
Medical Supplies

4.208 Medical Supplies (08/01/2021, GCR 21-016)

4.208.1 Definition:

- (a) **“Medical supplies”** means health care related items that are consumable or disposable, or cannot withstand repeated use by more than one individual, that are required to address an individual medical disability, illness, or injury.

This definition is in accordance with 42 CFR §440.70(b)(3)(i).

4.208.2 Covered Services

- (a) Medical supplies are covered when medically necessary.
- (b) General categories of covered supplies include:
- Catheter supplies
 - Diabetic supplies
 - Incontinence supplies: including briefs, diapers, and underpads
 - Irrigation supplies
 - Ostomy care supplies: including adhesives, irrigation supplies, and bags
 - Respiratory and tracheostomy care supplies, and
 - Wound care supplies including dressings, gauze pads, tape, and rolls
- (c) Vermont Medicaid publishes and maintains a list of pre-approved supplies and their quantity limits. The list is publicly available on the Department of Vermont Health Access website. Supplies that are not pre-approved are subject to prior authorization review. Quantity limits may be exceeded when medically necessary, with prior authorization.

4.208.3 Qualified Providers

- (a) Medical supplies must be ordered by a provider who is enrolled in Vermont Medicaid and working within the scope of their practice.
- (b) Providers of medical supplies must be enrolled in Vermont Medicaid.

4.208.4 Conditions for Coverage

- (a) Medical supplies must be necessary to address a beneficiary’s medical condition, as ordered by a Medicaid enrolled medical provider.
- (b) Supplies may be suitable for use in any setting in which normal life activities take place. Coverage is not restricted to supplies that are used in the home.

- (c) The face-to-face requirements in Health Care Administrative Rule 4.209 Durable Medical Equipment apply to medical supplies that are also subject to the face-to-face requirement under Medicare.
- (d) These conditions for coverage do not apply to medical supplies reimbursed as a component of an institutional payment.

4.208.5 Prior Authorizations

- (a) Ordering providers must provide pertinent diagnostic and clinical data to support a prior authorization request.

4.208.6 Non-Covered Services

- (a) Supplies intended for convenience, comfort, or personal hygiene, that are not primarily used for a medical purpose to address a medical disability, illness, or injury, are not covered.
- (b) Routine medical supplies used during the usual course of treatment in a medical office visit or home health visit are not reimbursed separately.