SPECIFIC CRITERIA  The patient must meet all of the following:

- Patient must be Medicaid eligible.
- Patient must have a physician’s prescription.
- Patient must have an ACHN Referral.
- Submitted documentation* must include patient’s condition.
- Commode chair documentation* includes weight, depth and width.
- Documentation* of sufficient evidence to support replacement.

DIAGNOSIS CODES

Please refer to Chapter 14 of the Provider manual for the ICD-10 crosswalk codes.

PROCEDURE CODES

E0168

Maximum yearly limits apply to the procedure code indicated above. Request for replacement of this code will be limited to once every two years based on a review of submitted documentation requested.

*Documentation may include notes from the patient chart.