CMS
CENTERS for MEDICARE & MEDICAID SERVICES

MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

March 30, 2006

Bauerfeind USA, Inc.
55 Chastain Road, Suite 112
Kennesaw, GA 30144

Re: SofTec Lumbo

Dear :

This letter is in response to your request for an updated HCPCS coding verification letter reflecting the HCPCS code change that was effective January 1, 2006 for the above listed product(s) manufactured by your company. This letter replaces the letter you received dated July 27, 2004.

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Re-Review on July 21, 2004 for the above listed product(s) manufactured by your company. This re-review resulted in a consensus coding decision.

It is our determination that the SofTec Lumbo meets the description for a lumbar-sacral orthosis as defined in the DMERC Medical Policy for Spinal Orthoses. Therefore, the correct Medicare billing code(s) for the product(s) is/are:

L0637 Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior frame/panels, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment.

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.

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