BlueCross BlueShield of Illinois

Durable Medical Equipment Claims – Tips on Using Diagnosis Codes

Below is information on filing durable medical equipment claims for members of our **Blue Cross Community Health Plans℠**. When coding and reporting DME claims, the focus is on ensuring that the diagnosis codes submitted justify the medical necessity of the equipment or supplies.

While ICD-10-CM guidelines don't have a DME-specific section, here are important practices to consider when billing DME claims:

- Use diagnosis codes that support the medical necessity of the equipment or supplies by selecting ICD-10-CM codes that accurately reflect the member's needs.
- Use the most specific ICD-10-CM codes. Avoid unspecified codes when more specific codes are available.
- Always verify if diagnosis codes are included in the Local Coverage Determinations and National Coverage Determinations list for billed equipment or supplies.
- Use Centers for Medicare & Medicaid Services tools to match diagnosis codes to covered DME items.
- Ensure you are using the most current ICD-10-CM guidelines.

Use the appropriate LCD: LCDs outline the coverage criteria for specific DME items, including the ICD-10-CM codes that justify medical necessity. It's important to reference the appropriate LCD to guarantee compliance with coverage requirements.