



Be Legendary.

Health & Human Services

## BATHTUB AND SHOWER EQUIPMENT

Service Authorization: None

### DURABLE MEDICAL EQUIPMENT MANUAL

EFFECTIVE: July 1, 2011

COVERAGE AND LIMITATION CRITERIA AND POLICIES

REVISED: December 2025

### BATHTUB AND SHOWER EQUIPMENT

A bath/shower chair is used in the bathtub or shower to bathe in a seated position. A tub transfer bench goes across the side of the tub and allows a member to slide into the tub and sit safely during bathing.

Specialty bath/shower chairs are covered when a member requires postural support and stability while bathing. The frame is adjustable to provide tilt and recline to meet various positioning needs.

#### Indications and limitations of coverage and medical appropriateness:

Limited to one every five years.

All of the following criteria must be met:

- Unable to get in/out of the bath/shower independently and is unable to sit or stand in the bath/shower independently.
- Home assessment determines that bath/shower access is possible for the requested equipment.
- Home assessment determines that once the equipment is in the bath/shower enclosure, caregiver access to the member is adequate.

All accessories for the specialty chair require medical justification and must be included in the medical information provided.

Accessories/items with the miscellaneous code E1399 require service authorization and a manufacturer invoice reflecting the acquisition cost on the requesting service authorization.

Other accessories, such as lateral bath chair supports, chest or pelvic straps, or wedge and pommel cushions, are medically necessary when a member requires additional support to maintain proper alignment of the head or trunk or to remain safely on the bath chair during bathing.



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Indications for coverage of the **tilt/recline feature**:

- A tilt/recline shower chair is a shower chair that can be tilted or reclined to various angles, provides extensive support, and can be rolled into a shower for bathing. Prior approval is required. A tilt/recline shower chair is considered medically necessary when a member meets any **one** of the following criteria:
- Has extensive weakness, contractures, or abnormal tone requiring full body support; **or**
- Requires total assistance for transfers and bathing; **or**
- Has a medical need that requires the tilted or reclined position when upright; **or**
- Requires pressure relief at all times when sitting.

Indications for coverage of a **non-standard seating system**:

- Current decubitus that is a stage 3 or 4; **and**
- Shower/commode chair needed for a minimum of 30 minutes or longer; **or**
- No decubitus and use of the shower/commode chair for a minimum of 2 hours or longer per toileting session.

Indications for coverage of **foot plates**:

- No functional use of the lower limbs.

Indications for **coverage of elevating leg rests**:

- Musculoskeletal condition that prevents 90-degree flexion of the knee or meets medical necessity for the tilt/recline feature on the shower/commode chair.



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Indications for coverage of a heavy-duty shower/commode chair:

- Documentation of the member's weight to determine justification.

#### Documentation Requirements:

- Home Assessment
- Documentation to support that a less costly system will not meet the needs of the individual.
- A prescription from a prescribing physician
- Physician's documentation needs to address medical necessity.
- If requesting for a member under 21 years old, the request must address the growth potential of the item(s) requested.
- A prescription from a prescribing physician/practitioner.
- Medical documentation supporting the need.
- Physician/practitioner exam within 90 days of the service authorization start date.



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Date Revised	Revisions
March 2017	Reformatted and reviewed.
November 2019	<p>Reviewed. Header logo replaced with new logo.</p> <p>Revised Documentation Requirements section:</p> <p>Deleted:</p> <ul style="list-style-type: none"><li>• A prescription from prescribing physician</li><li>• Physician's documentation needs to address medical necessity.</li></ul> <p>Added:</p> <ul style="list-style-type: none"><li>• A prescription from prescribing physician/practitioner.</li><li>• Medical documentation supporting the need.</li><li>• Physician/practitioner exam per current DME Manual's requirements.</li></ul>
November 23, 2023	<p>Deleted:</p> <ul style="list-style-type: none"><li>• Physician/practitioner exam per current DME Manual's requirements.</li></ul> <p>Added:</p> <ul style="list-style-type: none"><li>• Physician/practitioner exam within 90 days of the service authorization start date.</li></ul> <p>Reviewed and reformatted. Header logo replaced with new logo.</p>
December 17, 2025	Reviewed and reformatted. Removed "CMN Required" from header.