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## The Department of Vermont Health Access Supplement to InterQual® Criteria

**Note:** DVHA utilizes InterQual® criteria as a resource for coverage determination. In order to ensure compliance with other relevant [Health Care Rules](#) and requirements, DVHA may base coverage determinations on information supplemental to InterQual® criteria. See services listed below.

To access InterQual® criteria, please log into your account at the [Vermont Medicaid Portal](#), go to secure options and click on InterQual® Solution from the dropdown menu.

**Subject:** Wheelchair Cushions and Seating

**Last Review:** June 26, 2024

**Past Revisions:** n/a

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

### Description of Service or Procedure

There are many types of cushions, and it is essential to fully understand the member's medical and psychosocial status to make a proper cushion determination. A physical or occupational therapist's assessment is required to determine which type of cushion is indicated to meet the member's needs.

- **Positioning cushions** are required when a member is unable to attain and maintain proper alignment in the wheelchair. Positioning is vital for proper function and to prevent postural asymmetries that may result in contracture or discomfort. The cushion may need lateral support and/or a middleommel to assist with leg positioning. The cushion may need a build-up or hollowing-out of the base material to correct for pelvic asymmetry.
- **Skin integrity cushions** are required when a member may be at risk for a loss of skin integrity due to pressure or bodily fluids. Individuals with impaired sensation or inability to change positions for pressure relief are at particular risk. Many individuals require cushions that provide both positioning and skin integrity protection. The goal is "total contact" to minimize areas of high pressure. Positioning and skin integrity cushions are required when a member has both issues simultaneously.
- **General cushions** may be adequate for members whose sensation is intact and who can change positions, but who spend significant periods of time sitting in the wheelchair.
- **Wedge or "antithrust" cushions** may be required for members who tend to slide or push forward out of the wheelchair.



## Materials:

- **Foam cushions:** There are many types of foam. An open cell foam may be adequate for a general cushion. However, for members who require positioning or who are incontinent, a high-quality closed cell foam may be indicated. Note that certain foams become stiffer in the cold and so may not provide the same caliber of positioning or skin protection if the wheelchair is kept in a cold location. Foam cushions may result in increased skin temperatures at the cushion/skin interface. Elevated skin temperatures, in the context of pressure loading, may increase the risk of pressure ulcer development.
- **Gel cushions:** Gel can be an excellent pressure reliever; however, it is important to note that gel can migrate. Certain gel cushions need periodic “massage” to move the gel back under bony prominences. It is important to consider the size and location of the gel pockets. Gel can also leak out, can harden over time, and can stiffen in cold weather. Extra gel pads are available for areas that require additional protection but will be ineffective if adding a gel pad results in more pressure to another area. The goal is for “total contact” with even pressure, to maximize weight distribution.
- **Air cushions** can be useful for pressure relief. For individuals with a high level of skin integrity protection needs, multiple baffles may be needed to ensure the proper degree and location of pressure relief. Air cushions with multiple baffles can also be adjusted to account for postural asymmetries. Air cushions are prone to leakage. They must also be inflated properly and checked frequently for proper inflation, which can be difficult for certain members. Air cushions with many baffles do not work well for members who use sliding boards for transfers. Air filled rubber cushions may result in increased skin temperatures at the cushion/skin interface. Elevated skin temperatures, in the context of pressure loading, may increase the risk of pressure ulcer development. For members who have difficulty obtaining optimal inflation, it may be wise to consider authorization of a pressure gauge.
- **Plastic cushions**, such as ‘honeycomb’ cushions, can be useful for pressure relief and for preservation of skin integrity. The honeycomb pattern may help dispel heat and fluid.
- **Multimaterial cushions** can be very useful for individuals who need both positioning and pressure relief. Certain cushions have shaped foam bases for positioning, topped with a gel or foam component for pressure relief.
- **Rigid bases** may be required if the wheelchair has a sling seat or if the cushion requires additional stability. These include solid seat inserts (a solid seat instead of a sling seat on the wheelchair) or a board, commonly called an apple board, which sits between the sling seat and the cushion.

**Other:** Wheelchairs must be properly configured for the member to meet positioning, skin integrity, and mobility needs. The cushion is an integral part of a complete, properly configured seating system. Adding a cushion will change the floor-to-seat measurement, the floor-to-footrest measurement, the height of any backrest and headrest positioning components, and the seat-to-armrest height measurement. The wheelchair will need to be adjusted accordingly.

