainternmed.2021.0204>
- Luebbert, S. (2022). Falls in Senior Adults Part II: Management, Treatment, Prevention, and Therapy Plans. *Missouri Medicine*, 119(3), 225–260.
- McGarry, B. E., & Falvey, J. R. (2021). Addressing unmet adaptive equipment needs through primary care. *JAMA Internal Medicine*, 181(5), 670. <https://doi.org/10.1001/jamainternmed.2021.0398>
- Morency, E., Ibe, O., Sawicki, B., Sosa, P., Cremaschi, F., & Burkow-Heikkinen, L. (2015). Home care attitude and expectations: A reflection on suggested guidelines for Home Care in the U.S.A. *Research*, 2. <https://dx.doi.org/10.13070/rs.en.2.1425>
- Sackley, C. M., Walker, M. F., Burton, C. R., Watkins, C. L., Mant, J., Roalfe, A. K., Wheatley, K., Sheehan, B., Sharp, L., Stant, K. E., Fletcher-Smith, J., Steel, K., Wilde, K., Irvine, L., & Peryer, G. (2015). An occupational therapy intervention for residents with stroke related disabilities in UK care homes (OTCH): Cluster randomised controlled trial. *BMJ*, 350(h468). <https://doi.org/10.1136/bmj.h468>
- Spiliotopoulou, G., Atwal, A., & McIntyre, A. (2017). The use of evidence-based guidance to enable reliable and accurate measurements of the home environment. *British Journal of Occupational Therapy*, 81(1), 32–41. <https://doi.org/10.1177/0308022617737689>
- Yachnin, D., Gharib, G., Jutai, J., & Finestone, H. (2017). Technology-assisted toilets: Improving independence and hygiene in stroke rehabilitation. *Journal of Rehabilitation and Assistive Technologies Engineering*, 4. <https://doi.org/10.1177/2055668317725686>

This document has been classified as public information.