Medical records from treating practitioner as noted below

**Medical Records should contain:**

**Fixed Height Hospital Beds (E0250, E0251, E0290, E0291, E0328)**

- Medical records document one (1) or more of the following criteria are met:
  - Beneficiary has a medical condition which requires positioning of the body in ways not feasible with an ordinary bed. Elevation of the head/upper body less than 30 degrees does not usually require the use of a hospital bed; or
  - Beneficiary requires positioning of the body in ways not feasible with an ordinary bed in order to alleviate pain; or
  - Beneficiary 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; or
  - Beneficiary requires traction equipment, which can only be attached to a hospital bed

**Variable Height Hospital Beds (E0255, E0256, E0292, E0293)**

- Beneficiary meets criteria for a fixed height hospital bed; and
- Beneficiary requires a bed height different than a fixed height hospital bed to permit transfers to chair, wheelchair or standing position.

**Semi-electric Hospital Beds (E0260, E0261, E0294, E0295, E0329)**

- Beneficiary meets criteria for a fixed height hospital bed; and
Beneficiary requires frequent changes in body position and/or has an immediate need for a change in position.

Heavy Duty Extra Wide Hospital Beds (E0301, E0303)
- Beneficiary meets criteria for a fixed height hospital bed; and
- Beneficiary’s weight is more than 350 pounds, but doesn’t exceed 600 pounds.

Extra Heavy Duty Hospital Beds (E0302, E0304)
- Beneficiary meets criteria for a fixed height hospital bed; and
- Beneficiary’s weight exceeds 600 pounds

Total Electric Hospital Beds (E0265, E0266, E0296, E0297)
- Total electric beds are not covered since the height adjustment feature is a convenience feature.
- Claims for total electric beds will be denied as not reasonable and necessary.

Accessories

Trapeze Equipment (E0910, E0940)
- Records support that the beneficiary needs the device to sit up because of a respiratory condition, to change body position for other medical reasons, or to get in or out of bed.

Heavy Duty Trapeze Equipment (E0911, E0912)
- Records support that the beneficiary meets the criteria for regular trapeze equipment (see above) and the patient’s weight is more than 250 pounds.

Bed Cradle (E0280)
- Records support that a bed cradle is necessary in order to prevent contact with the bed coverings.

Side Rails (E0305 or E0310) or Safety Enclosures (E0316)
- Covered when they are required by the beneficiary’s condition and they are an integral part of, or an accessory to, a covered bed.

Replacement Innerspring Mattress (E0271) or Foam Rubber Mattress (E0272)
- Beneficiary owns a hospital bed that requires a mattress replacement.