

The Department of Vermont Health Access Clinical Criteria

Subject: Transfer boards and other non-lift transfer devices

Last Review: January 28, 2020

Past Revisions: June 6, 2016, August 26, 2015, October 30, 2014, June 5, 2013, June 4, 2012, June 28, 2011, and 2004

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

Description of Service or Procedure

A transfer device enables a beneficiary to move in a controlled manner, without lifting, between two adjacent surfaces, for example from bed to chair, or bed to commode, or chair to commode. A transfer device is not meant to transport a beneficiary (for example, from one room to another).

Note: Lifts are a specific category of transfer device, which elevates an individual off of one surface and on to another.

Disclaimer

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

Medicaid Rule

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

Medicaid Rules

- 7102.2 Prior Authorization Determination
- 7103 Medical Necessity

Health Care Administrative Rules

- 4.209 Durable Medical Equipment



Coverage Position

Transfer devices may be covered for beneficiaries:

- When the device is prescribed by a licensed medical provider, enrolled in the Vermont Medicaid program, operating within their scope of practice as described in their Vermont State Practice Act, Statute, or Rule who is knowledgeable regarding transfer devices and who provides medical care to the beneficiary AND
- When the clinical criteria below are met.

Coverage Criteria

A transfer device may be covered for beneficiaries who:

Have a medical condition that impairs the ability to transfer from one surface to another AND

- Have been evaluated for the most appropriate transfer techniques and devices by a physical or occupational therapist, or a physician knowledgeable in transfer techniques and devices AND
- The device has been documented as fitting into the beneficiary's home environment AND
- The device prescribed maximizes beneficiary independence and safety AND
- The device maximizes the preservation of skin integrity AND
The beneficiary and/or caregivers have been fully trained in the proper technique for use and care of the device.

For devices that require prior authorization, a Physical or Occupational Therapist home assessment is required to determine the appropriate device, given the beneficiary's medical condition, 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 beneficiary. Beneficiaries may also require instruction from a physical or occupational therapist in techniques to use and care for the device properly.

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) exception: 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.

Clinical criteria for repeat service or procedure

Repeat services are covered when the device requires replacement before the DME restriction time frame, for one of the following reasons:

- The device has been outgrown OR
- The device no longer meets the medical needs of the beneficiary OR
- The device is no longer functional through normal wear and tear (expected to last at least 5 years) OR
- The cost of repairing the device is greater than 50% of the replacement cost.

Type of service or procedure covered

Transfer boards, transfer discs, pivoting devices, low friction sliding sheets/tubes.

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.

References

- Anderson, L., Burford, A., Fallentin, N., Persson, R., Jakobsen, M., Mortensen, O., Clausen, & T., Holtermann, A. (2014). Patient transfers and assistive devices: Prospective cohort study on the risk for occupational back injury among healthcare workers. *Scandinavian Journal of Work Environment & Health*, 40(1). Retrieved May 18, 2015 from: http://www.sjweh.fi/show_abstract.php?abstract_id=3382
- Aslam I, Davis S, Feldman S, Martin W (2015). A Review of Patient Lifting Interventions to Reduce Health Care Worker Injuries. *Workplace Health and Safety*, Vol. 63, #6 June 2015. Retrieved June 10, 2019 from: <https://journals.sagepub.com/doi/pdf/10.1177/2165079915580038>
- Brienza, D., Deppisch, M., Gillespie, C., Goldberg, M., Gruccio, P. Jordan, R. et al. (2015). Do lift slings significantly change the efficacy of therapeutic support surfaces? A National Pressure Ulcer Advisory Panel White Paper. *National Pressure Ulcer Advisory Panel*. Retrieved May 4, 2016 from: <http://www.npuap.org/wp-content/uploads/2012/01/NPUAP-Lift-Sling-White-Paper-March-2015.pdf>.
- Goh, C.H., Yusof, M., Ng, S., Subramanian, P., & Tan MP. (2014). The use of the self-standing turning transfer device to perform bed-to-chair transfers reduces physical stress among caregivers of older patients in a middle-income developing country. *Frontiers in Medicine*, 1(32). Retrieved May 1, 2017 from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4292054/pdf/fmed-01-00032.pdf>.
- Huang J, Kuppam V, Chodraju S, Chen, J, Kim J (2018). Evaluation of Different Patient Transfer Devices in Reducing Biomechanical Exposures among Professional Caregivers. Proceedings of the Human factors and Ergonomics Society Annual Meeting, published Sept 27, 2018. Retrieved June 10, 2019 from: http://www.ppsproducts.com/wp-content/uploads/2016/09/HFES2018_Manuscript_R1.pdf
- Humrickhouse, R., & Knibe, H. (2016) The importance of safe patient handling to create a culture of safety: An evidential review. *The Ergonomics Open Journal*, 9. Retrieved May 1, 2017 from: <https://pdfs.semanticscholar.org/e884/b32004bf79037299843d19999f6f5a94c05c.pdf>.
- Occupational Safety and Health Administration. (2009). Guidelines for nursing homes: Ergonomics for the prevention of musculoskeletal disorders. *U.S. Department of Labor*. Retrieved April 14, 2011, from: http://www.osha.gov/ergonomics/guidelines/nursinghome/final_nh_guidelines.pdf
- Peterson, M.J., Kahn, J.A., Kerrigan, M.V., Gutmann, J.M., & Harrow, J.J. (2015). Pressure ulcer risk of patient handling sling use. *JRRD*, 52(3). Retrieved May 4, 2016, from: <http://www.rehab.research.va.gov/JOUR/2015/523/pdf/jrrd-2014-06-0140.pdf>.
- Wiggerman, N. (2014). The sliding patient: How to respond to and prevent migration in bed. Current topics in safe patient handling and mobility. *Supplement to American Nurse Today*. Retrieved May 1, 2017 from: http://www.americannursetoday.com/wp-content/uploads/2014/07/ant9-Patient-Handling-Supplement-821a_LOW.pdf#page=19.

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