

**Centers for Medicare & Medicaid Services (CMS) Public Agenda Payment
and Coding Determinations for New Durable Medical Equipment
Tuesday, June 24, 2003
CMS Auditorium
7500 Security Boulevard
Baltimore (Woodlawn), Maryland 21244-1850**

7:15 a.m. Arrival and registration

8:00 a.m. Welcome
Background and purpose of meeting – Cindy Hake, CMM

Meeting Format and Ground Rules-Office of Professional
Relations

AGENDA ITEM # 1, Attachment # 03.58 (A&B)

- A) Request to establish code for site to stand, Pediatric/Youth, Trade Name: Easystand 5000 Youth, Easystand 7000 Magician, & Easystand 7000 Magician Ei.
- B) Request to establish code for sit to stand stander, adult, Trade Name: Easystand 5000.

(No Primary Speaker for this item)

AGENDA ITEM # 2, Attachment # 03.102

Request to establish a code for a stander, Trade Name: Rifton Dynamic Stander.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 3, Attachment # 03.96

Request to establish a code for small stander, Trade Name: Rifton's stander small.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 4, Attachment # 03.114

Request to establish a code for a stander, Trade Name: Rifton's stander medium.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 5, Attachment # 03.115

Request to establish a code for a stander, Trade Name: Rifton's stander large.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 6, Attachment # 03.61

Request to establish a code for a mechanical walker, Trade Name: EZ-Walker.

Primary Speaker – Jim Kuntz of PortaCare, LLC

AGENDA ITEM # 7, Attachment # 03.82

Request to establish a code for a bariatric 4 wheeled folding rollator, Trade Name: CE Obese XL.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 8, Attachment # 03.93

Request to establish a code for a pediatric walker, Trade Name: Allegro-Medical pediatric Walker.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 9, Attachment # 03.113

Request to establish a code for a gait-trainer, Trade Name: Rifton Gait Trainer.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 10, Attachment # 03.106

Request to establish a code for a hands free mobility device Trade Name: i Walk Free.

(No Primary Speaker for this item)

AGENDA ITEM # 11, Attachment # 03.81

Request to establish a code for a self-restoring retractable bariatric seat, Trade Name: CE 1287 Self Storing Retractable Seat.

Primary Speaker – Marcia Nusgart of Nusgart Consulting, LLC

AGENDA ITEM # 12, Attachment # 03.85

Request to establish a code for toilet lift, Trade Name: Aerolet Toilet Lift.

Primary Speaker – Stephanie Wolfcamp of Economic Mobility, Inc.

AGENDA ITEM # 13, Attachment # 03.87

Request to establish a code for a seat lift mechanism for wheelchairs, Trade Name: Uplift Wheelchair Seat Assist.

(No Primary Speaker for this item)

AGENDA ITEM # 14, Attachment # 03.120

Request to establish a code for an integrated contoured adjustable wheelchair seat with fixed mounting hardware, Trade Name: Jay Fit Adjustable Contour Seat.

Primary Speaker – Tom Whelan of Sunrise Medical

AGENDA ITEM # 15, Attachment # 03.111

Request to establish a code for a solid seat, Trade Name: Allegro Pediatric Solid Seat.

(No Primary Speaker for this item)

AGENDA ITEM # 16, Attachment # 03.105

Request to establish a code for a temperature management and stability wheelchair cushion, Trade Name: ComforT cushion.

Primary Speaker – Evan Call of Otto Bock Health Care

AGENDA ITEM # 17, Attachment # 03.99

Request to establish a code for a gel wheelchair cushion, Trade Name: Buns-EZ Cushion Custom Gel Wheelchair.

(No Primary Speaker for this item)

AGENDA ITEM # 18, Attachment # 03.38

Request to establish a code for an alternating pressure seating system, Trade Name: Airpulse Cushion.

(No Primary Speaker for this item)

AGENDA ITEM # 19, Attachment # 03.107

Request to establish a code for reclining back wheelchair accessory Trade Name: Comfy Reclining Wheelchair Back.

(No Primary Speaker for this item)

AGENDA ITEM # 20, Attachment # 03.121

Request to establish a code for an integrated contoured adjustable wheelchair back with fixed mounting hardware, Trade Name: Jay Fit Adjustable Contour Back.

Primary Speaker – Tom Whelan of Sunrise Medical

AGENDA ITEM # 21, Attachment # 03.90

Request to establish a code for power-assist for manual wheelchairs Trade Name: e.motion.

(No Primary Speaker for this item)

AGENDDA ITEM # 22, Attachment # 03.104

Request to establish a code for a manual wheelchair with incorporated lift assist seat, Trade Name: Comfy High-Riser Lift-Assist Wheelchair.

(No Primary Speaker for this item)

AGENDA ITEM # 23, Attachment # 03.117

Request to establish a code for a folding, multi-adjustable pediatric wheelchair with seating system Trade Name: Kids Quickie 2.

Primary Speaker – Tom Whelan of Sunrise Medical

AGENDA ITEM #24, Attachment # 03.118&03.119 (A&B)

- A) Request to establish a code for a folding, multi-adjustable pediatric wheelchair without seating system, Trade Name: Zippie 2.
- B) Request to establish a code for a rigid, multi-adjustable, pediatric wheelchair without seating system Trade Name: Zippie GS.

Primary Speaker – Tom Whelan of Sunrise Medical

AGENDA ITEM #25, Attachment # 03.86

Request to establish a code for a pediatric, rigid, multi-adjustable wheelchair, Trade Name: Quickie Kidz.

Primary Speaker – Tom Whelan of Sunrise Medical

AGENDA ITEM #26, Attachment # 03.116

Request to establish a code for a portable overhead lifter Trade Name: Guardian voyager overhead lifter and Guardian easytrack system.

Primary Speaker – Colin Bain of Sunrise Medical

AGENDA ITEM # 27, Attachment # 03.65

Request to establish a code for a single levered wheelchair rear wheel locking mechanism, Flex-Premium Wheelchair Immobilizing System.

Primary Speaker – Jerry File, Jr of Laurence-Nelson, LLC

5:00 p.m. ADJOURN

Guidelines for proceedings at CMS' Public Meetings for New DME are posted on the web at:
www.cms.hhs.gov/medicare/hcpcs/default.asp

**** In the event that the National Security Alert is upgraded to Code Red for the date(s) of the Public Meeting(s), phone Jennifer Carver at 410-786-6610 or Cindy Hake at 410-786-3404 for a recorded message regarding the status of the DME Public meeting.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 01, Attachment # 03.58 (A&B)

Topic: Request to establish a code for a Sit to Stand Stander Pediatric/Youth (03.58A), trade names Easystand 5000 Youth, Easystand 7000 Magician and Easystand 7000 Magician Ei and request to establish a code for Sit to Stand Stander/Adult (03.58B), trade name: Easystand 5000.

