

<b>National Imaging Associates, Inc.*</b>	
<b>Clinical guidelines</b> <b>DURABLE MEDICAL EQUIPMENT</b>	<b>Original Date: April 2016</b>
<b>Physical Medicine – Clinical Decision Making</b>	<b>Last Revised Date: October 2020</b>
<b>Guideline Number: NIA_CG_609</b>	<b>Implementation Date: July 2021</b>

### Policy Statement

This policy will be used to define Durable Medical Equipment (DME), as well as support the medical necessity of the requested reviews for prior authorization of or billed DME.

### Scope

This policy applies to DME requests for adult and pediatric members in any setting, applicable to all physical medicine practitioners, including chiropractors, physical therapists, occupational therapists, and speech language pathologists.

### Medical Necessity

Durable Medical Equipment and services are medically necessary when the following criteria are met:

- The equipment is expected to provide improvement in specific, measurable functional deficits related to a documented illness or injury; **AND**
- The DME is provided by a health care professional; **AND**
- The equipment does not have significant non-medical uses; **AND**
- Lesser or alternative options have been ruled out; **AND**
- The clinical records clearly establish the medical need for the DME

Clinical documentation must include the following elements:

- A diagnosis that justifies the equipment or supply being requested
- A treatment plan (anticipated start and end date) for the training and/or use of the DME
- Documented measurable functional deficit(s)
- Expected outcomes and benefit related to a measurable functional deficit
- Documentation of the healthcare providers training/education, supervision, and monitoring of the use of the DME, as evidenced by the identification of provider type and signature in the record
- Documentation of a trial of conservative services that failed to improve a measurable functional deficit unless contraindicated
- When appropriate, documentation of a trial of in-office use that provided improvement in a measurable functional deficit

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- When appropriate, documentation of home or vehicle assessment to ensure equipment could be utilized in the home or vehicle
- Documentation of prior equipment of a similar purpose and reasons equipment no longer meets current needs
- If an insurance plan does not cover a DME, then any visit associated with instruction on the DME would not be covered

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**BACKGROUND:****Definition**

- DME is any equipment that provides therapeutic benefits to a patient for certain conditions and/or illnesses defined below.
- DME consist of items which:
  - Are used to treat a defined illness or injury
  - Are not useful to a person in the absence of illness or injury
  - Are reusable and durable enough for repeated use
  - Are appropriate for use outside of a medical setting such as home, at school, or a work
- DME includes but is not limited to: back supports/braces, cervical collars, foot orthotics, electrical stimulation units, traction devices, hospital beds, equipment to aid with bathing and toileting, equipment to aid with seating and positioning, and wheelchairs and assistive devices for gait.
- The use of any DME must have evidence of efficacy in the peer reviewed guideline, systematic review, and/or randomized controlled trial medical literature. The use of these devices is not considered medically necessary in the absence of scientific evidence in peer reviewed medical literature.

**POLICY HISTORY SUMMARIES:**

July 2019

- Addition to assistive device section: spinal cord injury, muscular dystrophy, wheelchair user population, spinal muscular atrophy, brain injury, cerebral palsy, Rett Syndrome, and ASD.
- Completed pulling of older references (10+ years) and replaced references that were appropriate to this guideline.
- Moved definition section to background.

January 2020

- No edits made to guideline in response to the review of the evidence base

October 2020

- Changes made to broaden the scope of the guideline and remove specific types of DME. Will utilize other guidelines for specific DME items.
- Added documentation to show lesser or alternative equipment was not appropriate
- Added documentation of home or vehicle assessment to ensure equipment could be used as intended
- Expanded list of possible DME examples



## REFERENCES

Academy of Pediatric Physical Therapy (APPT) of the American Physical Therapy Association (APTA). Resources on reimbursement for pediatric physical therapy services and durable medical equipment. Available at: <https://pediatricapta.org/includes/fact-sheets/pdfs/ReimbursementBrochure.pdf?v=1>. Accessed August 19, 2020.

Centers for Medicare and Medicaid Services (CMS). Durable medical equipment (DME) coverage. Available at: <https://www.medicare.gov/coverage/durable-medical-equipment-dme-coverage#:~:text=%20DME%20meets%20these%20criteria%3A%20%201%20Durable,lifetime%20of%20at%20least%203%20years%20More%20>. Accessed August 19, 2020.

Centers for Medicare and Medicaid Services (CMS). Medicare claims processing manual. Chapter 20 – Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). Revised July 31, 2020. Available at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c20.pdf>. Accessed September 22, 2020.

Strategic Management Services (SMS). Durable medical equipment (DME) documentation required for Medicare payment. January 2009. Available at: <https://www.compliance.com/resources/durable-medical-equipment-dme-documentation-required-for-medicare-payment/>. Accessed August 21, 2020.

Reviewed/Approved by NIA Clinical Guideline Committee

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