NOTE: The presence of ICD-9 codes alone may be not sufficient to ensure coverage. Please refer to the Local Coverage Determination (LCD) for Wheelchair Seating (L15670) at www.noridianmedicare.com for complete details.

E2603: Skin protection wheelchair cushion, width <22”, any depth
VARILITE cushions: Reflex™

E2622: Skin protection wheelchair cushion, adjustable, width <22”, any depth
VARILITE cushions: Evolution™, Evolution PSV™, Zoid PSV™ and JUNIOR Seat Cushion

E2623: Skin protection wheelchair cushion adjustable, width ≥22”, any depth
VARILITE cushions: Bariatric Evolution™ and Evolution PSV™

Require one of the following codes:

138 Late effects of acute polio
323.82 Other causes of myelitis
330.0-330.9 Leukodystrophy- Unspecified cerebral degeneration in childhood
331.0 Alzheimer's disease
332.0 Paralysis agitans
333.4 Huntington's Chorea
333.6 Genetic torsion dystonia
333.71 Athetoid cerebral palsy
334.0-334.9 Friedreich’s ataxia- spinocerebellar disease unspecified
335.0-335.21 Werdnig-Hoffman disease- progressive muscular atrophy
335.23-335.9 Pseudobulbar palsy- anterior horn cell disease unspecified
336.0-336.3 Syringomyelia and syringobulbia- myelopathy in other diseases
340.0 Multiple Sclerosis
341.0-341.9 Neuromyelitis optica- demyelinating disease of CNS unspecified
342.00-342.92 Flaccid hemiplegia and hemiparesis affecting unspecified side-
Unspecified hemiplegia and hemiparesis affecting non-dominant side
343.0-343.9 Congenital diplegia-infantile cerebral palsy unspecified
344.00-344.1 Quadriplegia unspecified- paraplegia
359.0 Congenital hereditary muscular dystrophy
359.1 Hereditary progressive muscular dystrophy
438.20-438.22 Hemiplegia affecting unspecified side/affecting non-dominant side
707.3-707.5 Pressure ulcer, lower back- Pressure ulcer, buttock
728.3 Other specific muscle disorders
741.00-741.93 Spina bifida unspecified region with hydrocephalus
Spina bifida lumbar region without hydrocephalus
754.89 Other specified nonteratogenic anomalies
756.51 Osteogenesis imperfecta
E2624: Skin protection and positioning wheelchair cushion, adjustable, width <22”, any depth
VARILITE cushions: Evolution Wave™, Evolution PSV Wave™, Meridian™, Meridian Wave™ and ProForm NX™

E2625: Skin protection and positioning wheelchair cushion, adjustable, width ≥22”, any depth
VARILITE cushions: Evolution Wave™, Evolution PSV Wave™, Meridian™ and Meridian Wave™

**Require one of the following codes:**
138 Late effects of acute polio
330.0-330.9 Leukodystrophy- Unspecified cerebral degeneration in childhood
331.0 Alzheimer's disease
332.0 Paralysis agitans
333.4 Huntington's Chorea
333.6 Genetic torsion dystonia
333.71 Athetoid cerebral palsy
335.0-335.21 Werdnig-Hoffman disease- progressive muscular atrophy
335.23-335.9 Pseudobulbar palsy- anterior horn cell disease unspecified
336.0-336.3 Syringomyelia and syringobulbia- myelopathy in other diseases
340.0 Multiple Sclerosis
341.0-341.9 Neuromyelitis optica- demyelinating disease of CNS unspecified
342.00-342.92 Flaccid hemiplegia and hemiparesis affecting unspecified side-
  Unspecified hemiplegia and hemiparesis affecting non-dominant side
343.0-343.9 Congenital diplegia-infantile cerebral palsy unspecified
344.00-344.1 Quadriplegia unspecified- paraplegia
359.0 Congenital hereditary muscular dystrophy
359.1 Hereditary progressive muscular dystrophy
438.20-438.22 Hemiplegia affecting unspecified side/affecting non-dominant side
741.00-741.93 Spina bifida unspecified region with hydrocephalus- Spina bifida lumbar region without hydrocephalus

2.) OR a combination of 707.3-7 (decubitus ulcer) and one of the following diagnoses:
323.82 Other causes of Myelitis
334.0-334.9 Freidreich's ataxia- spinocerebellar disease unspecified
344.30-344.32 Monoplegia of lower limb affecting unspecified side-
  Monoplegia of lower limb affecting non-dominant side
438.40-438.42 Monoplegia of lower limb affecting unspecified side-
  Monoplegia of lower limb affecting non-dominant side
756.51 Osteogenesis imperfecta
897.2-897.7 Traumatic amputation of leg(s) (complete) (partial)
  Unilateral AT or above knee without complication-
  Traumatic amputation of leg(s) (complete) (partial)
  Bilateral (any level) complicated
E2611: General use wheelchair back cushion, width < 22”, any height, any type of mounting hardware
VARILITE back systems: Talon™
No ICD-9 codes specified

###

E2613: Positioning wheelchair back cushion, posterior, width <22”, any height, including any type of mounting hardware
VARILITE back systems: Icon™ Back System Low, Evolution Back™ Regular and JUNIOR Back System Mid

E2614: Positioning wheelchair back cushion, posterior, width ≥22”, any height, including any type of mounting hardware
VARILITE back systems: Evolution Back™ Tall

E2615: Positioning wheelchair back cushion, posterior-lateral, width <22”, any height, including any type of mounting hardware
VARILITE back systems: Icon Back System™ Mid and Tall

E2616: Positioning wheelchair back cushion, posterior-lateral, width ≥22”, any height, including any type of mounting hardware
VARILITE back system: Bariatric Icon™ Back System

E2620: Positioning wheelchair back cushion, planar back with lateral supports, width <22”, any height, including any type of mounting hardware

**Require one of the following codes:**

- 138  Late effects of acute polio
- 323.82  Other causes of myelitis
- 330.0-330.9  Leukodystrophy- Unspecified cerebral degeneration in childhood
- 331.0  Alzheimer's disease
- 332.0  Paralysis agitans
- 333.4  Huntington's Chorea
- 333.6  Genetic torsion dystonia
- 333.71  Athetoid cerebral palsy
- 334.0-334.9  Friedreich's ataxia- spinocerebellar disease unspecified
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2.) OR a combination of 707.3-7 (decubitus ulcer) and one of the following diagnoses:

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