Background/Discussion: Nancy Perlich of Altimate Medical Inc. submitted a request to establish codes for pediatric and adult Sit to Stand Standers, trade names: Easystand 5000 Youth, Easystand 7000 Magician, Easystand 7000 Magician Ei, and Easystand 5000. According to the requestor, these Sit to Stand Standers transition clients who cannot stand on their own from sitting to upright standing position with the ability to stop at any point in between, and provide support during incremental weight bearing. The stander may include an integrated lift mechanism that the client can independently operate. It is fabricated out of metal, plastic, wood or a combination of, but not limited to these materials. It provides both anterior and posterior support, and the support surface can be minimal (mid-thoracic, knees, and feet) or maximal (from head to feet). The device is used by clients whose diagnoses, prognosis, or symptomatology necessitates one or more of the following: 1) facilitating a symmetrical posture, 2) developing and improving head, neck and upper body muscle control, 3) inhibiting abnormal muscle tone and reflexes, 4) preventing loss of range of motion, 5) alleviating pain caused by inappropriate position, 6) improving systemic functions, 6) preventing loss of bone density, and 7) developing standing tolerance and endurance.

According to the requestor, the products have been on the market since May 1989. They are used 100% of the time in the home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel:

#03.58A

To establish the following "E" code:

E???? Combination sit to stand system, any size, with seat lift feature, with or without wheels

#03.58

Use the newly established code (as above)

E???? Standing frame system, any size, with or without wheels.

Payment:

The E???? codes for these two categories of items would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase or rental basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 02, Attachment # 03.102

Topic: Request to establish a code for a stander, Trade Name: Rifton Dynamic Stander.

Background/Discussion: Jane Wood of the State of South Carolina DHHS has submitted a request to establish a code for a stander, Trade Name: Rifton Dynamic Stander. Currently, there are only local codes to describe this item. According to the requestor, Dynamic Stander is a standing frame that supports and controls the thoracic and lumbar spine, hips, knees, ankles and feet for individuals with lower extremity musculoskeletal and neuromuscular disorder, spasticity control and neuromotor dysfunctions. The standing frame consists of a metal frame with large front wheels and front and rear casters. The fulcrum of the three-force system used to ensure hip extension is the broad posterior pelvic pad with counter forces delivered by the anterior thoracic corset and the anterior kneepads.

This item is used 100% of the time in the patient's home by the patient

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use newly established "E" code:

E???? Standing frame system, any size, with or without wheels.

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 03, Attachment # 03.96

Topic: Request to establish a code for a stander, Trade Name: Rifton's Stander –Small.

Background/Discussion: Jane Wood of the State of South Carolina DHHS has submitted a request to establish a code for a stander, Trade Name: Rifton's Stander –Small. Currently, there are only local codes to describe this item. According to the requestor, Rifton's Stander – Small is a prone stander designed to provide the benefits of weight bearing in an upright posture. It supports and controls the thoracic and lumbar spine, hips, knees, ankles and feet for individuals with lower extremity musculoskeletal disorder, neuromuscular disorder, spasticity control and neuromotor dysfunction. The frame consists of a metal frame, front steering wheels and rear casters. The item is used for children with neuromotor dysfunction, gastrointestinal, urologic and spasticity control.

This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use newly established "E" code:

E???? Standing frame system, any size, with or without wheels.

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 04, Attachment # 03.114

Topic: Request to establish a code for a stander, Trade Name: Rifton's Stander Medium.

Background/Discussion: Jane Wood of the State of South Carolina DHHS has submitted a request to establish a code for a stander, Trade Name: Rifton's Stander Medium. According to the requestor, this prone stander is a frame that supports and controls the thoracic and lumbar spine, hips, knees, ankles, and feet for individuals with lower extremity musculoskeletal disorder, neuromuscular disorder, spasticity control and neuromotor dysfunctions. The standing frame consists of a metal frame with large front wheels and front and rear casters. The fulcrum of the three-force system used to ensure hip extension is the broad posterior pelvic pad with counter forces delivered by the anterior thoracic corset and the anterior kneepads. It helps to improve digestive function; increase muscle activity, decreasing the likelihood of muscular spasms and contractures. It promotes increased bone density through calcium deposited in bones from weight bearing, helping to fight osteoporosis, and relieves pressure sores and skin ulcerations inflicted by prolonged sitting. It develops and improves postural trunk control and necessary body movements needed for respiratory efficiency.

This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use newly established "E" code:

E???? Standing frame system, any size, with or without wheels.

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 PublicMeeting Agenda Item # 05, Attachment # 03.115

Topic: Request to establish a code for a stander, Trade Name: Rifton's Stander Large.

Background/Discussion: Jane Wood of the State of South Carolina DHHS has submitted a request to establish a code for a stander, Trade Name: Rifton's Stander Large. According to the requestor, This prone stander is a frame that supports and controls the thoracic and lumbar spine, hips, knees, ankles, and feet for individuals with lower extremity musculoskeletal disorder, neuromuscular disorder, spasticity control and neuromotor dysfunctions. The standing frame consists of a metal frame with large front wheels and front and rear casters. The fulcrum of the three-force system used to ensure hip extension is the broad posterior pelvic pad with counter forces delivered by the anterior thoracic corset and the anterior kneepads. It helps to improve digestive function; increase muscle activity, decreasing the likelihood of muscular spasms and contractures. It promotes increased bone density through calcium deposited in bones from weight bearing, helping to fight osteoporosis, and relieves pressure sores and skin ulcerations inflicted by prolonged sitting. It develops and improves postural trunk control and necessary body movements needed for respiratory efficiency.

This item is used 100% of time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use newly established "E" code:

E???? Standing frame system, any size, with or without wheels.

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 06, Attachment # 03.61

Topic: Request to establish a code for a mechanical walker, Trade Name: EZ Walker.

Background/Discussion: Jim Kuntz of PortaCare LLC submitted a request to establish a code for a mechanical walker, Trade Name: EZ Walker. According to the requestor, EZ-Walker is a mechanical walker used to aid in standing and walking of patients suffering from ambulatory disabilities. It has adjustable pneumatic lifts on each side which allows the user to un-weight, simulating the same effect as walking in water. The harness is designed to hold the user firmly in the standing position and gives them stability required to ambulate, and to sit comfortably if tired. One caregiver is needed to assist the patient operating the EZ-Walker. EZ-Walker is available in a number of different models but the main frame is standard with each size, only the attachments change. MDL 300A is a standard adult unit. MDL 300 A/TLA includes a traveling lift arm. MDL 150 J and MDL 150 J/TLA are for juniors up to 150 pounds. MDL 50 P and MDL 50 P/TLA are for pediatrics.

