



State of Vermont  
Agency of Human Services  
280 State Drive, Center Building  
Waterbury, VT 05671-1000

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# Global Commitment Register

April 28, 2020

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GCR 20-048  
CLARIFICATION

## **\*\*COVID-19 Emergency Response\*\***

Please see the [Department of Vermont Health Access COVID-19 site for important information](#)

## **COVID-19 Changes for Durable Medical Equipment and Supplies**

### **Policy Summary:**

As part of the response to the [COVID-19 Public Health Emergency](#), Vermont Medicaid is taking steps to ensure Vermonters have access to necessary care and that health care professionals can deliver that care in a safe and timely way. To this end, the following flexibilities are temporarily being instituted for durable medical equipment and supplies:

1. Amend the clinical coverage criteria for breast pumps to include coverage for mothers exposed to or infected with COVID-19.
2. Waive the requirement for a beneficiary to be in a chronic stable condition for in-home oxygen.
3. Waive prior authorization requirements for most durable medical equipment and supplies, and extend prior authorizations set to exhaust in April 2020 for an additional six months.
4. Allow the use of telemedicine, when clinically appropriate, to evaluate, prescribe, and fit complex habilitation/rehabilitation equipment.
5. If telemedicine (two-way, real-time, audio and video interactive communication) is not possible for the initiation of DME, Medicaid providers may furnish services by telephone, when medically necessary and clinically appropriate.
6. Waive signature and proof of delivery requirements when a signature cannot be obtained.
7. Suspend audits during the COVID-19 emergency.
8. Waive provider enrollment and revalidation requirements to ensure a sufficient number of providers are available to service Medicaid beneficiaries.

9. Delay the manual and enhanced pricing changes scheduled for July 1, 2020 to January 2021.

Additional detail regarding these changes is available on the [Department of Vermont Health Access COVID-19 webpage](#).

**Effective Date:**

Effectively immediately, lasting for the duration of the COVID-19 Public Health Emergency unless otherwise noticed.

**Authority/Legal Basis:**

[Medicaid State Plan](#)

[COVID-19 Public Health Emergency](#)

**Population Affected:**

All Medicaid

**Additional Information:**

To be added to the GCR email list, send an email to [AHS.MedicaidPolicy@vermont.gov](mailto:AHS.MedicaidPolicy@vermont.gov).