

**DURABLE MEDICAL EQUIPMENT MANUAL**

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2025

**List of Routine Drugs, Supplies & Durable Medical Equipment (DMEPOS)**

The following is a list of routine drugs and DMEPOS items that are reflected on the Swing Bed Facilities' cost statement as part of their per diem rate and are not payable to the pharmacy or other suppliers.

For a searchable list of DMEPOS codes that show whether a swing bed facility is responsible, refer to the [Procedure Code Look-Up Tool or the detailed DME fee schedule](#).

**Over-The-Counter (Non-Legend) Items, including, but not limited to:**

- Aspirin, Acetaminophen
- Antacids
- Antidiarrheals
- Antihistamines
- Hemorrhoidal Preparations
- Laxatives
- Liniments
- Lotions/Creams
- Vitamins

**Personal Items, including, but not limited to:**

- Artificial Sweeteners
- Breath Fresheners
- Cleansing Antibacterial Solutions
- Denture Cream, Denture Adhesive
- Deodorant
- Mouthwash

**DURABLE MEDICAL EQUIPMENT MANUAL**

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2025

**List of Routine Drugs, Supplies & Durable Medical Equipment (DMEPOS)**

**Personal Items, including, but not limited to:**

- Razor Blades
- Salt Substitute
- Shampoos
- Soap
- Talcum Powder
- Tissues
- Toothpaste, Tooth powder, Toothbrush

**Supplies and Durable Medical Equipment, including, but not limited to:**

- Ace Bandages
- Aero-chamber/Inhale aid
- Alcohol (rubbing), Antiseptics, Hydrogen Peroxide
- Ambu Bags
- Apnea Monitors
- Band-Aids
- Bandages, including Ace bandages
- Batteries, Hearing Aid, Larynx
- Bedrails, Footboard
- BIPAP, CPAP Machines
- Blood Glucose Monitoring Devices, test strips, and supplies

**DURABLE MEDICAL EQUIPMENT MANUAL**

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2025

**List of Routine Drugs, Supplies & Durable Medical Equipment (DMEPOS)**

**Supplies and Durable Medical Equipment, including, but not limited to:**

- Blood Stool Testers
- Catheters, Tubing, Bags & Irrigating Syringes
- Communication Devices
- Clinistix, Ketostix, Dextrostix
- Clinitest, Diastix, Ketodiastix, etc.
- Commode Chairs
- Compression Stockings
- Cotton
- Cradles
- Crutches, Canes
- Deodorizers
- Dressings, Vigilon, Duoderm, Bioclusive
- Enemas, equipment and disposable
- Examination Equipment
- Finger Cots
- Fleece Pads, Sheep Skin
- Foam Pads
- Gastric Feeding Tubes, Sets, Bags
- Gauze, Gauze pads, 4 x 4's
- Geriatric Chairs

**DURABLE MEDICAL EQUIPMENT MANUAL**

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2025

**List of Routine Drugs, Supplies & Durable Medical Equipment (DMEPOS)**

**Supplies and Durable Medical Equipment, including, but not limited to:**

- Gloves
- Heating Pads
- Hot Water Bottles
- Humidifiers
- Ice Bags
- Incontinence Pads & Briefs, Under pads, Sanitary Napkins, Disposable or Reusable Diapers
- IPPB Equipment
- IV Solutions Without Medication Admix
- IV Tray or Subcutaneous Tray and Tubing
- Lamps (SUN, SADD, psoriasis)
- Lubricants, e.g., Vaseline, K-Y Jelly
- Lymphoedema devices
- Needles, reusable and disposable (excluding Diabetic)
- Nebulizers
- Ostomy Supplies and Related Items
- Oxygen, Oxygen Masks, Oxygen Cannula, Oxygen Catheters, Oxygen
- Concentrators, Carts, Stands, Regulators, etc.
- Pumps, Parenteral and Enteral
- Q-Tips, Applicators
- Restraints

**DURABLE MEDICAL EQUIPMENT MANUAL**

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2025

**List of Routine Drugs, Supplies & Durable Medical Equipment (DMEPOS)**

**Supplies and Durable Medical Equipment, including, but not limited to:**

- Roho Cushions
- Seating Systems non-customized
- Sodium Chloride for Irrigation/Inhalation
- Specialized beds or mattresses costing less than \$25 per day
- Standing Frames
- Suction Machine and Supplies
- Supplemental Nutritional Formulas, e.g., Ensure, Infant Formula
- Suppositories, Glycerin
- Suture Trays
- Syringes, all types
- Tape, e.g., Micropore, Surgical
- T.E.D. Stockings
- Telfa
- Tes-Tape
- Thermometers
- Toilet Risers
- Tracheostomy Supplies
- Trapeze Bars
- Under pads
- Vaporizers

**DURABLE MEDICAL EQUIPMENT MANUAL**

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2025

**List of Routine Drugs, Supplies & Durable Medical Equipment (DMEPOS)**

**Supplies and Durable Medical Equipment, including, but not limited to:**

- Walkers
- Wheelchairs

**Vaccines for mass immunizations, including, but not limited to:**

- Influenza Vaccines
- Pneumonia Vaccines
- Covid Vaccines

**Allowed for separate payment:**

All related policy coverage, limitations, and documentation requirements apply.

- Hearing Aids
- Orthotics, shoes for diabetics, customized shoes, and custom seating systems for member-owned equipment are allowed for separate payment but must be ordered by a specialist and receive prior approval.
- Prosthetics must be ordered by a specialist and receive prior approval.
  - Excluded from requiring prior approval: (L8000 – L8030)
- Repairs to member-owned equipment if the repair cost is less than 75% of the replacement cost. See the Repair/Replacement section of the DME Manual for detailed information
- Specialized beds or mattresses costing \$25 or more per day
- Vacuum-assisted wound closure system
- Wheelchairs and accessories



Health & Human Services

**SWING BED FACILITY**

**DURABLE MEDICAL EQUIPMENT MANUAL**

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2025

**List of Routine Drugs, Supplies & Durable Medical Equipment (DMEPOS)**

Date Revised	Revisions
March 2019	Reformatted Appendix D and separated specific to Swing Bed Facility to new format. Under Allowed for separate payment section: Bullet 3 added “must be ordered by a specialist and receive prior approval. Excluded from requiring prior approval: (L8000 – L8030)”. Bullet 6 removed “Repairs to recipient owned equipment and if total cost of accumulative repair is less than 75% of replacement cost. Effective 6-15-2013” Added “Repairs to member owned equipment if the repair cost is less than 75% of replacement cost. See Repair/Replacment section the DME Manual for detailed information.”
December 29, 2022	Reviewed and reformatted. Added new logo.
November 28, 2023	Reviewed. No revisions.
December 26, 2025	Reviewed and reformatted. Added ‘For a searchable list of DMEPOS codes that show whether a skilled nursing facility is responsible, refer to the <a href="#">Procedure Code Look-Up Tool</a> or the <a href="#">detailed DME fee schedule</a> ’.