

# UK DME Fax Order Form

740 S Limestone, K126 Lexington, KY 40536

## PATIENT INFORMATION

Order Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

## DME Fax Order Form

Medicare has implemented the requirement for patient Face to Face (F2F) visit prior to dispensing DME. Suppliers are required to obtain chart notes from the visit AND obtain a written order PRIOR to delivery that consists of the item **AND**: 1) Patient Name 2) Date Prescribed 3) Physician Signature 4) NPI 5) WOPD

## DURABLE MEDICAL EQUIPMENT

Diagnosis (Include Code) \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Length of Need \_\_\_\_\_

**\*\*\*Please note this is not an exhaustive list; for additional items, please use the Other DME section below\*\*\***

### Ambulatory Devices:

- Cane (Non-Billed Item)\*
- Quad Cane (Non-Billed Item)\*
- Cane
- Walker up to 300 lbs
- Walker with Wheels up to 300 lbs
- Bariatric Walker 300-450 lbs
- Bariatric Walker with Wheels >350 lbs
- Junior Walker with Wheels
- Rollator with Seat and Wheels
- Bariatric Rollator with Seat and Wheels

### Walker/Rollator Special Order:

- Walker/Rollator (Above 6' 2")

### Wheelchairs:

- Standard
- Light Weight
- Bariatric Wheelchair 300-500 lbs
- Bariatric Transport Chair >300 lbs

### Wheelchair Accessories:

- Elevating Leg Rests
- Footrest
- Wheelchair Cushion

### Aids to Daily Living:

- Bedside Commode
- Drop Arm Commode
- Bariatric Commode
- Shower Chair (Non-Billed Item)\*
  - Back  No Back
- Tub Transfer Bench (Non-Billed Item)\*

**\*\*For Wound Care or Respiratory orders, please use the Wound Care or Respiratory Order Forms located at [ukdme.org](http://ukdme.org)**

Other DME Not Listed Above: \_\_\_\_\_

## PRESCRIBING PROVIDER INFORMATION

Provider Name: \_\_\_\_\_ NPI: \_\_\_\_\_

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provider Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

\*UKDME does not bill insurance for **any** of the following items: canes, transfer benches, shower chairs, raised toilet seats, compression hosiery, and any other non-covered item.

### STATEMENT OF CONFIDENTIALITY

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