



# MEDICAL POLICY STATEMENT

## Michigan Health Link

Policy Name & Number	Date Effective
Special Needs Car Seats-MI Health Link-MM-1574	06/01/2024
Policy Type	
<b>MEDICAL</b>	

Medical Policy Statement prepared by CareSource and its affiliates are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services include, but are not limited to, those health care services or supplies that are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part, or significant pain and discomfort. These services meet the standards of good medical practice in the local area, are the lowest cost alternative, and are not provided mainly for the convenience of the member or provider. Medically necessary services also include those services defined in any Evidence of Coverage documents, Medical Policy Statements, Provider Manuals, Member Handbooks, and/or other policies and procedures.

Medical Policy Statements prepared by CareSource and its affiliates do not ensure an authorization or payment of services. Please refer to the plan contract (often referred to as the Evidence of Coverage) for the service(s) referenced in the Medical Policy Statement. If there is a conflict between the Medical Policy Statement and the plan contract (i.e., Evidence of Coverage), then the plan contract (i.e., Evidence of Coverage) will be the controlling document used to make the determination. According to the rules of Mental Health Parity Addiction Equity Act (MHPAEA), coverage for the diagnosis and treatment of a behavioral health disorder will not be subject to any limitations that are less favorable than the limitations that apply to medical conditions as covered under this policy.

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A. Subject

**Special Needs Car Seats**

B. Background

Safe transportation for individuals with certain functional needs include not only the proper restraints but also the correct positioning to secure the person in the vehicle. Currently, the Federal Motor Vehicle Safety Standard (FMVSS) Number 213 regulates the design and performance of restraint systems for persons weighing up to 80 pounds. However, people with special needs greater than 80 pounds in weight may require car seat restraint, and several manufacturers have tested car seats beyond an 80-pound weight maximum.

Once a person has outgrown a standard 5-point harness car seat, options include car seats specially designed for full support of the person's head, neck, and back, supporting up to 115 pounds. Conventional travel vests or specialized medical seating can be used for persons who require additional trunk support but have stable neck control. Some larger people with special needs, including poor trunk control, can be transported in a special needs belt-positioning booster seat or a conventional belt-positioning booster with trunk support.

C. Definitions

- **Booster Seat** – A seat used for a person during transportation that lifts the person by several inches, designed for use with an adult seat belt.
- **Car Safety Seat (CSS)** – A portable seat for a person weighing under 80 pounds that attaches to an automobile seat and holds the person safely.
- **Durable Medical Equipment (DME)** – Equipment that can withstand repeated use, is primarily and customarily used to serve a medical purpose, and generally is not useful to a person in the absence of an illness or injury.
- **Federal Motor Vehicle Safety Standard 213** – FMVSS No. 213 requires child restraint systems (CRSs) to be equipped with attachments that enable the CRS to attach to the vehicle's restraint anchorage system. The agency added a height provision to make the new standard's applicability clear to booster seat manufacturers who choose not to label their restraints with a weight.
- **National Highway Traffic Safety Administration (NHTSA)** – A federal agency that is part of the Department of Transportation and focuses on transportation safety in the United States via regulatory enforcement, motor vehicle and highway safety, setting fuel economy standards, and partnerships with state and local governments.
- **Neck Loading** – The dynamic loading of the neck that occurs when the torso is suddenly stopped by the seat belt while the head continues pulling from the neck.
- **Travel Vest** – Optimizes the existing vehicle seat belt system to protect the person by keeping a low center of gravity and allowing the vehicle seat belt and seat cushion to manage crash forces.

The MEDICAL Policy Statement detailed above has received due consideration as defined in the MEDICAL Policy Statement Policy and is approved.

#### D. Policy

- I. CareSource considers a special needs car seat medically necessary when **ALL** the following clinical criteria are met:
  - A. The car seat is a restraint system that meets National Highway Traffic Safety Administration Federal Motor Vehicle Safety Standard (FMVSS) 213.
  - B. The car restraint system is not modified or used in a manner other than that specified by the manufacturer unless the modified restraint system has been crash tested and meets all applicable FMVSS's approved by the NHTSA.
  - C. The special needs car seat is the most cost-effective option while still addressing the medical/functional needs of the member.
  - D. The safety and effectiveness of the special needs car seat has been substantiated by current evidence-based national, state, and peer-reviewed medical guidelines.
  - E. The length or weight limits of a conventional CRS with an internal 5-point harness has been outgrown and at least one of the following criteria is met:
    1. The member has an airway obstruction due to one or more of the following (not an all-inclusive list):
      - a. hypotonia
      - b. craniofacial abnormalities
      - c. primary airway problems
    2. The member has a physical condition that prevents the independent maintenance of a seated position or requires support to allow a functional position or prevent further disability.
    3. The member has gastrointestinal issues, including but not limited to:
      - a. emesis
      - b. gastroesophageal reflux (GERD)
      - c. gastrostomy feeding tube
    4. The member uses a spica cast.
- II. Persons with a tracheostomy tube should not use a CRS with a harness or seat belts that could dislodge the tube. It is strongly recommended that an occupational therapist or passenger safety technician with training and experience in the safe transportation of persons with special needs provide guidance for appropriate equipment selection and use.
- III. A special needs car seat will not be considered medical necessary for any of the following:
  - A. The special needs car seat is a more recent advancement in technology when the member's current special needs car seat can meet the member's basic medical/functional needs.
  - B. The special needs car seat is considered investigational, experimental, or has unproven medical indications for use.

- IV. The following information must be submitted for review to obtain prior authorization.
- A. The member must have a face-to-face visit with a health provider (eg, physician, physician assistant, certified nurse practitioner, or certified clinical nurse specialist) prior to the initial written order with documentation of **ALL** the following:
    - 1. Narrative description of all items, accessories, and options ordered.
    - 2. Supplier's charge.
    - 3. Initial order for purchase.
    - 4. Replacement of the base equipment.
    - 5. Change in the order for the item.
    - 6. Change in the supplier of the item and the new supplier is unable to obtain a copy of the original order and documentation from the original supplier.
  - B. Medical documentation of the face-to-face visit may be indicated on the prescription/order or other medical record. The health provider must maintain documentation of the face-to-face visit including the following information:
    - 1. Name of the provider performing the evaluation.
    - 2. Clinical findings that support the need for the special needs car seat.
    - 3. Confirmation of the primary reason for the visit that relates to the need for the special needs car seat.
    - 4. Physician attestation signature.
  - C. If the provider conducting the face-to-face does not write the initial order, the treating provider must communicate the details of the visit to the ordering provider.
  - D. A copy of the face-to-face visit must be kept in the member's file and the original sent to the DME supplier. The DME supplier must date stamp the face-to-face documentation and maintain it in the member's file. The face-to-face documentation must be available upon request by CareSource at any time and accompany other documentation required for the prior authorization request.

E. Conditions of Coverage

N/A

F. Related Policies/Rules

N/A

G. Review/Revision History

DATE		ACTION
<b>Date Issued</b>	12/05/2023	New policy. Approved at Committee.
<b>Date Revised</b>	03/13/2024	Annual review: editorial changes, removed forms MSA-1656 and MSA-1653-D, medical supplier documentation, and CMN, added D.IV.A.1-2 and D.IV.B4., and replaced MDHHS with CareSource in the policy, and updated references. Approved at Committee.
<b>Date Effective</b>	06/01/2024	

The MEDICAL Policy Statement detailed above has received due consideration as defined in the MEDICAL Policy Statement Policy and is approved.

<b>Date Archived</b>		
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## H. References

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