



North Dakota Workforce
Safety & Insurance

Durable Medical Equipment Guide

Customer Service

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General Information

Durable medical equipment (DME) including supplies, equipment, prosthetics, orthotics, and braces, may be reimbursable if related to the work injury. A prescription or order for DME by the treating provider is required.

Workforce Safety & Insurance (WSI) reimburses per the [WSI Fee Schedule](#) and does not directly pay the injured worker. WSI reimburses electro medical devices and related supplies according to a preferred provider agreement with CPR Medical.

Billing Information

When submitting a bill for DME a provider must:

- Bill with the appropriate HCPC code
- Submit a description for miscellaneous DME code
- Bill each charge separately and not bundle the charges

The use of a miscellaneous code is appropriate as indicated below:

- If no specific listed code is available for equipment that is new or unique
- If equipment is customized or substantially modified to meet the specific needs of the injured worker
- For labor charges related to the service(s)

Prior Authorization

WSI reviews prior authorization requests for DME only on accepted claims. To verify the status of a claim visit mywsi.workforcesafety.com, under Medical Providers click on Claim Lookup. All DME over \$500, or the DME listed on pages 2-3 under \$500, require prior authorization.

Submitting a Prior Authorization Request for DME

- Review this guide to determine if prior authorization is required
- Call WSI claims adjuster at 701-328-3800 or 800-777-5033

Submitting a Prior Authorization for Electro Medical Device

- Complete the [Electro Medical Device Certification Request \(M5\) form](#)
- Fax M5 form and prescription or order to 701-328-3820 or 888-786-8695

Rental Equipment

- DME rental listed on page 2 requires authorization
 - If the rental extends beyond 60 days, a new authorization is required, unless the duration was outlined in the initial authorization
- DME rental not listed on page 2 does not require authorization until the duration extends beyond 60 days

Durable Medical Equipment - Prior Authorization Required

The following is a list of DME requiring prior authorization including:
rental items, purchased items, or items priced under \$500.

Durable Medical Equipment	Notes
Adult Undergarments	
Ambulatory Aids: <ul style="list-style-type: none"> • Roller aid & non-motorized scooters • Walkers • Wheelchairs & wheelchair accessories 	
Catheters	If approved for the life of a claim, authorization is not required for each month's supply
Continuous Passive Motion Device (CPM)	Not covered for shoulder or uncomplicated total knee surgeries
CPAP Unit	
Electro Medical Device <ul style="list-style-type: none"> • Combination unit (All-Stim) • Neuromuscle stimulator • TENS unit 	Complete M5 form Units must be supplied by CPR Medical
<ul style="list-style-type: none"> • Neurotech KneeHab unit 	Complete M5 form
Eyewear <ul style="list-style-type: none"> • Frames • Lenses/contact lenses • Anti-reflective coating • Polarization • Progressive lenses • Scratch resistant or tinting coating 	Providers need to request add-ons along with the request for the eyewear
Hearing Aids	
Home Traction Unit	Injured worker must have had recent physical therapy
Nebulizer	If approved for the life of a claim, authorization is not required for each month's supply
Orthotics Footwear <ul style="list-style-type: none"> • Inserts (customized or molded) • Shoes/boots • Miscellaneous customized shoe additions 	
Paraffin Bath Unit	
Prosthetics	
Wound VAC Unit	Approval for rental of the unit only

Prior Authorization Not Required - Unless over \$500

The following outlines items WSI will cover if related to the work injury; however, this is not an all-inclusive list.

Cane/crutches	Off-the-shelf shoe inserts/wedges
Cervical collar	Over-the-door pulley system (post-shoulder surgery)
Cervical pillow	Physioball
Compression garments/TED hose	Postural restoration 4-6in ball (PRI ball)
Hand gripper	Prosthetic sleeves
Knee sleeves	Rib belt
Lumbar/SI belt	Splint/brace
Miracle Ball	Taping supplies
Occipivot	Theraband, Theracane or Theraputty

Packaged Services – Not separately reimbursed

Intermittent compression socks (post-surgical)	Surgical trays
Pneumatic compression devices	

Durable Medical Equipment – Non-covered

Compression devices for intermittent compression with various wraps for arms or legs e.g . VascuTherm or any hot or cold compression device (purchase or rental)	Hot or cold packs
Continuous-flow cryotherapy unit e.g Game-ready unit or any water/ice circulation unit	H-Wave electrical stimulation units
Electric heating pad	Wave Accelerated Recovery Performance (ARP) e.g. patented Bio-Electric Waveform Therapy
Home gym exercise equipment e.g. weights, weight machine	