According to the requestor, this product has been on the market since June 2001. Projected use of this item is 2% of the time physicians' offices, 10% of the time in ambulatory care clinics, 50% of the time in the patients' homes, 8% of the time in nursing facilities, and 10% of the time in both hospital inpatient and outpatient settings.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E0141, rigid walker wheeled, without seat.

Payment: Code E0141 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E0141 is currently \$115.29 and the floor is \$98.00. The national, monthly rental, fee schedule ceiling for E0141 is currently \$22.36 and the floor is \$19.01.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 07, Attachment # 03.82

Topic: Request to establish a code for a bariatric, 4 wheeled, folding, width adjustable, height adjustable, 500 to 1000 pound weight capacity safety rollator with a push down to lock braking system, Trade Name: CE Obese XL (Wenzelite Re/hab Supplies).

Background/Discussion: Jeffrey Zwiebel of Wenzelite Rehab submitted a request to establish a code for a bariatric, 4 wheeled, folding, width adjustable, height adjustable, 500 to 1000 pound weight capacity safety rollator with a push down to lock braking system, Trade Name: CE Obese XL (Wenzelite Re/hab Supplies). According to the requestor, the CE Obese XL is a bariatric 4 wheeled, folding rollator, fabricated from steel tubing, that is width and height adjustable. It is designed to support an individual weighing equal to or greater than 500 pounds and less than or equal to 1000 pounds. It is width adjustable from 25 to 30 inches. The frame is completely foldable for transporting or storage, and stands on its own in the folded position. The standard height adjustment is 29 to 36 inches, and additional height adjustments of up to 47 inches is available with the optional extended upright accessory, which enables use by an individual of up to 7 feet tall. Applying pressure to the handlebar activates the braking mechanism, however it engages automatically if the patient stumbles. Morbid obese patients who require assistance from a Bariatric wheeled rollator to ambulate safely use the device.

According to the requestor, this item was brought to market in February of 1982. It is exempt from the FDA requirement for pre-market approval. This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E0149, walker, heavy duty, wheeled, rigid or folding, any type, each.

Payment: Code E0149 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E0149 is currently \$223.20 and the floor is \$189.72. The national, monthly rental, fee schedule ceiling for E0149 is currently \$22.32 and the floor is \$19.97.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item 08, Attachment # 03.93

Topic: Request to establish a code for a pediatric walker, Trade Name: Pediatric Walker.

Background/Discussion: Jane Wood of the State of South Carolina DHHS has submitted a request to establish a code for a pediatric walker, Trade Name: Pediatric Walker. Currently, there are only local codes to describe this item. According to the requestor, this device helps children develop postural control and walking movements. It rolls forward and halts in step with the child. The braking system activates with pressure to the handlebar. The device folds easily and has 4" skid resistant wheels and casters.

This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Not differentiate between pediatric and adult size; to delete codes E0142, E0145, E0146 because the descriptors include attachments that may result in duplicate billing; to establish the following "E" code:

E???? Walker, with trunk support, adjustable or fixed height, any type.

To reorder the existing text of codes E0141, E0143, E0144, E0147 and E0149 for consistency of language, to read as follows:

E0141 Walker, rigid, wheeled, adjustable or fixed height

E0143 Walker, folding, wheeled, adjustable or fixed height

E0144 Walker, enclosed, four sided framed, rigid or folding, wheeled with posterior seat

E0147 Walker, heavy duty, multiple braking system, variable wheel resistance

E0149 Walker, heavy duty, wheeled, rigid or folding, any type

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 09, Attachment # 03.113

Topic: Request to establish a code for a gait trainer, Trade Name: Rifton Gait Trainer.

Background/Discussion: Jane Wood of the State of South Carolina DHHS has submitted a request to establish a code for a gait trainer, Trade Name: Rifton Gait Trainer. According to the requestor, Rifton Gait Trainer can accommodate a pupil who is static to a pupil who has some stepping movement but needs to improve these skills. It maintains a natural, front-leaning stance with flexible, secure trunk support. The individual forearm prompts adjust to suit the individual. The hourglass hip prompt gives security and supports correct positioning. The leg prompts control stride length and prevent scissoring. The large, fixed wheels help to keep the user on track or take them off to allow free roaming. This item is used for children with neuromotor dysfunction and neuromuscular and musculoskeletal disorder.

This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Not to differentiate between pediatric and adult size: Delete codes E0142, E0145, E0146 because the descriptors include attachments that may result in duplicate billing, and establish the following "E" code:

E???? Walker, with trunk support, adjustable or fixed height, any type.

To revise the text of codes E0141, E0143, E0144, E0147 and E0149 to read as follows:

E0141 Walker, rigid, wheeled, adjustable or fixed height

E0143 Walker, folding, wheeled, adjustable or fixed height

E0144 Walker, enclosed, four sided framed, rigid or folding, wheeled with posterior seat

E0147 Walker, heavy duty, multiple braking system, variable wheel resistance

E0149 Walker, heavy duty, wheeled, rigid or folding, any type

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 10, Attachment # 03.106

Topic: Request to establish a code for a hands free mobility device, trade name: iWalk Free.

Background/Discussion: Debra Harrington of Harrington Consultants submitted a request to establish a code for a hands free mobility device, trade name: iWalk Free. According to the requestor, iWalkFree is intended for patients having medical or surgical condition of the lower extremity such as fractures, strains, sprains of the foot or ankle, Achilles tendon, calcaneus, talus, tibia, fibula, wound care, multiple trauma, amputation and foot ulcer. The iWalkFree is a single upright device that extends from the upper thigh to the floor ending in a heavy duty rubber tip. The upright is constructed of reinforced aluminum and is adjustable to the individual. The thigh portion has two adjustable plastic padded cuffs that secure the device to the thighs. A strap secures the calf just below the knee to the knee tray. The knee tray locks into the measured position. This design allows for the full weight of the body to be equally distributed between the full unaffected leg and upper portion of the affected leg in order to enhance full ambulation without the use of the hands, forearms, or underarms and without stress to the weight carrying knee. Maximum weight capacity is 300 pounds.

According to the requestor, this product has been on the market since July 2000. This item is used 85% of the time in the patients' homes and 15% of the time in rehab facilities.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Establish the following "E" code:

E???? Crutch, knee, each.

Payment: This item is not covered; therefore, no payment determination is necessary.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Meeting Agenda Item # 11, Attachment # 03.81

Topic: Request to establish a code for a CE 1287, self storing retractable bariatric seat, width adjustable, 500-1000 pound weight capacity, accessory for CE obese XL bariatric 4 wheeled, width adjustable rollator, Trade Name: CE1287 Self Storing Retractable Seat.

