Hospital Beds & Accessories Policy

VCHCP considers hospital beds and accessories medically necessary durable medical equipment (DME) according to the criteria set forth below.

Hospital Beds:
VCHCP considers hospital beds medically necessary DME for members who have a physician’s prescription and meet the following criteria:

1. Medical records establish the medical necessity for a hospital bed and
2. The member’s condition requires positioning of the body; e.g., to alleviate pain, promote good body alignment, prevent contractures, avoid respiratory infections, in ways not feasible in an ordinary bed; or
3. The member requires the head of the bed to be elevated more than 30 degrees most of the time due to congestive heart failure, chronic pulmonary disease, or problems with aspiration. Pillows or wedges must have been considered; or
4. The member’s condition requires special attachments (e.g., traction equipment) that cannot be fixed and used on an ordinary bed.

A hospital bed is one with manual head and leg elevation adjustments. Elevation of the head/upper body less than 30 degrees does not usually require the use of a hospital bed.

Mattresses:
Mattresses are considered medically necessary DME only if the hospital bed is medically necessary.

Variable Height Feature:
VCHCP considers hospital beds with a manual or electric variable height feature medically necessary DME for members who meet the criteria for hospital beds set forth above and who have any of the following conditions:

1. Severe arthritis and other injuries to lower extremities; e.g., fractured hip, in which the variable height feature is necessary to assist the member to ambulate by enabling the member to place his or her feet on the floor while sitting on the edge of the bed; or
2. Severe cardiac conditions, in which the member is able to leave the bed, but must avoid the strain of “jumping” up and down; or
3. Spinal cord injuries (including quadriplegic and paraplegic members), multiple limb amputees, and stroke members, in which the member is able to transfer from a bed to a wheelchair, with or without help; or
4. Other severely debilitating diseases and conditions, if the member requires a bed height different than a fixed height hospital bed to permit transfers to chair, wheelchair, or standing position.

Powered Chair Conversion Feature:

Medical Policy:
Hospital Beds & Accessories
Effective Date: 11/14/06
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Reviewed/No Updates: 1/28/13; 2/13/14; 2/12/15; 2/11/16; 2/9/17; 2/8/18; 2/14/19; 2/13/20
Electric chair positioning features are *not* considered medically necessary since they are considered convenience features. *Note:* The TotalCare Bariatric Bed is an example of a bed with an electric chair positioning feature.

**Electric Powered Hospital Bed Adjustments:**
VCHCP considers electric powered adjustments to lower and raise head and feet medically necessary DME for members who meet the criteria for hospital beds set forth above *and* meet the following criterion:

- Member has a condition that requires frequent changes in body position and/or where there may be an immediate need for a change in body position (i.e., no delay can be tolerated)

Example of brand name of electric hospital bed includes the Deluxe Franklin Bed.

**Side Rails:**
Side rails for beds may be considered medically necessary DME when the member’s condition requires them. Examples of conditions where bedside rails may be considered medically necessary include members with seizures, vertigo, disorientation, and neurological disorders.

*Note:* Side rails for beds are considered safety features and are excluded from coverage unless they are an integral part of a medically necessary bed.

**Ordinary (Non-Hospital) Beds:**
*Note:* Ordinary beds do not meet VCHCP’s definition of covered durable medical equipment, since beds are not primarily medical in nature, are not primarily used in the treatment of disease or injury, and are normally of use in the absence of illness or injury. An ordinary bed is one that is typically sold as furniture. It consists of a frame, box spring, and mattress. It is a fixed height, and has no head or leg elevation adjustments. An ordinary bed will accommodate most transfers to a chair, wheelchair, or standing position. If needed, it can almost always be adapted to accommodate these transfers. The need for a particular bed height would rarely by itself justify the need for a hospital bed. VCHCP considers power or manual lounge beds not medically necessary, because they are a comfort or convenience item. *Note:* In addition, power or manual lounge beds do not meet VCHCP’s definition of covered durable medical equipment, in that they are not primarily medical in nature, are not primarily used in the treatment of disease or injury, and are normally of use in the absence of illness or injury. These beds, like other ordinary beds, are typically sold as furniture. The following are examples of brands of lounge beds that do not fall within the definition of durable medical equipment:

- Adjust-A-Sleep Adjustable Bed
- Craftmatic Adjustable Bed
- Electropedic Adjustable Bed
- Simmons Beautyrest Adjustable Bed.

