



MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

March 10, 2006

Donald M. Roberts, Senior Vice President
dj Orthopedics
2985 Scott Street
Vista, CA 92083-8339

Re: BOA (Back Orthotic Appliance) with Chairback (Models 11-2099-2, 11-2099-3,
11-2099-4, 11-2099-5, 11-2099-6, 11-2099-7)

Dear Mr. Roberts:

This letter is in response to your recent inquiry for coding verification of the above listed product(s) distributed 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 our determination that the Medicare HCPCS code(s) to bill the four Durable Medical Equipment Regional Carriers (DMERCs) is/are:

For dates of service through December 31, 2005 use HCPCS code
K0646 Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior frame/panels, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavity pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment.

Effective for dates of service on or after January 1, 2006 use HCPCS code
L0637 Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior frame/panels, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavity pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment.

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.

Palmetto GBA

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