

Positioning Equipment

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Overview

Positioning cushions, positioning seats for use in vehicles and positioning chairs are used by individuals who require significant postural support. Infants with severe gastroesophageal reflux may use reflux wedges.

Eligible Providers

The following providers may provide positioning equipment:

- Federally qualified health centers
- Home health agencies
- Hospitals
- Indian Health Services
- Medical suppliers
- Pharmacies
- Rural health clinics

Third Party Liability (TPL) and Medicare

Follow these guidelines if the member has TPL or Medicare:

- Providers must meet any provider criteria, including accreditation, for third party insurance or for Medicare to assist members for whom MHCP is not the primary payer
- MHCP quantity limits and thresholds apply to all members unless only Medicare co-insurance or deductible is requested

Eligible Members

Positioning equipment is covered for eligible [MHCP](#) members who meet medical necessity criteria. Some specific products are not covered in long-term care facilities.

Covered Services

Use the most appropriate one of these HCPCS codes for the following services:

- E0190 (positioning cushion, pillow, wedge, sleep system, any shape or size, includes all components and accessories)
- T5001 (positioning seat for persons with special orthopedic needs)

Reflux Wedges

Reflux wedges are covered for infants with severe gastroesophageal reflux, when other methods of positioning have been tried and failed, or when the physician's order states that other methods of positioning are contraindicated for the infant. Documentation must specify the medical condition that requires the reflux wedge, as well as other methods of positioning that have been tried.

Positioning Cushions, Pillows and Wedges

Follow these guidelines for positioning cushions, sleep systems, pillows or wedges:

- Covered for members who need significant postural support when other methods of positioning have been tried and failed or when the physician's order states that other methods of positioning are contraindicated for the member due to the member's medical condition. Positioning equipment must be manufactured to meet medically necessary positioning needs rather than for general use.
- Documentation must specify the medical condition that requires postural support, as well as other methods of positioning that have been tried. Authorization is required when the submitted charge is over \$400. Authorization requests must include documentation that the positioning cushion, pillow or wedge has been prescribed and fitted by a medical professional with experience, and that caregivers have been trained in the use and care of the equipment.
- E0190 includes all components and accessories for positioning pillows and systems, including pillow covers, vacuum pumps and sleep systems. When requesting authorization and billing for positioning pillows or systems, necessary accessories may not be separately billed.
- Accessories dispensed to replace lost or damaged accessories for a patient-owned positioning pillow or system should be billed with E0190 and modifier RB unless a more specific HCPCS code is available for the accessory.

Positioning Seats for use in Vehicles

Positioning seats for use in vehicles are covered with prior authorization for members with special orthopedic or medical needs that cannot be met using conventional car seats or with needs that make conventional car seats medically inappropriate. A positioning seat may be medically necessary for a member with an inability to maintain an unsupported sitting position independently which is caused by a medical condition such as the following (list is not all-inclusive):

- Severe head and trunk instability
- Severe hypotonicity, hypertonicity, spasticity or muscle spasm which result in uncontrollable movement and position changes
- Severe seizure activity that results in uncontrollable movement and position changes
- Orthopedic disease processes resulting in significant bone fragility
- Significant contractures that would result in an inability to perform postural corrections due to vehicle motion
- Orthopedic condition, such as a curvature of the spine, which interferes with proper positioning

Documentation for the authorization request for a positioning seat for use in vehicles must include an evaluation by a physical therapist or occupational therapist, the medical condition that causes the need for the positioning seat, other interventions that have been tried to meet the member's needs, and less-costly positioning seats that have been considered and rejected. Document the member's current height and weight, and the weight capacity and growth potential for the requested seat.

Positioning Seats for use in Homes

Positioning seats for use at home are covered with prior authorization for members with special orthopedic or medical needs during essential activities of daily living that cannot be met using conventional chairs or with needs that make conventional chairs medically inappropriate. A positioning seat may be medically necessary for a member with an inability to maintain an unsupported sitting position independently which is caused by a medical condition such as the following (list is not all-inclusive):

- Severe head and trunk instability
- Severe hypotonicity, hypertonicity, spasticity or muscle spasm which result in uncontrollable movement and position changes
- Severe seizure activity that results in uncontrollable movement and position changes
- Orthopedic condition, such as curvature of the spine, which interferes with proper positioning

Documentation for the authorization request for a positioning seat for use in homes must include the medical condition that causes the need for the positioning seat, the specific activities of daily living for which the seat is requested, other interventions that have been tried to meet the member's needs, and less costly positioning seats that have been considered and rejected. Document the member's current height and weight, and the weight capacity for the requested seat.

Noncovered Services

The following services are not covered:

- Car seats, when used simply to prevent injury to a child as required by law and community practice, are not medically necessary
- Car seats for members who use mobility devices with positioning or support attachments, and whose primary caregiver has a van equipped for wheelchair transportation are a duplication of service
- Car seats for children who do not require positioning assistance
- Positioning equipment requested to meet behavioral needs rather than positioning needs.
- Cervical rolls or pillows are not medically necessary
- Feeding chairs or high chairs for members without significant positioning needs due to a medical condition are not medically necessary
- Positioning seats, including feeding chairs or high chairs, for home use for members who use mobility devices with positioning or support attachments are a duplication of service
- Furniture that is marketed to or useful to the general population, such as recliners, is not medically necessary and is not durable medical equipment
- Heat and massage cushion pads and recliners are not medically necessary and are not durable medical equipment
- Pillows designed to reduce allergens are not medically necessary and are not durable medical equipment
- Vehicle restraint belts or harnesses, except where part of a covered positioning seat, are a duplication of services

Authorization

Authorization is required in the following situations:

- Authorization is required for purchase of E0190 when the submitted charge is over \$400
- Authorization is required for repair of, including replacement accessories for, E0190 when the submitted charge is over \$400
- Authorization is always required for T5001

Submit authorization request and required documentation to the authorization [medical review agent](#).

Billing

Providers are responsible to [coordinate services](#). Refer to the [Billing Policy Overview](#) section of [Provider Basics](#) for general billing information.

Bill positioning equipment using [MN-ITS 837P](#). Refer to the [Billing for Durable Medical Equipment, Medical Supplies, Prosthetics and Orthotics, and Augmentative Devices](#) MN-ITS user manual for claim instructions.

Follow these guidelines for billing:

- Bill purchases of all reflux wedges and positioning cushions, pillows or wedges using E0190 and modifier NU unless a more specific code has been assigned by the Medicare Pricing, Data Analysis and Coding contractor (PDAC). Refer to the [PDAC-Medicare Contractor for Pricing, Data Analysis and Coding of HCPCS Level II DMEPOS Codes](#) webpage for more information.
- Bill replacement of accessories for a patient-owned positioning pillow using E0190 and modifier RB unless a more specific code has been assigned by the PDAC
- Bill purchase of all positioning seats for home or vehicle use using T5001 and modifier NU unless a more specific code has been assigned by the PDAC
- Positioning equipment that requires an authorization must be billed on a separate claim from equipment and supplies that do not require authorization
- The HCPCS code and modifiers must match the authorization
- The electronic claim must include the manufacturer's invoice or price list as an attachment as described in the [Electronic claim attachments](#) webpage

Legal References

[Minnesota Statutes, 256B.0625, subdivision 31](#) Covered Services

[Minnesota Rules, 9505.0310](#)