



DURABLE MEDICAL EQUIPMENT MANUAL

COVERAGE AND LIMITATION CRITERIA AND POLICIES

ORIGINAL EFFECTIVE DATE: MARCH 2007

REVISED: January 2025

Non-Covered Items No Exceptions

Reimbursement is limited to only the most economical and medically necessary DME delivered in the most appropriate and cost-effective manner. An item is not reimbursable if another item is equally safe, effective, and costs substantially less.

Service authorization requests submitted for items included in the Non-Covered Items No Exceptions Coverage and Limitations Criteria/Policy will be voided. A denial will not be issued as the Department cannot and will not allow a service authorization request solely for a denial in order to receive payment from another source. Instead, provide the alternative payer with documentation supporting the non-coverage of the item (Provider manuals, Department notices, and/or bulletins).

If a medical practitioner or DME provider would like to recommend a non-covered item(s) to be covered by North Dakota Medicaid coverage, they can fill out and submit the [SFN 905](#) along with any supporting documentation to dhsmed@nd.gov.

The following is a list of some generic categories/items specifically determined as not reimbursable by the State Plan (general) Medicaid through the DMEPOS program. All coverage decisions are based on federal and state mandates for program funding by the U.S. Department of Health and Human Services, and the Medicare Program or the Department's

Adaptive Equipment for Daily Living

- Alarms or environmental controls: Telephone, door, appliance, computer, and television
- Belts: Personal, transfer, walking
- Hip boards/Transfer boards
- Injectors
- Jar openers
- Magnifying lenses
- Medi-planners |

Automobile Modifications

- Lifts
- Controls
- Restraints
- Seats
- Compasses

Environmental Control Devices

- Switches
- Controls

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- Off the shelf shoes that could be purchased at general retail stores
- Pivot machine
- Plate guards
- Plates
- Raised toilet seat
- Reacher's
- Scooters: 2, 3 and 4-wheel
- Tongs, eating utensils
- Walking sticks
- Wheelchair: Second or third chair, manual or electric, regardless of purchaser
- Wheelchair modifications to accommodate vehicles
- Wheelchair puller
- Whirlpools
- Writing guides

Building Modifications

- Wheelchair ramps
- Widening of doorways
- Ceiling/wall mounted equipment

- Telephones: Including telephone lights and alarms
- Telephones: Including telephone lights and alarms
- Air filter/conditioner/purifier
- Battery clubs: Hearing aid
- Car seats
- Control units for environmental equipment
- Dehumidifiers: Room or central
- Humidifiers: Except for oxygen
- Vaporizers
- Hot tubs
- Swimming pools

Exercise Equipment

- Bicycles: Exercise
- Dumbbells
- Equipment: Including in-home physical therapy items, pulleys, ropes, weights, and balls
- Trampoline
- Treadmill

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- Rails
- Elevators and stair lifts

Personal Care Items

- Clothes: Disposable, wash, wipes
- Deodorants
- Egg crate mattress
- Eye pads
- Food blenders and processors
- Hot packs
- Ice packs, collar, etc.
- Lamps
- Leg bag drainage system for electric wheelchair
- Mattresses: Except hospital beds
- Mattress pads: Except for hospital beds
- Monitor: Home uterine
- Nylon aid
- Pads: Heat, cold
- Paper: Toilet, facial tissues
- Pediatric cribs
- Personal need, over the counter items: Razors, tweezers, toothbrushes (electric and non-electric) and toothpaste, toothettes, cotton swabs, lotions, creams and

- Weight Machines
- Wrist/hand strengthening

Convenience or Comfort Items

(For the Individual or Caregivers Benefit):

- Bottles: Hot water, nursing (Except for cleft palate bottle/nipple)
- Bedwetting alarms
- Button aids
- Carafes
- Diapers for persons under the age of 4
- Disinfectants: Room, nebulizers
- Elastic laces
- Emesis basins
- Head bands
- Massage devices
- Reacher's
- Sock nylon aids
- Sponges: Bath
- Swim plugs
- Vaporizer

Institutional Equipment

- Medical supplies used by home health

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occasional use products, sanitary products, nursing pads, tampons, shampoo, soap, toiletries, Ted hose, panty hose, shoe horns, wedges, foam toe pads and all other non-custom shoe or foot items

- Pocket Talkers
- Shoes: Tennis shoes or non-customized shoes. Includes extra depth and extra width shoes unless required for customized orthotic
- Tables: Including over the bed
- Toys
- Water bottles
- Water pics

Educational Equipment

- Books
- Pamphlets
- Brochures
- CDs, tapes, videos
- Apps for phone or computer
- Computers and printers: Except assistive communication device

Medical Alert Bracelets

Sensory or Self Soothing Items

- Paraffin baths
- Psoriasis lamps

Miscellaneous Items

- Beds: Enclosed. Except for hospital and short-term restorative specialty beds
- Bed board
- Blood pressure equipment: Except for renal dialysis patients
- Chairs: Laminectomy, activity, floor sitters
- Compression stockings and lymphadomal equipment
- Hot tubs/whirlpool
- Masks: Except oxygen administration and burn
- Scales
- Strollers

NON-COVERED ITEMS NO EXCEPTIONS

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Date Revised

Revisions

February 2019

Reformatted and renamed Appendix B – Non-Covered-No Exceptions and added related information in the DME & DMPOS manual. Added Sensory or Self Soothing Items category. Added items Wheelchair: High/Low, Trampoline, Apps for phone or computer, Chairs: activity, floor sitters, Beds: Enclosed.

November 29, 2023

Reviewed and reformatted. Added new logo.

January 7, 2025

Reviewed and reformatted. Added to page 1, third paragraph: If a medical practitioner or DME provider would like to recommend a non-covered item(s) to be covered by North Dakota Medicaid coverage, they can fill out and submit the [SFN 905](#) along with any supporting documentation to dhsmed@nd.gov.