



Nonstandard Durable Medical Equipment (DME) Request Process for RI Medicaid

- Please contact the Office of DME at 462-1796 to request medical equipment you would like to obtain under RI Medicaid that is not currently included on the [DME Screening List](#).
- Have your physician complete the [Certificate of Medical Necessity](#) and return the form via fax to 401-462-6336, or mail form to the Office of DME, 74 West Road, Room 2-11, Cranston, RI 02920.
- Upon EOHHS medical review, you will receive either an Approval letter or a Denial letter.
- Approval letter will contain instructions on how to obtain the item from an existing RI Medicaid DME provider.
- Denial letter will contain instructions about how to appeal an adverse decision.