

FACTSHEET: DURABLE MEDICAL EQUIPMENT

What is Durable Medical Equipment (DME)?

DME must be:

- Able to be used repeatedly
- Used for medical purposes
- Usable in or out of member's home
- For easing severe pain
- For protecting life, preventing significant illness / disability
- Prescribed by a Primary Care Physician (PCP) or treating provider

What is considered DME?

DME includes, but is not limited to:

- Hospital beds
- Wheelchairs
- Walkers
- Home oxygen equipment



Who covers DME?

Partnership HealthPlan of California may cover DME if the doctor prescribes it and it meets Partnership's medical-need guidelines.

If you have both Medi-Cal and Medicare or other health coverage, Medicare or your other coverage is the first to cover the costs of Durable Medical Equipment. Partnership is primary only after Medicare or your other coverage does not cover the costs. A doctor must give written proof that Medicare or your other coverage did not cover the DME for Partnership to review the request.

Denied DME Request

If you get a Notice of Action (NOA) denying your request for Durable Medical Equipment or service for your DME, you have the right to file an appeal. Information on how to file an appeal is included on your NOA. You can also call Member Services to file an appeal.

Repairs or Changes

Your PCP or treating provider can help direct you if your DME is in need of repairs or changes.

For questions or help, please call Member Services at **(800) 863-4155**.