Background/Discussion: Jeffrey Zwiebel of Wenzelite Rehab submitted a request to establish a code for a CE 1287, self storing retractable bariatric seat, width adjustable, 500-1000 pound weight capacity, accessory for CE obese XL bariatric 4 wheeled, width adjustable rollator, Trade Name: CE1287 Self Storing Retractable Seat. According to the requestor, CE1287 Self Storing Retractable Seat is a device designed to support an individual weighing equal to or greater than 500 pounds and less than or equal to 1000 pounds. It is also width adjustable from 25 to 30 inches. The seat stores in a vertical position when it is not in use. The seat is used for an individual with morbid obesity that cannot ambulate for a prolonged period of time and must rest at periodic intervals, ensuring safe ambulation and fall prevention.

According to the requestor, this item was brought to market in March of 1984. It is exempt from the FDA requirement for pre-market approval. This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E0156, seat attachment, walker.

Payment: Code E0156 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E0156 is currently \$26.43 and the floor is \$22.47. The national, monthly rental, fee schedule ceiling for E0156 is currently \$3.38 and the floor is \$2.87.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 12, Attachment # 03.85

Topic: Request to establish a code for a toilet lift, Trade Name: Aerolet Toilet Lift.

Background/Discussion: Mr. Hans Wolfkamp of Economic Mobility has submitted a request to establish a code for a toilet lift, Trade Name: Aerolet Toilet Lift. According to the requestor, Aerolet Toilet Lift is a toilet lift that ergonomically replicates the natural sitting and standing process needed for toileting. From a standing position, the user leans slightly back onto the raised seat and pushes the down button and waits for the unit to safely bring them over the bowl at a controlled speed. After toileting, the user pushes the up button that enables them to return to a full standing position. The Aerolet is adjustable to accommodate most any height toilet and can be custom fitted to an individual or multiple users height. An optional wired remote is available as well. The item can be used by people who have difficulty safely accessing a toilet due to various medical conditions. It decreased the potential for falls and lower lumbar compression injuries.

According to the requestor, this item was brought to market in 2000. It is exempt from the FDA requirement for pre-market approval. This item is used 50% of the time in the patient's home by the patient, 10% of the time in the patient's home by a health care provider, 10% of the time in nursing homes/SNF's, 10% of the time in hospital inpatient facilities, and 20% of the time by dealers.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code A9270, (non-covered item or service) for Medicare.

Payment: This item is not covered; therefore, no payment determination is necessary.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Meeting Agenda Item # 13, Attachment # 03.87

Topic: Request to establish a code for a seat lift mechanism for wheelchair, wheelchair attachment, Trade Name: Uplift Wheelchair Seat Assist.

Background/Discussion: Debra M. Harrington of Harrington Consulting has submitted a request to establish a code for a seat lift mechanism for wheelchair, wheelchair attachment, Trade Name: Uplift Wheelchair Seat Assist. According to the requestor, Uplift Wheelchair Seat Assist is a device that provides assistance with standing or sitting to patients who are confined to a wheelchair and have extremely limited ambulatory function. It consists of a curved flexible solid plastic seat that flattens while the patient is seated. A hydro-pneumatic piston powers the seat to rise and is activated when the patient begins to stand, supporting up to 80% of the users body weight. It also provides assistance when the patient begins to sit and automatically latches securely when the seated position is reached. The drop frame is easily attached to most manual wheelchairs. The seat mechanism locks automatically in the seated position and is easily unlocked prior to standing. The frame is constructed of 11 gauge cold rolled steel, and is designed to be attached to most manual wheelchair bases by means of a drop hook attachment, allowing for a wheelchair cushion to be used as well. It is available in 3 sizes that fit most wheelchair bases and, based on the size used, will accommodate a patient weighing from 80 to 230 pounds or 195 to 350 pounds.

According to the requestor, this item was brought to market in January of 2001. It is exempt from pre-market notification. This item is used 50% of the time in the patient's home by the patient and 50% of the time in nursing homes/SNF's.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E0627, seat lift mechanism incorporated into a combination lift-chair mechanism.

Payment: Code E0627 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E0627 is currently \$337.32 and the floor is \$286.72. The national, monthly rental, fee schedule ceiling for E0627 is currently \$33.74 and the floor is \$28.68.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 14, Attachment # 03.120

Topic: Request to establish a code for an integrated contoured, adjustable wheelchair seat with fixed mounting hardware, Trade Name: Jay® Fit Adjustable Contour Seat.

Background/Discussion: Rita Hostak of Sunrise Medical has submitted a request to establish a code for an integrated contoured, adjustable wheelchair seat with fixed mounting hardware, Trade Name: Jay® Fit Adjustable Contour Seat. According to the requestor, Jay® Adjustable Contour Seat is a contoured adjustable solid seat base configured to wheeled mobility base measurements and individual users measurements. Its construction includes pre-contoured foam base, lateral and anterior pelvic well reducers, mechanically attached adjustable contoured lateral hip and thigh support components, removable replaceable adjustable foam or fluid well insert, and inner and outer covers. This product allows for a precise fitting of the contours of the pelvic well, hips, and thigh supports to the users size and condition in the field at delivery. It also allows for subsequent adjust, and provides the ability to change the pelvic support surface material to accommodate the changing clinical needs in terms of weight distribution and skin protection.

According to the requestor, this item was brought to market in October of 1997. This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E1013, integrated seating system, contoured, for pediatric wheelchair. The seating system includes all that goes with it, allowing for choices among various components for individual patients.

Payment: Code E1013 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E1013 is currently \$837.93 and the floor is \$712.24. The national, monthly rental, fee schedule ceiling for E1013 is currently \$83.80 and the floor is \$71.23.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 15, Attachment # 03.111

Topic: Request to establish a code for a solid seat, Trade Name: Allegro Pediatric Solid Seat.

Background/Discussion: Jane Wood of the State of South Carolina has submitted a request to establish a code for a solid seat, Trade Name: Allegro Pediatric Solid Seat. Currently, there are only local codes to describe this item. According to the requestor, Allegro pediatric solid seat provides a solid base for use with other types of cushions. It is made of a polyurethane coated birch plywood. The insert easily fits under the cushion, inside the cushion cover. It eliminates the hammocking effect of sling seats. It offers firm support for the pelvis and spine to promote upright positioning and to improve respiration. It is used for patients with poor positioning support in their pelvis and hips and spinal deformities of the trunk.

This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendations to the HCPCS National Panel: Delete code K0030 and crosswalk to E0992 (because K0030 is duplicative), and revise E0992 to read:
E0992 Manual wheelchair accessory, solid seat insert.

