

MEDICARE

Part A Intermediary Part B Carrier DME Regional Carrier

April 14, 2005

Linda Sherburne, Customer Relations Manager Breg, Inc. 2611 Commerce Way Vista, CA 92081

Re:

X2K Custom (Models C20001, C20004, C20007, C20010, C20013, C20016, C20041,

C20046, C20019, C20022, C20051)

X2K Custom with Adjustable Hinge (Models C20002, C20005, C20008, C20011,

C20014, C20017, C20042, C20047, C20020, C20023, C20052)

Dear Ms. Sherburne:

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Review on April 12, 2005 for the above listed product(s) manufactured by your company. This review resulted in a consensus coding decision.

It is our determination that the above listed product(s) meet(s) the description of the HCPCS code for a knee orthosis as assigned. Therefore, the correct Medicare billing code(s) for the product(s) is/are:

L1846 Knee orthosis, double upright, thigh and calf, with adjustable flexion and extension joint, medial-lateral and rotation control, custom fabricated.

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the SADMERC and four DMERCs. Any modifications to this product could change the HCPCS code and would need to be reviewed for coding verification. The assignment of a HCPCS code to this product should in no way be construed as an approval or endorsement of this product 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.

Palmetto GBA

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

A CMS Contracted Intermediary and Carrier

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

Sincerely,

Jana Brown, RN

HCPCS Medical Analyst

Jan Beam, RN

SADMERC

cc: DMERCs