

Common-Needed Durable Medical Equipment & Required Documentation

	Cash			Medicare			Medicaid			
	Referral	Prior-auth	Chart notes	Referral	Prior-auth	Chart notes	Referral	Prior-auth	Chart notes	Bath Safety Form
Bed Cane				Not Covered			Not covered			
Canes				X			X			
Commode				X		X	X	X	X	X
Grab bar				Not Covered			Not covered			
Hospital Beds				X		X	X		X	
Manual Wheelchairs				X		X	X	X	X	
Oxygen Concentrator	X			X		X	X		X	
Patient Lift (e.g. Hoyer Lift)				X		X	X		X	
Power Wheelchairs				X	X	X	X	X	X	
Reacher/Grabber				Not Covered			Not covered			
Shower Chair				Not Covered			X	X	X	X
Toilet Seat Riser				Not Covered			X	X	X	X
Walkers				X		X	X	X	X	
				Note: MedAdvantage Plans will require prior authorization for wheelchairs						

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