Payment: Code K0030/E0992 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for K0030 is currently \$95.15 and the floor is \$80.88. The national, monthly rental fee schedule ceiling for K0030 is currently \$9.25 and the floor is \$7.86.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 16, Attachment # 03.105

Topic: Request to establish a code for a temperature management and stability wheelchair cushion, Trade Name: ComforT° cushion.

Background/Discussion: Robert Clarke of Otto Bock submitted a request to establish a code for a temperature management and stability wheelchair cushion, Trade Name: ComforT° cushion. This wheelchair cushion is used by people requiring heat mitigation, postural stability, pressure relief and immersion. According to the requestor, ComforT cushion is a pressure-relieving cushion with phase change materials for temperature management capability and foam base with integrated ethafoam rails and anterior wedge for forward & lateral stability. ComforT cushion absorbs heat build-up from the seat interface, yielding a cooler seated surface. The cushion supports the user in a postural integral position and provides full immersion and pressure relief for the user. Temperature management capability in the cushion comes from the phase change materials located immediately beneath the cushion cover. This material melts as it is exposed to heat from the seat interface. It is this process that allows the material to absorb the seat interface heat, creating a cooler seating surface.

According to the requestor, this product has been on the market since October 2002. This item is used 96% of the time in the patients' homes, 1% of the time in nursing facilities, 2% of the time for inpatient facilities, and 1% of the time in outpatient facilities.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E0192, low pressure and positioning equalization pad, for wheelchair. This product fits the criteria for coding at E0192. Temperature management is a matter of convenience, and does not impact coding.

Payment: Code E0192 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E0192 is currently \$387.01 and the floor is \$328.96. The national, monthly rental, fee schedule ceiling for E0192 is currently \$38.98 and the floor is \$33.13.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 17, Attachment # 03.99

Topic: Request to establish a code for a gel wheelchair cushion, Trade Name: Buns-EZ Custom Gel Wheelchair Cushion.

Background/Discussion: Jane Wood of the State of South Carolina DHHS has submitted a request to establish a code for a gel wheelchair cushion, Trade Name: Buns-EZ Custom Gel Wheelchair Cushion. Currently, there are only local codes to describe this item. According to the requestor, Custom Gel Wheelchair Cushions are used by people with restricted mobility who are at increased risk of developing pressure sores. They are designed to re-distribute weight and provide excellent pressure relief. They help to improve positioning and posture, providing optimal comfort to the user.

This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E0178, gel or gel-like pressure pad or cushion, nonpositioning. The height and characteristics of this product fit the criteria for coding at E0178.

Payment: Code E0178 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E0178 is currently \$121.34 and the floor is \$103.14. The national, monthly rental, fee schedule ceiling for E0178 is currently \$15.01 and the floor is \$12.76.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 18, Attachment # 03.38

Topic: Request to establish a code for an alternating pressure seating system, trade name: Airpulse Cushion.

Background/Discussion: Steve Kohlman of Aquila Corporation submitted a request to establish a code for an alternating pressure seating system, trade name: Airpulse Cushion. According to the requestor, Airpulse is an alternating pressure relief cushion system. This portable automatic device is used in wheelchairs to help prevent and heal pressure sores. It is intended for paraplegics, quadriplegics, and amputees that are not able to maintain good pressure relief by performing manual pressure lifts. Airpulse inflates and deflates in two areas of the pad automatically and changes pressure contact point allowing blood to flow into and out of compressed tissue over the posterior. There are 4 different pressure settings for pad inflation and 10 different cycle times for each section. In addition, there are two separate areas of the cushion and cycle time for each area can be set to independent cycle times. The user places the cushion onto the chair and connects the hoses to the control module. Patients can dial in the settings and follow the doctor's orders.

According to the requestor, this product has been on the market since December 1999. This item is used 85% of the time in the patient's home by the patient, 5 % of the time in nursing facilities, and 10% of the time in hospital inpatient facilities.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Not to establish a code because of low volume of documented use. Use existing code K0108, wheelchair component or accessory not otherwise specified.

Payment: Claims for items billed using code K0108 (wheelchair component or accessory, not otherwise specified) are paid in accordance with the fee schedule payment methodology. However, a fee schedule is not established for this HCPCS code because it is used for miscellaneous and varying items. The DMERCs establish local fee schedule amounts for groups of like items that are coded using K0108. The DMERCs will assign the items to a DME fee schedule category. The HCPCS pricing indicator for code K0108 is 46 for "carrier priced."

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 19, Attachment # 03.107

Topic: Request to establish a code for a reclining back wheelchair accessory, trade name: Comfy Reclining Wheelchair Back.

Background/Discussion: Debra Harrington of Harrington Consultants submitted a request to establish a code for a reclining back wheelchair accessory, trade name: Comfy Reclining Wheelchair Back. According to the requestor, Comfy Recline easily replaces most manual wheelchairs sling backs and allows the user to recline in any of 5 different positions to a maximum of 45 degrees. The back is high and is padded with foam. This wheelchair back replaces existing wheelchair backs and is used for those patients who are unable to sit straight up or lay fully reclined.

According to the requestor, this product has been on the market since May 2002. This item is used 75% of the time in the patients' homes and 25% of the time in nursing facilities.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Establish the following "E" code:

E???? Manual wheelchair accessory, semi-reclining back (recline greater than 15 degrees but less than 80 degrees).

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 20, Attachment # 03.121

Topic: Request to establish a code for an integrated back, contoured, adjustable for pediatric wheelchair with fixed mounting hardware, Trade Name: Jay® Fit Adjustable Contour Back.

Background/Discussion: Rita Hostak of Sunrise Medical has submitted a request to establish a code for an an integrated back, contoured, adjustable for pediatric wheelchair with fixed mounting hardware, Trade Name: Jay® Fit Adjustable Contour Back. According to the requestor, Jay® Fit Adjustable Contour Back is a contoured adjustable solid back configured to the wheeled mobility base measurements and individual users measurements. Construction includes a solid back shell with mounting tracks, pre-contoured foam insert with lumbar support and scapular relief, mechanically attached adjustable lateral and posterior pelvic support system, a choice of air exchange or incontinent cover, and optional fluid pad for pressure distribution of the posterior bony prominences of the spine. It also includes fixed mounting hardware system that attaches to the back of the mobility base frame, but allows for unit to be removed easily for folding. This design allows for a precise fitting of the posterior contours of the back that act on the pelvis and lumbar spine to the users size and condition in the field at delivery, for subsequent adjustments as required by change in condition and desired effect on posture or growth, and the ability to change the support surface material and cover technology to accommodate the changing clinical needs in terms of skin protection.