**Institutional-Type Hospital Beds:**
Institutional-type hospital beds are inappropriate for home use. These include oscillating beds, springbase beds, circulating beds, cage beds, and stryker frame beds.
Beds that provide kinetic therapy or continuous lateral rotation therapy (e.g., Kinetic Therapy Triadyne Bed, Hill-Rom TotalCare SpO2RT) are considered experimental and investigational for prevention or treatment of pressure sores, because of a lack of evidence in the peer-reviewed medical literature of their effectiveness for that indication (AWMA, 2001; Cullum, et al., 2001; Cullum, et al., 2004). Beds that provide kinetic therapy or continuous lateral rotation therapy are considered experimental and investigational for long-term use outside of the acute-care hospital setting for preventing and treating pulmonary complications because the published peer-reviewed evidence of the effectiveness of these beds is limited to use in critically ill patients in the acute-care hospital setting.

Beds that provide vibration therapy or percussion therapy for preventing and treating pulmonary complications related to immobility are considered experimental and investigational because of a lack of adequate evidence in the peer-reviewed published medical literature of their effectiveness for this indication.

Vail Enclosure Bed:
The Vail Enclosure Bed (Vail Products, Inc., Toledo, OH), a padded bed that is completely enclosed with netting, is considered experimental and investigational because the U.S. FDA has determined that this device poses significant safety risks. According to an FDA public health notification, Vail Products, on June 16, 2005, stated that it is permanently ceasing the manufacture, sale and distribution of all Vail enclosed bed systems. Vail Products will no longer be available to provide accessories, replacement parts, or retrofit kits.

Note: Most plans exclude coverage of Vail Enclosure Beds, as they are considered non-covered safety items. VCHCP's plans cover medically necessary services and supplies for the “diagnosis, care or treatment” of disease or injury. Although restraints, helmets, safety straps, etc., may prevent injury, they are not considered care or treatment of disease or injury. In addition, such safety items are specifically excluded from coverage. Most medical plans specifically exclude charges for care furnished to provide a safe surrounding, including the charges for providing a surrounding free from exposure that can worsen the disease or injury.

Bed accessories:
The following bed accessories are considered medically necessary DME according to the criteria set forth below:

- Bed cradles - bed blanket cradles are considered medically necessary for members with acute gouty arthritis, diabetic ulcers, decubiti, or burns, when necessary to prevent contact with bed coverings.
- Bed pans (autoclavable hospital type) - reusable, autoclavable bed pans are considered medically necessary if member is bed confined.
- Trapeze bars - trapeze bars are considered medically necessary if the member is bed confined and needs a trapeze bar to sit up because of respiratory conditions, to change body position for other medical reasons, or to get in and out of bed. An
“attachable” trapeze bar is not considered medically necessary when used on a non-hospital bed.
- Urinals - urinals are considered medically necessary for bed confined members.

Note: The following accessories do not meet VCHCP's definition of covered durable medical equipment because they are not primarily medical in nature, they are not mainly used in the treatment of disease or injury, and they are normally of use to persons who do not have a disease or injury:
- Bed baths (a.k.a. Schmidt bath)
- Bedboards (i.e., board inserted between bed spring and mattress to give extra support)
- Bed lifters (i.e., bed elevators) (e.g., Burke bed elevator)
- Bed spectacles (used for reading while lying flat in bed)
- Bed trays / reading tables
- Bedrail pads (i.e., protection over bed railing)
- Bed elevation blocks (i.e., blocks to elevate the head or foot of bed)
- Call switches (i.e., device to summon help)
- Foot boards (i.e., board at the end of the bed)
- Gatchboards (i.e., type of bedboard)
- Lapboards (i.e., board used on lap as a table or desk)
- Overbed tables (e.g., Able table)
- Standard beds and mattresses made of allergy-free materials.

Note: The following bed accessory does not meet the requirement of durability for coverage as durable medical equipment:
- Limb restraints (limb holders, wrist restraints, and leg restraints).

A. Attachment: None
B. History:

Author/Reviewers: Cynthia Wilhelmy MD; Date: 09/06/06
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Reviewed/No Changes: Albert Reeves, MD; Date: 12/21/11
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Reviewed/No Updates by: Faustine Dela Cruz, RN & Catherine Sanders, MD
Reviewed/No Updates by: Catherine Sanders, MD & Robert Sterling, MD
Reviewed/No Updates by: Catherine Sanders, MD & Robert Sterling, MD
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C. References


