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PO Box 6757  
Fargo, ND 58108-6757

August 27, 2008

Kolbs  
5353 Kings Highway  
Brooklyn NY 11203

**Re:** Avir                   **Xref #:** 6171045

Dear

This letter is in response to your recent inquiry for coding verification of the above listed product(s) manufactured and/or distributed by your company.

It is our determination that the Medicare HCPCS code(s) to bill the four DME Medicare Administrative Contractors (DME MACs) is/are:

E2611 - General use wheelchair back cushion, width less than 22 inches, any height, including any type mounting hardware

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the Pricing, Data Analysis and Coding (PDAC). 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 PDAC or Medicare, nor does it imply or guarantee claim reimbursement or coverage. For questions regarding claim coverage or reimbursement, please contact your DME MAC jurisdiction.

**Should you disagree with this coding decision, a reconsideration can be requested. The reconsideration form is located on the PDAC website ([www.dmepdac.com](http://www.dmepdac.com)) under the HCPCS Review tab. The PDAC will reconsider the request if made within 45 days of the date of this letter and additional supporting documentation is provided. If a request for reconsideration 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.**