According to the requestor, this item was brought to market in October of 1997. This item is used 100% of the time in the patient's home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E1013 "Contoured Seating System". This includes the seat and back. A back should be provided with a seat at the same time.

Payment: Code E1013 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for E1013 is currently \$837.93 and the floor is \$712.24. The national, monthly rental, fee schedule ceiling for E1013 is currently \$83.80 and the floor is \$71.23.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 21, Attachment # 03.90

Topic: Request to establish a code for a power-assist for manual wheelchairs, Trade Name: e.motion by Frank Mobility Systems, Inc. and Quickie Xtender by Sunrise Medical.

Background/Discussion: Jennifer Hutter, on behalf of Frank Mobility Systems, Inc., submitted a request to establish a code for a power-assist for manual wheelchairs, Trade Name: e.motion by Frank Mobility Systems, Inc. and Quickie Xtender by Sunrise Medical. According to the requestor, e.motion is a push-rim activated power assist for manual wheelchairs. It consists of two direct drive wheels with motor and batteries integrated in the wheel hubs. It will fit on almost any wheelchair available. Motors are brushless and gearless and require no maintenance. The wheels are interchangeable with the existing manual wheels in most cases. A battery charger is included. Users propel themselves as they would in a manual wheelchair, and the motors provide power assistance as regulated by the support levels. Power assistance works in any direction. It is used for patients who are wheelchair dependent.

According to the requestor, this item was brought to market in March of 2001. The Sunrise Quickie Xtender was brought to market two months ago. This item is used 95% of the time by the patient in the patient's home and 5% of the time by dealers for demonstrations.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Establish the following "E" code:

E???? Manual wheelchair accessory push-rim activated power assist, each.

Payment: Code E???? would fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). If covered, payment would be made on a purchase basis. The fee schedule amounts would be gap-filled by the DMERCs.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Meeting Agenda Item # 22, Attachment # 03.104

Topic: Request to establish a code for a manual wheelchair with incorporated lift assist seat, Trade Name: Comfy High-Riser Lift-Assist Wheelchair.

Background/Discussion: Debra Harrington of Harrington Consultants submitted a request to establish a code for a manual wheelchair with incorporated lift assist seat, Trade Name: Comfy High-Riser Lift-Assist Wheelchair. According to the requestor, Comfy High-Riser consists of a manual wheelchair base with a lift assist mechanism incorporated into the frame with steel reinforced braces that are attached to the chair frame with steel hardware. The seat can also elevate to 8 inches from its standard position of 20 inches. The seat and stem can be removed from the hardware to allow the frame to fold for easy transport. Two gas frames are incorporated into the seat mechanism to allow the seat to assist with standing and sitting. The seat will go down into the standard position and lock once the patient is sitting back in the chair. When the body weight is shifted forward, the seat will rise assisting with the stand.

According to the requestor, this product was brought to market in September 2002. This item is used 75% of the time in the patients' homes and 25% of the time in nursing facilities.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code K0001, "standard wheelchair", without separately coding for the elevating seat, because it is a convenience item.

Payment: Code K0001 falls under the DME fee schedule payment category for capped rental items (pricing indicator of 36 in the HCPCS). If covered, payment would be made on a rental basis. The national, monthly rental, fee schedule ceiling for K0001 is currently \$54.62 and the floor is \$46.43.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 23, Attachment # 03.117

Topic: Request to modify existing code E1236 a new code to describe a pediatric wheelchair, folding, multi-adjustable with seating system, Trade Name: Sunrise Medical- Kids Quickie®.

Background/Discussion: Rita Hostak of Sunrise Medical has submitted a request to modify existing code E1236 to describe a pediatric wheelchair, folding, multi-adjustable with seating system, Trade Name: Sunrise Medical- Kids Quickie®. According to the requestor, this pediatric, folding, multi-adjustable wheelchair comes with a standard seat and back and includes at least one style of footrests and armrests. It is adjustable for fixed seat angle, varying floor to seat heights, and at least 3” of front to back wheel position. It provides mobility and seating for children with disabilities that require a folding frame and multi-adjustment features. With the current descriptor of “adjustable” in E1235-E1238, any chair with one single adjustable component would qualify as adjustable without providing distinction for the products that provide multiple medically necessary adjustments.

According to the requestor, this product was brought to market in November of 1989. This item is used 100% of the time in the patient’s home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E1236, “wheelchair, pediatric size, folding, adjustable, with seating system”, as assigned the previous year to this product category. This product meets the criteria for coding at E1236. Multi-adjusting was included in the intent of establishing E1236, as suited to pediatric wheelchairs, so they can change as the patient grows.

Payment: Effective July 1, 2003, code E1236 will fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. Effective July 1, 2003, the national, purchase fee schedule ceiling and floor for E1236 will be \$1,638.73 and \$1,392.92, respectively, for items furnished on or after January 1, 2003. Effective July 1, 2003, the national, monthly rental fee schedule ceiling and floor for E1236 will be \$163.87 and \$139.29, respectively, for items furnished on or after January 1, 2003.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 24, Attachments # 03.118 & #03.119

Topic: Request to modify existing code E1238 (03.118) to describe a pediatric wheelchair, folding, multi-adjustable without seating system, Trade Name: Sunrise Medical- Zippie®2 and certain models of the Zippie® GS, and also to modify existing code E1237 (03.119) to describe a pediatric wheelchair, rigid, multi-adjustable without seating system, Trade Name: Zippie®GS and Zippie®.

Background/Discussion: Rita Hostak of Sunrise Medical has submitted a request to modify existing code E1238 to describe a pediatric wheelchair, folding, multi-adjustable without seating system, Trade Name: Sunrise Medical- Zippie®2 and certain models of the Zippie® GS. According to the requestor, the Zippie®2 and certain models of the Zippie® GS are wheelchairs or other wheeled frames without upholstery, with a structure designed to be used as a base for attaching seat and back supports, and include at least one style of footrests and armrests. The Zippie®2 can accommodate seat widths 12” to 16” and seat depths of 12” to 18”. It has an adjustable caster housing and allows for the front and rear seat to floor heights to be adjusted independently, creating a variable fixed seat angle. It can be adjusted for fixed seat to floor heights from 15.75” to 20.50”. The universal axle plate allows half-inch vertical and horizontal adjustments with 9.5” of total GC adjustments. The Zippie GS and Zippie are available in sizes at least as small as 10” wide and 10” deep, and at least as large as 14” wide and 14” deep, or in sizes at least as small as 12” wide and 12” deep and at least as large as 16” wide and 16” deep. They may have one or more components, which remove or fold, but the basic frame does not fold or collapse.

