

MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

December 9, 2005

Philip Hitch
Product Development Supervisor/Medical Division
Varilite (A Division of Cascade Designs, Inc.)
4000 1st Avenue South
Seattle, WA 98134

Re: Evolution Wave CPW (Model 710011, 713011)

Evolution Wave LPB (Model 710021, 713021) Evolution Wave CPB (Model 710031, 713031) Evolution PSV Wave CPW (Model 715011, 718011) Evolution PSV Wave LPB (Model 715021, 718021) Evolution PSV Wave CPB (Model 715031, 718031)

Dear Mr. Hitch:

Per your written request, model numbers 713011, 713021, 713031, 718011, 718021, 718031 have been added to the cushions in the Evolution Wave Series product family. The item effective date will be November 14, 2005.

This letter is in response to your recent inquiry for coding verification of the above listed product(s) manufactured by your company. The Statistical Analysis Durable Medical Equipment Regional Carrier (SADMERC) has reviewed the documentation and information submitted for HCPCS Coding. The SADMERC conducts reviews of products to determine the correct HCPCS code(s) of DMEPOS product(s) for Medicare billing.

It is the determination of the Statistical Analysis Durable Medical Equipment Regional Carrier (SADMERC) that the above product(s) is/are an adjustable cushion(s) because it has all the characteristics of a skin protection seat cushion or skin protection and positioning seat cushion as described in the Coding Guidelines section of the Wheelchair Seating Policy Article and is adjustable by addition or removal of significant quantities of air, liquid, gel, or other fluid medium in physiologically appropriate areas of the cushion to promote pressure reduction.

It is our determination that the Medicare HCPCS code(s) to bill the four Durable Medical Equipment Regional Carriers (DMERCs) is/are:

K0108 Other accessories.

The product meets the criteria for skin protection and positioning.

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier Post Office Box 100143 • Columbia, South Carolina • 29202-3143

HCPCS code K0108 is a miscellaneous code and requires a complete description of the product when billing to Medicare. The description should include the manufacturer name, product name and the reason this item was prescribed for the patient.

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the SADMERC. Any modifications to the product(s) could change the HCPCS code and would need to be reviewed for coding verification. The assignment of a HCPCS code to the product(s) should in no way be construed as an approval or endorsement of the product(s) by SADMERC or Medicare, nor does it imply or guarantee claim reimbursement or coverage. For questions regarding claim coverage or reimbursement please contact your regional DMERC.

Should you disagree with this coding decision, a re-review of the product(s) can be initiated. The SADMERC will provide a re-review if the request is made within 45 days of the date of this letter and additional documentation is provided supporting the request. If a request for a re-review is made after 45 days, the request is treated as a new Coding Verification Review and a complete application must be submitted along with the additional documentation supporting the request.

HCPCS code K0108 is a miscellaneous code. You may apply through the Alpha-Numeric Workgroup for a new coding category for this product. This workgroup reviews applications for modification of permanent national Level II HCPCS codes. Please contact the HCPCS Coordinator at the Centers for Medicare and Medicaid Services. The address is provided below.

Centers for Medicare and Medicaid Services Attention: Cindy Hake, HCPCS Coordinator 7500 Security Boulevard C5-08-27 Baltimore, MD 21244-1850

Should you have any questions regarding this decision, please contact me at the address below or by telephone at (803) 763-1639.

Sincerely,

Jana Brown, RN

Jona Brown, RN

HCPCS Medical Analyst

SADMERC