

An HCS/AAA client needs bathroom equipment such as a shower chair. Start by asking...

Submit PA to Apple Health (AH) plan following all required procedures.

AH Review

If coverage is denied

If Approved

If YES, you must seek AH coverage.

“Is the bathroom equipment needed due to a recent* medical event such as a stroke or amputation?”**

If No, this will be a SS authorization.

Is the item necessary for independent living?
 Examples of client conditions/issues where HCA will **never** cover bathroom equipment include such things as:

- Obesity
- Fatigue
- Malaise
- Debility
- Prevention of SNF placement
- Osteoarthritis
- Chronic illness
- Increased age
- Deconditioning

Obtain recommendation from medical professional. THEN...

Provide case worker a quote attesting to either 80% of MRSP OR 125% of invoice cost (**exception:** commodes quote should be the state Medicaid rate). Sales tax should be indicated. Best practice: provide supporting documentation like a page from your catalogue / price list or your acquisition cost (wholesale price). Then...

Case Worker submits an ETR to ALTSA HQ. If approved, Case Worker creates an authorization using blanket code SA875 in “Reviewing Status”.

Upon confirmation of error-free authorization in ProviderOne, deliver the item to the client.
 Send confirmation of delivery to case worker and final invoice.

Inform the case worker Apple Health denied and a social service authorization is necessary (in reviewing status). AN ALTSA ETR is NOT necessary if an AH PA was denied*!



Client receives the item.

Claim in the **Medical Portal** of ProviderOne

The most commonly requested items under blanket code SA875 that are not typically covered by Apple Health (AH):

- Shower/commode chair
- Raised toilet seat
- Bathtub wall rail (grab bars)
- Standard and heavy duty bath chairs
- Transfer bench for tub or toilet
- Shower chair
- Bedside commode (use State Medicaid rate)
- Bath stools
- Toilet Rails

Client receives the item.



Upon confirmation of receipt of item from client, case worker revises the authorization to the date of delivery and to “Approved” status. If the authorization is error free, then...

- Claim in the **Social Service Medical Portal** in ProviderOne, using the correct HCPCS code.
- Collect client responsibility, if it is owed.

* Recent means in the last 6 months. It could mean longer if the client is in a skilled nursing setting which has been providing an item that is filling a need, if the acute event precipitated the individual’s admit (such a stroke).

**EXCEPTION: All rolling shower equipment MUST go be reviewed for possible coverage by Apple Health. If denied by AH, an ALTSA HQ ETR is required.