

Purpose of the List:

The purpose of this list is to convey applicable location restrictions by line of business for select Durable Medical Equipment (DME). This list does not convey prior authorization requirements or other medical policy and/or benefit restrictions. Please see the **Prior Authorization Code List** and **Non-Covered and Limited Services List** for additional code-level information. These lists are linked below.

Content:

The DME & Supply list contains the following information:

- List of products considered DME or supplies
- Line of business (LOB) requirements
- Location coverage requirements
- Referral to Home Services requirements

Links:

[The Prior Authorization List](#)

[The Non-Covered and Limited Service List](#)