

**Criteria Checklist**  
**Alabama Medicaid Agency**  
**Specialty Car Seats**  
Children under the age of 21 and EPSDT eligible

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**PREREQUISITE CRITERIA** *All of the following **must** be met with supporting documentation\*:*

- Patient is Medicaid eligible
- Patient has a current EPSDT referral
- The physician must prescribe the specialty care seat as medically necessary
- The patient's weight and age must be within **one** of the following groups:

<b>Child's Weight</b>	<b>Approximate Age of Child</b>
<input type="checkbox"/> Birth up to 10kg/22lbs	Birth up to 6-9 months
<input type="checkbox"/> Birth up to 13kg/29lbs	Birth up to 12-15 months
<input type="checkbox"/> Birth up to 18kg/40lbs	Birth up to 4 years
<input type="checkbox"/> 9-18kg/20-40lbs	About 9 months to 4 years
<input type="checkbox"/> 9-25kg/20-55lbs	About 9 months to 6 years
<input type="checkbox"/> 15-25kg/33-55lbs	About 4 to 6 years
<input type="checkbox"/> 9-36kg/20-79lbs	About 9 months to 12 years
<input type="checkbox"/> 15-36kg/48-79lbs	About 4 to 12 years

**ADDITIONAL CRITERIA** *One of the following must be met with supporting documentation:*

- The patient has poor head control
- The patient has muscle weakness
- The patient has poor postural control

**DIAGNOSIS CODES**

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

**PROCEDURE CODES**

E1399

Maximum yearly limits apply to each of the procedure codes indicated above. Requests for replacement of E1399 will be limited to once every five years for recipients **above** the age of three and once every two years for patients **up to** the age of three based on a review of submitted documentation\* requested.

*\*Documentation may include notes from the patient chart and patient medical records.*