## Screening List for Durable Medical Equipment (DME)

The examples provided below are not an all-inclusive list and are offered as a guide only. Refer to program requirements, coverage criteria, and the fee schedule for specific service information.

Activity Chair
Airway Clearance System
Apnea Monitor
Automatic External Defibrillator
Bath and Toilet Aid
Bed Side Rails
Breast Pump
Canes and Crutches
High Frequency Chest Wall Oscillation Device
Car Seat
Commode
Compression Garments
Continuous Passive Motion Device
Dynamic Splinting
Emergency Response System
Environmental Modifications

Gait Trainer
Gloves
Glucose Monitor
Hearing Aid
Heating Pad
Heat Lamp
Helmet

Home Infusion Therapy
Hospital Bed
Humidifier (oxygen)
Incontinence Care Supplies
Infusion Pump
IPPB Machine
Iron Lung

Enteral Nutrition
Food Thickener

## Minor Environmental Modifications

Mobile Geriatric Chair
Molded Shoes
Muscle Stimulator
Nebulizers/Supplies/Compressor
Negative Pressure Wound Therapy
Neuromuscular Stimulator
Orthosis
Osteogenic Stimulator

## Special Medical Equipment

Ostomy Supplies
Overbed Table
Oximeter
Oxygen
Paraffin Bath Unit (Portable)
Patient Lift
Peak Flow Meter
Percusssor
Transcutaneous Electrical Nerve Stimulator/Supplies
Phototherapy
Pneumatic Compressor/Appliance
Pneumogram
Positive Airway Pressure (PAP) Device
Postural Drainage Board

Lancets/Lancing Device
Lymphedema Pump

Prosthesis
Rollabout Chair
Salivary Reflex Stimulator
Seat Lift Chair/Motorized Mechanism
Sitz Bath
Spirometer
Stander

Speech Generating Device
Stroller
Suction Machine
Surgical Dressing Supplies
Therapeutic Shoes
Total Parental Nutrition
Traction Equipment

Trapeze Bar
Ultraviolet Cabinet
Urinal
Ventilator
Walker

Power Operated Vehicle
Pressure Reducing Support Surfaces

Wheelchair
Wigs

Items that do not appear on this list may be considered for coverage. Click here for additional information about the Nonstandard Durable Medical Equipment Request Process.

