



## MEDICARE

Part A Intermediary  
Part B Carrier  
DME Regional Carrier

August 25, 2004

Donald J. Wanat, President  
Adaptive Engineering Lab, Inc.  
P.O. Box 12930  
Mill Creek, WA 98082

Re: Pro-Tech Standard Back Systems (Models PS12, PS14, PS16, PS18, PS20, PS22, PS24, PSV12, PSV14, PSV16, PSV18, PSV20, PSV22, PSV24)

Dear Mr. Wanat:

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Review on August 9, 2004 for the above listed product(s) manufactured by your company. This review resulted in a consensus coding decision.

It is our determination that the Pro-Tech Standard Back Systems (Models PS12, PS14, PS16, PS18, PS20, PS22, PS24, PSV12, PSV14, PSV16, PSV18, PSV20, PSV22, PSV24) meets the characteristics and description of the HCPCS code(s) as defined in the DMERC Medical Policy for Wheelchair Seating. Therefore, the correct Medicare billing code(s) for the product(s) is/are:

**K0662 Positioning wheelchair back cushion, posterior, width less than 22 inches, any height, including any type mounting hardware.**

**K0663 Positioning wheelchair back cushion, posterior, width 22 inches or greater, any height, including any type mounting hardware.**

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.

### Palmetto GBA

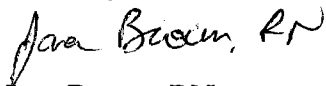
Statistical Analysis Durable Medical Equipment Regional Carrier  
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

**A CMS Contracted Intermediary and Carrier**

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.

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

Sincerely,

A handwritten signature in cursive script that reads "Jana Brown, RN".

Jana Brown, RN  
HCPCS Medical Analyst  
SADMERC

cc: DMERCs