# Durable Medical Equipment (D.M.E.) or Medical Supplies from Medicaid

## TIPS

**Durable Medical Equipment (DME)** is equipment such as, but not limited to: a wheelchair, wheelchair accessories, canes, shower chairs, or a hospital bed.

**Medical Supplies** are medically necessary, non-durable medical or surgical items such as: feeding tube equipment or catheterization equipment that are used in the home.

## How Do I Request Durable Medical Equipment or Medical Supplies?

- Go to your doctor to request medical equipment or supplies.
- If the doctor agrees you need the equipment or supplies he/she will write a prescription/order.
- Take the prescription/order to a medical supply company or other appropriate vendor.
- If necessary, they will assist you with making arrangements for the appropriate evaluation.
- The result of the evaluation go to the doctor or therapist who then writes the Letter of Medical Necessity/Evaluation Report.

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**Provided By:**

[Disability Rights WV](#)
• The vendor will complete the necessary authorization form.

• The doctor must sign the Letter of Medical Necessity/Evaluation Report \textit{and} the authorization form.

• The Letter of Medical Necessity/Evaluation Report \textit{and} the authorization form are then sent to West Virginia Medical Institute (WVMI).

### What Can I Do If I am Denied Durable Medical Equipment or Medical Supplies?

You should receive a Letter of Denial.

• Identify the reason you were denied.  
• You may need to submit additional information, \textit{or}  
• You may request an Administrative Review, \textit{or}  
• You have a right to request a Medicaid Fair Hearing.

\textbf{Important Note:} There are different request/response timelines for different levels of administrative reviews and Medicaid Fair Hearings.

Timelines should be identified in the denial letter.

The process is similar if you are using your private insurance company and Medicaid is not involved.
Who Can I Call for Assistance?

If you are denied or need help, you can request assistance or representation at a hearing by immediately contacting:

(800) 950-5250

This is NOT a guarantee that DRWV can assist or represent you.

Please try to have the following information when you contact DRWV:

1. The Letter of Denial from Medicaid - preferably no more than thirty (30) days old,
2. The Letter of Medical Necessity/Evaluation Report, and
3. The name and contact information of the medical supply company you went through to request prior authorization.

Note: Calls received less than a week before a hearing date may not be considered for representation.
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