## Criteria Supplemental to InterQual®

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InterQual® criteria address wheelchair cushions, however, InterQual® criteria do not fully align with Vermont Medicaid regulations. Also, interpretation of coding definitions can be difficult. Manufacturers often recommend codes that do not appear to conform to the Healthcare Common Procedure Coding System (HCPCS) definitions, and vendors may use those codes in their prior authorization requests. HCPCS coding definitions can often help to clarify which

device fits Vermont Medicaid regulations for coverage. When the HCPCS definition does not offer sufficient clarification, additional clarification sources may be required. For those situations, Medicare has created specifications for each type of cushion. These specifications are utilized by Medicare's subcontractor, PDAC, to classify makes/models of cushions. These specifications may be useful and can be found at: <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52505>. Consult the HCPCS coding manual and read all code definitions carefully to determine the correct code. Note that there is a code for 'Other cushions' if the cushion requested fits no other HCPCS code.

If the member has very complex skin protection needs, or a history of failed skin protection despite use of skin protection cushions, consideration should be given to the requirement of a pressure-mapping evaluation. Pressure mapping technology is available at the University of Vermont Medical Center and at Dartmouth Hitchcock Medical Center. Consideration may also be given to the use of tilt in space wheelchair seating technology to increase pressure relief. In addition to the guidance provided by InterQual®, the following information should be considered:

All covered cushions must:

- Meet the member's medical needs (HCAR [4.101](#));
- Match the capability of the device/accessories to the member's medical needs within the limitations of Medicaid coverage; and
- Be the least expensive, medically appropriate device (Medicaid Rule [7102.2](#)).

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.

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

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**Noncovered items** include sheepskin, standard pillows, eggcrate cushions, and doughnut rings. These items do not provide adequate support, positioning, or skin protection.

### **Disclaimer**

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Coverage is limited to that outlined in Medicaid Rule or Health Care Administrative Rules that pertain 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**

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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
4.210	Wheelchairs, Mobility Devices, and Seating Systems
4.231	Home Health Services [includes durable medical equipment]

## **Coverage Position**

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Wheelchair cushions 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 wheelchair cushions, 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/>

## **Type of service or procedure covered**

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Wheelchair cushions as described above.

Medicare covers the following codes with prior authorization: K0005, E1161, E1231, E1232, E1233, E1234, K0008, K0009, K0857, K0858, K0859, K0860, K0862, K0863, K0864, K0890, K0891, K0013/K0835, K0843, K0848, K0855, K0856, K0861. When one of these procedure codes is requested for a member that has both Medicare and Medicaid coverage, it is the expectation of DVHA that the provider will seek prior authorization coverage from Medicare first as Medicaid is the payer of last resort. Medicare will specify which cushions they will and will not cover. If the requested cushion is not covered by Medicare, DVHA may then review the requested service for coverage under Vermont Medicaid's more expansive rule.

**Dual eligible documentation:** Review the information specific to dual eligible members in the DVHA DME provider manual supplemental, available at:

<https://dvha.vermont.gov/providers/manuals>.

**Skilled Nursing Facility Residents:** While skilled nursing facilities generally supply durable medical equipment as part of its per diem rate, per HCAR 4.210.4, Vermont Medicaid will pay if wheelchair accessories, including cushions, are so uniquely constructed or substantially modified to the individual that they would not be useful to other residents. The vendor must submit clinical documentation demonstrating the uniqueness or substantial modification.

**Cushions for seating other than wheelchairs:** Occasionally requests are received for cushions for rollabout or geriatric chairs, seat lift chairs, recliner chairs, or other non-wheelchair seating. These devices generally have cushioning included in their construction and wheelchair cushions rarely fit or perform properly on these chairs.

Accountable Care Organization (ACO) attributed members are subject to all Medicaid rules and regulations. Services and equipment that are included on the DVHA imminent harm procedure code list require prior authorization for all Vermont Medicaid members, regardless of ACO status. This list can be found at: <https://dvha.vermont.gov/document/imminent-harm-list>.

### **Clinical Criteria for Repeat Service or Procedure**

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Replacement is considered when the device has been outgrown, no longer meets the medical need, is no longer repairable, or repair would cost more than 50% of the cost of a new device. DVHA expectation is that the device last at least 5 years.

### **Coding guidelines**

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Please see the Medicaid Portal at <http://vtmedicaid.com/#/feeSchedule> for fee schedules, code coverage, and applicable requirements.

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