The Zippie 2 and certain models of the Zippie GS were brought to market in November of 1991. This item is used 100% of the time in the patient’s home by the patient. The Zippie GS and Zippie were brought to market in November 1988. It is used 100% of the time in the patient’s home by the patient. Pre-market notification is not required by the FDA for these products.

Coding Recommendations: (03.118)CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E1238, “wheelchair, pediatric size, folding, adjustable, without seating system”, as assigned the previous year to this product category. This product meets the criteria for coding at E1238. Multi-adjusting was included in the intent of establishing E1238, as suited to pediatric wheelchairs, so they can change as the patient grows.

(03.119)CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E1237, wheelchair, pediatric size, rigid, adjustable, without seating system, as assigned the previous year to this product category. This product meets the criteria for coding at E1237. Multi-adjusting was included in the intent of establishing E1237, as suited to pediatric wheelchairs, so they can change as the patient grows.

Payment: (03.118)Effective July 1, 2003, code E1238 will fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. Effective July 1, 2003, the national,

purchase fee schedule ceiling and floor for E1238 will be \$1,723.55 and \$1,465.02, respectively, for items furnished on or after January 1, 2003. Effective July 1, 2003, the national, monthly rental fee schedule ceiling and floor for E1238 will be \$172.37 and \$146.51, respectively, for items furnished on or after January 1, 2003.

(03.119)Effective July 1, 2003, code E1237 will fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. Effective July 1, 2003, the national, purchase fee schedule ceiling and floor for E1237 will be \$1,653.05 and \$1,405.09, respectively, for items furnished on or after January 1, 2003. Effective July 1, 2003, the national, monthly rental fee schedule ceiling and floor for E1237 will be \$165.30 and \$140.51, respectively, for items furnished on or after January 1, 2003.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 25, Attachment # 03.86

Topic: Request to establish a code for a pediatric size wheelchair, rigid, multi-adjusting with seating system, Trade Name: Quickie®Kidz.

Background/Discussion: Rita Hostak of Sunrise Medical has submitted a request to establish a different code for a pediatric size wheelchair, rigid, multi-adjusting with seating system, Trade Name: Quickie®Kidz. According to the requestor, Quickie®Kidz is a pediatric, rigid, multi-adjustable wheelchair standard with a seat and back that includes at least one style of footrests and armrests. It is available in sizes at least as small as 10” wide and 10” deep and at least as large as 14” wide and 14” deep or at least as small as 12” wide and 12” deep and at least as large as 16” wide and 16” deep. The basic frame does not fold or collapse, although one or more components may remove or fold. It can be adjusted for fixed seat angle, varying floor to seat heights, and at least 3” of front to back rear wheel position. The item is used for children with physical disabilities that require a rigid frame.

According to the requestor, this item was brought to market in November of 1994. It received an FDA 510(k) clearance February 1989. This item is used 100% of the time in the patient’s home by the patient.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E1235, “wheelchair, pediatric size, rigid, adjustable, with seating system,” as assigned the previous year to this product category. This product meets the criteria for E1235. Multi-adjusting was included in the intent of establishing E1235, as suited to pediatric wheelchairs, so they can change as the patient grows.

Payment: Effective July 1, 2003, code E1235 will fall under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. Effective July 1, 2003, the national, purchase fee schedule ceiling and floor for E1235 will be \$1,857.43 and \$1,578.82, respectively, for items furnished on or after January 1, 2003. Effective July 1, 2003, the national, monthly rental fee schedule ceiling and floor for E1235 will be \$185.75 and \$157.89, respectively, for items furnished on or after January 1, 2003.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 26, Attachment # 03.116

Topic: Request to establish a code for a portable overhead lifter, track system for use with overhead lifter, and hammock/sling for use with overhead lifter, Trade Name: Guardian®Voyager Portable Overhead Lifter, Guardian®Easytrack™ System, Guardian Hammock Sling (S,M,L), Guardian Hammock – 6 straps with head support Sling (S,M,L), Guardian Quick Fit Sling (S,M,L), Guardian Hygienic Sling (S,M,L).

Background/Discussion: Rita Hostak of Sunrise Medical has submitted a request to establish codes for a portable overhead lifter, track system for use with overhead lifter, and hammock/sling for use with overhead lifter, Trade Name: Guardian®Voyager Portable Overhead Lifter, Guardian®Easytrack™ System, Guardian Hammock Sling (S,M,L), Guardian Hammock – 6 straps with head support Sling (S,M,L), Guardian Quick Fit Sling (S,M,L), Guardian Hygienic Sling (S,M,L). According to the requestor, Guardian® *Voyager* Portable Overhead Lifter is designed to transfer patient that require the use of a lifter, although the use of a more traditional floor lifter is not functional or may be hazardous to use. It has a lightweight design and allows for easy attachment to the Easytrack™ trolley. It has a heavy-duty capacity, capable of lifting up to 440 lbs. Quick release strap prevents lifting the Voyager onto the rail. It has an emergency stop safety feature as well as the lower and strap twist prevention, which helps to ensure safety. The dual controls allow for easy access to controls to facilitate effortless movement. The Easytrack™ allows use in even small rooms where a conventional floor lifter cannot be maneuvered. The unique ceiling to floor spring-loaded design does not require permanent installation or alterations to the ceiling.

According to the requestor, this items were brought to market in October 2001. This item is used 30% of the time in the patient's home by the patient, 65% of the time in the patient's home by a health care provider, 3% of the time in nursing homes/SNF's, 1% of the time in hospital inpatient facilities, and 1% of the time in hospital outpatient facilities.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Use existing code E0635, patient lift, electric, with seat or sling. The lift fits the criteria for coding at E0635. The framework is a matter of convenience.

Payment: Code E0635 falls under the DME fee schedule payment category for capped rental items (pricing indicator of 36 in the HCPCS). Payment is made on a rental basis. The national, monthly rental fee schedule ceiling for E0635 is currently \$122.36 and the floor is \$104.01.

ALPHA-NUMERIC HCPCS REQUEST

June 24, 2003 Public Meeting Agenda Item # 27, Attachment # 03.65

Topic: Request to establish a code for a single levered wheelchair rear wheel locking mechanism, trade name: Flex-Premium Immobilizing System.

Background/Discussion: Keith Tanksley of Lawrence-Nelson LLC submitted a request to establish a code for a single levered wheelchair rear wheel locking mechanism, trade name: Flex-Premium Immobilizing System. According to the requestor, the Flex is a rear wheel immobilizer for wheelchairs that have aluminum components of 6061 alloy with a gold finish. The push-pull cable is stainless steel and has a yield point in excess of 1000 lbs. It immobilizes both wheels simultaneously by the operation of one lever. Flex is installed and adjusted by a trained wheelchair dealer/technician. It can be equipped with an extension handle if needed for ease of operation. In addition, the flex can be retrofitted with plated steel shoes to increase wheel holding or to correct normal wear.

