

MEDICAL NECESSITY CHECKLIST FOR SHOWER CHAIRS

For most payers that cover bathroom equipment, a **bath/shower chair (E0240)** may be covered if:

- Client is unable to safely and/or independently perform bathing without the use of an appropriate shower chair or caregiver is unable to safely or timely perform bathing without the use of an appropriate shower chair.
- Documentation clearly outlines what the client is currently using for bathing and why it is not safe and/or appropriate.
- Documentation must rule out less costly alternatives, what was trialed, and why it did not meet their needs.
- Documentation should verify home, bathroom, and shower accessibility with and without recommended equipment.
- Documentation should include pertinent information such as how many people does it currently take to complete bathing process, if the equipment was trialed, or why equipment was not trialed, and results of trial, as well as line by line justification for the recommended shower chair and any accessories.

Note: Some payers consider E0240 a standard bath chair and may allow billing of E1399 for complex bath systems, such as Rifton bath systems, or use specific modifiers for coding of complex bath systems. Verify with your payer's UPD and Fee Schedule to determine the correct HCPCS based on product and payer guidelines.

For systems that involve toileting, equipment may be covered if in addition to the above:

- Client is unable to safely and/or independently use toilet for bowel and bladder management.
- Documentation includes toileting program details, continence status, cognitive abilities, transfer status, toileting status (at home and/or school) and if equipment will improve continence and/or eliminate need of disposable continence supplies.