

May 20, 2014

ALEX ORTHOPEDIC INC
510 FOUNTAIN PARKWAY
GRAND PRAIRIE TX 75050

Re: Reconsideration of Coding Verification Decision

Xref: 31717668

FIXED ARM WHEELCHAIR WITH SWINGAWAY FOOTRESTS	ALEX ORTHOPEDIC INC	P5063-16	K0001
FIXED ARM WHEELCHAIR WITH SWINGAWAY FOOTRESTS	ALEX ORTHOPEDIC INC	P5063-18	K0001
STANDARD WHEELCHAIR WITH FIXED ARM WHEELCHAIR WITH PADDED ELEVATING LEGRESTS	ALEX ORTHOPEDIC INC	P5065-16	K0001+E0990 OR K0195
STANDARD WHEELCHAIR WITH FIXED ARM WHEELCHAIR WITH PADDED ELEVATING LEGRESTS	ALEX ORTHOPEDIC INC	P5065-18	K0001+E0990 OR K0195

Dear Linda Lavi:

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

The PDAC has reviewed the above listed product(s). The above listed product(s) has been reviewed. Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

K0001 - Standard Wheelchair

E0990 - Wheelchair Accessory, Elevating Leg Rest, Complete Assembly, Each

K0195 - Elevating Leg Rests, Pair (For Use With Capped Rental Wheelchair Base)

According to the "Local Coverage Article for Manual Wheelchair Bases - Policy Article - Effective November 2013:"

Standard hemi (low seat) wheelchair (K0002)

Weight: Greater than 36 lbs

Seat Height: Less than 19 inches

Weight capacity: 250 pounds or less

The supporting documentation for this chair is indicating the chair is 19.7" in height. In order to receive the K0002 the information must indicate that the chair height can be less than 19". Therefore, HCPCS code K0001 is the most appropriate code.

Model numbers P5063-20 and P5065-20 have never been initially reviewed; therefore, no reconsideration can be done on them. If you want to have these two models reviewed you will need to send in a coding verification application.

This decision applies to the application we received on March 07, 2014. If information submitted in that application has changed or were to change, it could impact our decision. Therefore, a new application would need to be submitted for HCPCS coding verification review. The coding assigned in this decision letter will be available on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS) within ten (10) working days from the letter's date. The DMECS can be accessed on the PDAC website, www.dmepdac.com. Please take the time to verify that this coding decision is correctly reflected in DMECS.

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at <https://www.dmepdac.com/review/requesting.html>. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the PCL on DMECS. Further information for requesting updates to the PCL can be found on the PDAC website at <https://www.dmepdac.com/review/notifying.html>. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Noridian Healthcare Solutions; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions about policy, claim coverage or reimbursement, please contact the DME MAC for your jurisdiction. For other questions, contact the PDAC Contact Center at the address listed above or by telephone at (877) 735-1326. The Contact Center is open Monday through Friday from 8:30 a.m. to 4 p.m. CT.

Sincerely,

PDAC
Noridian Healthcare Solutions, LLC
www.dmepdac.com