According to the requestor, this product has been on the market since April 2002. This item is used 43% of the time in the patient's homes, and 57% of the time in skilled nursing facilities.

Coding Recommendation: CMS HCPCS Workgroup preliminary recommendation to the HCPCS National Panel: Not to establish a code because of low volume of documented use, and to use existing code K0081 WHEEL LOCK ASSEMBLY, COMPLETE, EACH, and bill for 2 units because there are 2 locks.

Payment: Code K0081 falls under the DME fee schedule payment category for inexpensive or routinely purchased items (pricing indicator of 32 in the HCPCS). Payment is made on a purchase or rental basis. The national, purchase fee schedule ceiling for K0081 is currently \$40.68 and the floor is \$34.58. The national, monthly rental, fee schedule ceiling for K0081 is currently \$4.06 and the floor is \$3.45.

PAYMENT FOR DURABLE MEDICAL EQUIPMENT (DME)

Section 1834(a) of the Social Security Act (the Act) requires that payment for DME furnished on or after January 1, 1989, be made on the basis of fee schedules. Prior to January 1, 1989, payment for DME was made on the basis of the reasonable charge methodology. For purposes of establishing the DME fee schedule, section 1834(a) of the Act separates DME into the following payment categories, each with its own unique payment rules:

- Inexpensive and other Routinely Purchased Items
- Frequently Serviced Items
- Oxygen and Oxygen Equipment
- Capped Rental Items

There is also a payment category for customized items. The carriers determine the payment amount for purchase of each customized item. These payment categories are described at the end of this document.

Section 1834(a) of the Act requires that statewide fee schedule amounts be established based on average reasonable charges made during a base period from 1986 to 1987, increased by 1.7 percent to arrive at 1989 ("base") fee schedule amounts. The specific months from 1986 to 1987 that are used to calculate the statewide fee schedule amounts vary by payment category. The fee schedule amounts are updated on an annual basis by a factor legislated by Congress. In addition, the fee schedule amounts are limited by a national ceiling (upper limit), equal to the median of the statewide fee schedule amounts, and a national floor (lower limit), equal to 85 percent of the median of the statewide fee schedule amounts.

Because reasonable charge data from 1986-87 does not exist for new DME items, the carriers must "gap-fill" the base fee schedule amounts for these items using a methodology provided in section 5101.2.A of the Medicare Carriers Manual. This section instructs the carriers to gap-fill using:

- the fee schedule amounts for comparable equipment,
- calculated fee schedule amounts from a neighboring carrier, or
- supplier price lists.

As a substitute for supplier price lists when they are not available, the carriers may gap-fill the base fee schedule amounts using the manufacturer's suggested retail prices or wholesale prices plus a markup.

The gap-filling methodology is used to approximate historic reasonable charges from 1986 to 1987 when historic data are not available. This gap-filling methodology has been in use since 1989, the initial year of the DME fee schedules. If neither reasonable charge data or prices lists from 1986-87 are available and more current prices are used, the carriers are instructed to decrease the more current prices by a “deflation” factor in order to approximate the 1986/1987 base year price for gap-filling purposes. The deflation factors are equal to the percentage change in the consumer price index for all urban consumers (CPI-U) from the mid-point of the fee schedule base period (1986/87) to the mid-point of the year in which the retail price is in effect (e.g. 2001). After deflating the prices, the carriers will increase the prices by 1.7 percent to arrive at 1989 base fee schedule amounts.

The carriers then submit the 1989 base fee schedule amounts to CMS. To set the final fee schedule amounts, CMS applies all of the annual update factors that have occurred since 1989 to these base amounts and calculates the national ceiling and floor limits. The final fee schedule amounts are then transmitted to the carriers and fiscal intermediaries for implementation.

DME PAYMENT CATEGORIES

INEXPENSIVE AND OTHER ROUTINELY PURCHASED ITEMS

- Section 1834(a)(2) of the Act
- Fee Schedules: Purchase (new); Purchase (used); Rental (monthly)
- Fee Schedule Base Period: July 1, 1986 through June 30, 1987

Items that have a purchase price of \$150 or less, are generally purchased 75 percent of the time or more, or which are accessories used in conjunction with a nebulizer, aspirator, continuous airway pressure device, or intermittent assist device with continuous airway pressure device. Total rental payments cannot exceed the purchase (new) fee for the item.

FREQUENTLY SERVICED ITEMS

- Section 1834(a)(3) of the Act
- Fee Schedules: Rental (monthly)
- Fee Schedule Base Period: July 1, 1986 through June 30, 1987

Items that require frequent and substantial servicing. Examples of such items are provided in section 1834(a)(3)(A) of the Act. These items are rented as long as they are medically necessary.

OXYGEN AND OXYGEN EQUIPMENT

- Section 1834(a)(5) of the Act

- Fee Schedules: Monthly Payment Amounts for Stationary Equipment, Oxygen Contents, Portable Oxygen Contents, and Portable Equipment
- Fee Schedule Base Period: January 1, 1986 through December 31, 1986

Monthly payments are made for furnishing oxygen and oxygen equipment. If the beneficiary owns their equipment, a monthly payment is made for oxygen contents only. An additional monthly payment is made for those beneficiaries who require portable oxygen. If the beneficiary owns their portable equipment, then a monthly payment is made for portable contents only.

CAPPED RENTAL ITEMS

- Section 1834(a)(7) of the Act
- Fee Schedules: Rental (monthly), Purchase (power wheelchairs only)
- Fee Schedule Base Period: July 1, 1986 through December 31, 1986

Payment for these items is on a rental basis. However, beneficiaries have the option to take over ownership of these items after the 13th rental payment. The supplier must inform the beneficiary of the "purchase option" in the 10th month of rental. If the beneficiary chooses the rental option, total rental payments may not exceed 15, but the supplier must continue to furnish the item as long as it is medically necessary.

The rental fee for capped rental items for each of the first 3 months of rental is equal to 10 percent of the purchase fee for the item. The rental fee for months 4 through 15 is equal to 7.5 percent of the purchase fee for the item. Power wheelchairs can be purchased in the first month.

Beginning 6 months after the 15th rental payment is made, suppliers may be paid a semi-annual (every 6 months) maintenance and servicing fee that is not to exceed 10 percent of the purchase fee for the item. For patient owned items, payment for maintenance and servicing is made as needed.

CERTAIN CUSTOMIZED ITEMS

- Section 1834(a)(4) of the Act

Payment is made in a lump-sum amount for the purchase of the item in a payment amount based on the carrier's individual consideration for that item.

