

Medicare Minute Script – May 2025

Medicare and Durable Medical Equipment

Durable medical equipment, or DME for short, helps you do daily tasks like bathing and dressing.

Point 1: Know what DME Medicare covers.

Medicare usually covers DME if it:

1. Is durable, meaning it can be used many times.
2. Has medical purpose.
3. Is appropriate and needed for use in the home, although you can also use it outside the home.
4. Is likely to last for three years or more.

Examples of DME include wheelchairs, walkers, hospital beds, portable oxygen equipment, orthotics, supplies, prosthetics, and some diabetes supplies, including glucose monitors. Medicare can also cover catheters, but only if your need for them is permanent. Medicare also covers some medications and supplies that you use with your DME, even if they can be thrown away. For example, Medicare covers lancets and test strips that you use with diabetes self-testing equipment. Examples of equipment that are not DME include surgical facemasks, home modifications like wheelchair ramps, incontinence pads, and wheelchairs or scooters that are only for outside the home.

Point 2: Know how Medicare covers DME.

Your primary care provider, or PCP, must prescribe your DME. Your PCP must sign an order, prescription, or certificate. In this document, your PCP must state that:

- You need the DME to help a medical condition or injury.
- The equipment is for home use.
- And, if applicable, you had a face-to-face visit with your PCP. Your PCP should know if Medicare requires this visit for your DME.

Note that if you need a manual or power wheelchair or scooter, the process is different. Your PCP may need to send a prior authorization request to Medicare.

Point 3: Go to the right DME supplier.

Once you have your PCP's order or prescription, you must take it to the right supplier. If you have a Medicare Advantage Plan, you must follow the plan's rules for getting DME. For example, your plan may need you to get approval from the plan before getting your DME. Or you may need to use a supplier in the plan's network of suppliers or use a preferred brand of DME. Contact your plan to learn more about its rules.

If you have Original Medicare, you should get your DME from a Medicare-approved supplier that takes assignment (that is, accepts Medicare's payment rates). These suppliers have the lowest cost for you. Many suppliers are Medicare-approved but don't take assignment. These suppliers may charge you more for your DME. Don't use suppliers who haven't signed up to bill Medicare for DME. Medicare won't pay for equipment

or supplies you get from these suppliers. This means you must pay the whole cost. Call 1-800-MEDICARE or visit Medicare.gov to find a supplier.

Point 4: Look out for DME fraud, errors, and abuse.

Red flags:

- You see charges for DME on your Medicare statements you didn't need or never asked for.
- You were offered "free" equipment or supplies.
- You had a DME provider ask for your Medicare number at a presentation, during a sales pitch, or on a phone call.
- You were given a cheaper, lower quality item but Medicare was billed for a custom or fitted item.

Be aware of aggressive marketing that tries to offer you "free" equipment or persuade you to change DME providers. Before making a decision, speak with your doctor and your current provider to see if there is a need for you to change. Don't give any personal information to someone who calls you offering DME that you do not want or need. Check your Medicare statements often. If you see any suspicious charges or believe your provider could have billed your Medicare by accident, call your provider to follow up about the potential error. If you think it could have been DME fraud or abuse, contact your Senior Medicare Patrol, or SMP.

Take Action:

1. Talk with your doctor if you think you need DME.
2. If you have Original Medicare, call Medicare to ask for a list of approved DME suppliers that take assignment in your area. If you have a Medicare Advantage Plan, call your plan to learn about any more requirements you must meet to get covered DME. Also ask for a list of in-network DME providers.
3. Call your local State Health Insurance Assistance Program (SHIP) for help understanding the DME benefit or appealing DME denials.
4. Call your local SMP if you think you have experienced potential DME fraud, errors, or abuse.

Local SHIP Contact Information	Local SMP Contact Information
SHIP toll-free: SHIP email: SHIP website: To find a SHIP in another state: Call 877-839-2675 and say "Medicare" when prompted or visit www.shiphelp.org .	SMP toll-free: SMP email: SMP website: To find an SMP in another state: Call 877-808-2468 or visit www.smpresource.org .

This document is supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$2,534,081 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS, or the U.S. Government.

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