



MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

January 7, 2004

Kenneth Fu, General Manager
Karman Healthcare Inc.
12267 Barringer Street South
El Monte, CA 91733

Re: KN-900 Series Extra Wide (Models KN-922-W, KN-922-W-E, KN-924-W,
KN-924-W-E, KN-926-W, KN-926-W-E)

Dear Mr. Fu:

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Review on January 5, 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 KN-900 Series Extra Wide (Models KN-922-W, KN-922-W-E, KN-924-W, KN-924-W-E, KN-926-W, KN-926-W-E) meets the description for an extra heavy-duty wheelchair as defined in the DMERC Medical Policy for Manual Wheelchair Base. Therefore, the correct Medicare billing code(s) for the product(s) is/are

K0007 Extra heavy-duty wheelchair.

When billing for the elevating legrests, use HCPCS code K0195 Elevating legrest, pair (for use with capped rental wheelchair base), for Models KN-922-W-E, KN-924-W-E and KN-926-W-E.

When billing for the 22 inch, 24 inch and 26 inch seat widths, use HCPCS code K0108 Other accessories, **through December 31, 2003**. The HCPCS code K0108 is a miscellaneous code and requires a complete description of the product when billing to Medicare. The description should include the manufacturer name, product name and the reason this item was prescribed for the patient. **Effective January 1, 2004 use HCPCS code E2201 Manual wheelchair accessory, nonstandard seat frame width, greater than or equal to 20 inches, but less than 24 inches, for the 22 inch seat width and use HCPCS code E2202 Manual wheelchair accessory, nonstandard seat frame width, 24-27 inches for the 24 inch and 26 inch seat widths.**

Palmetto GBA

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

A CMS Contracted Intermediary and Carrier



MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

January 7, 2004

Kenneth Fu, General Manager
Karman Healthcare Inc.
12267 Barringer Street South
El Monte, CA 91733

Re: KN-900 Series Wide (Models KN-920W, KN-920W-E)

Dear Mr. Fu:

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Review on January 5, 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 KN-900 Series Wide (Models KN-920W, KN-920W-E) meets the description for an extra heavy-duty wheelchair as defined in the DMERC Medical Policy for Manual Wheelchair Base. Therefore, the correct Medicare billing code(s) for the product(s) is/are

K0007 Extra heavy-duty wheelchair.

When billing for the elevating legrests, use HCPCS code K0195 Elevating legrest, pair (for use with capped rental wheelchair base), for Model KN-920W-E.

When billing for the 20 inch seat width, use HCPCS code K0057 Seat width 19 or 20 inches for heavy duty or extra heavy-duty chair **through December 31, 2003. Effective January 1, 2004 use HCPCS code E2201** Manual wheelchair accessory, nonstandard seat frame width, greater than or equal to 20 inches, but less than 24 inches.

When billing for the 18 inch seat depth, use HCPCS code K0108 Other accessories, **through December 31, 2003.** The HCPCS code K0108 is a miscellaneous code and requires a complete description of the product when billing to Medicare. The description should include the manufacturer name, product name and the reason this item was prescribed for the patient. **Effective January 1, 2004, seat widths and/or seat depths of 15-19 inches are included in the allowance for the base code.**

Palmetto GBA

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

A CMS Contracted Intermediary and Carrier