PDAC VERIFICATION LETTERS

PRODUCT	MANUFACTURER	MODEL#	HCPCS CODE	COMMENTS
KNEES				
Freedom Quattro™	PROTEOR USA	QNX0010 QNX0011	L5856+L5828+L5848+ L5845+L5850+L5925	Pyramid Threaded Top
Freedom Plié® 3	PROTEOR USA	KX3-00-KNEEY-KT	L5828+L5848+L5845+ L5856+L5850	
ALLUX 2™	PROTEOR USA	NE-Z41 NE-Z41SH	K1014+L5856+L5848+L5845	SH Indicates Screw Head
ANKLES				
Kinnex 2.0™ Microprocessor Ankle	FREEDOM INNOVATIONS	F14-N2-0X-AYY-ZZ	L5973	In model number: X =category, YY = Size, ZZ = toe configuration
FEET				
FREEDOM HIGHLANDER®	FREEDOM INNOVATIONS	FS3	L5981	
RUSH ROGUE® 2	PROTEOR USA	ROG2-XX-YY-ZZ	L5987+L5984	XX = foot size, YY = foot stiffness, ZZ = foot covering
RUSH ROGUE® 2 H2O	PROTEOR USA	H2R2-XX-YY-ZZ	L5987+L5984	XX = foot size, YY = foot stiffness, ZZ = foot covering
RUSH ROGUE® 2 EVAQ8	PROTEOR USA	EVQR2-XX-YY-ZZ	L5987+L5984+L5781	XX = foot size, YY = foot stiffness, ZZ = foot covering
RUSH ROVER®	PROTEOR USA	ROV-XX-YY-ZZ	L5981	XX = foot size, YY = foot stiffness, ZZ = foot covering
RUSH 76®	PROTEOR USA	CHO-XX-YY-ZZ	L5976	XX = foot size, YY = foot stiffness, ZZ = foot covering
RUSH 81®	PROTEOR USA	LoP-XX-YY-ZZ	L5981	XX = foot size, YY = foot stiffness, ZZ = foot covering
RUSH 87®	PROTEOR USA	HiP-XX-YY-ZZ	L5981	XX = foot size, YY = foot stiffness, ZZ = foot covering

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PRICING DATA ANALYSIS AND CODING (PDAC)

PALMETTO GBA®
A CELERIAN GROUP COMPANY

April 22, 2021

MATTHEW NELSON
PROTEOR USA
1236 W SOUTHERN AVE STE 101
TEMPE, AZ 85282

Document Control Number (DCN): 21047C22100003

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
PROTEOR USA	FREEDOM QUATTRO MICROPROCESSOR KNEE BY PROTEOR	QNX00Y0	L5828+L5848+L5845 +L5856+L5850+L592 5

Dear MATTHEW NELSON,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5828 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL

L5848 ADDITION TO ENDOSKELETAL KNEE-SHIN SYSTEM, FLUID STANCE EXTENSION, DAMPENING FEATURE, WITH OR WITHOUT ADJUSTABILITY

L5845 ADDITION, ENDOSKELETAL, KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE

L5856 ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE

L5850 ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, KNEE EXTENSION ASSIST

L5925 ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION OR HIP DISARTICULATION, MANUAL LOCK

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our website to chat with one of our representatives or select the Contact Us button at the top of the page for

email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding (PDAC)
Palmetto GBA, LLC
www.dmepdac.com

PO BOX 100320 | COLUMBIA, SC 29202-3320 | DMEPDAC.COM | ISO 9001

PRICING DATA ANALYSIS AND CODING (PDAC)

PALMETTO GBA®
A CELERIAN GROUP COMPANY

April 20, 2021

MATTHEW NELSON
PROTEOR USA
1236 W SOUTHERN AVE STE 101
TEMPE, AZ 85282

Document Control Number (DCN): 21047C22100001

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
PROTEOR USA	FREEDOM PLIE 3 MICROPROCESSOR KNEE BY PROTEOR	KX3-00-KNEEY-KT	L5828+L5848+L5845 +L5856+L5850

Dear MATTHEW NELSON,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5828 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL

L5848 ADDITION TO ENDOSKELETAL KNEE-SHIN SYSTEM, FLUID STANCE EXTENSION, DAMPENING FEATURE, WITH OR WITHOUT ADJUSTABILITY

L5845 ADDITION, ENDOSKELETAL, KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE

L5856 ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE

L5850 ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, KNEE EXTENSION ASSIST

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our website to chat with one of our representatives or select the Contact Us button at the top of the page for email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding (PDAC)
Palmetto GBA, LLC
www.dmepdac.com

PO BOX 100320 | COLUMBIA, SC 29202-3320 | PALMETTOGBA.COM

PALMETTO GBA®
A CELERIAN GROUP COMPANY

October 17, 2020

CRAIG ARMSTRONG
PROTEOR USA
1236 W SOUTHERN AVE #101
TEMPE, AZ 85282

DCN Number:20244003000002

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
PROTEOR USA	ALLUX 2	NE-Z41	L5613+L5856+L5848 +L5845
PROTEOR USA	ALLUX 2	NE-Z41SH	L5613+L5856+L5848 +L5845

Dear CRAIG ARMSTRONG,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's

date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our website to chat with one of our representatives or select the Contact Us button at the top of the page for email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding Contract (PDAC)
Palmetto GBA, LLC
www.dmepdac.com

PO BOX 100320 | COLUMBIA, SC 29202-3320 | PALMETTOGBA.COM

Pricing, Data Analysis and Coding Contract (PDAC)

PALMETTO GBA®
A CELERIAN GROUP COMPANY

November 19, 2020

MATTHEW NELSON
FREEDOM INNOVATIONS LLC
3 MORGAN
IRVINE, CA 92618

Document Control Number (DCN): 20297C23100000

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
FREEDOM INNOVATIONS LLC	KINNEX 2.0 MICROPROCESSOR ANKLE	F14-N2-0X-AYY-ZZ	L5973

Dear MATTHEW NELSON,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5973 ENDOSKELETAL ANKLE FOOT SYSTEM, MICROPROCESSOR CONTROLLED FEATURE, DORSIFLEXION AND/OR PLANTAR FLEXION CONTROL, INCLUDES POWER SOURCE

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our website to chat with one of our representatives or select the Contact Us button at the top of the page for email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding Contract (PDAC)
Palmetto GBA, LLC
www.dmepdac.com

NORIDIAN®
Administrative Services LLC

Pricing, Data Analysis and Coding (PDAC)
900 42nd Street South
PO Box 6757
Fargo, ND 58103-6757

March 30, 2012

FREEDOM INNOVATIONS LLC
ATTN KURT COLLIER CP
30 FAIRBANKS
SUITE 114
IRVINE CA 92618

Re: Assigned HCPCS Codes for DME Billing

Xref #: 17916920

Product: HIGHLANDER

Model number: FS3

Dear Mr. Collier:

The Pricing, Data Analysis, and Coding (PDAC) Contractor provides Healthcare Common Procedural Coding System (HCPCS) assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC has reviewed the above listed product. It is our determination that the Medicare HCPCS code to use when billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs) is:

L5981 ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL

The PDAC provides coding decisions based on the coding guidelines established by the Local Coverage Determination (LCD) and associated policy article developed by the DME MACs. All products submitted to PDAC for a coding verification review are carefully examined by coders and professionals following a formal, standardized process.

This decision applies to the application we received on February 15, 2012. If information submitted in that application has changed or were to change, it could impact our decision. Therefore, a new application would need to be submitted for HCPCS coding verification review. This coding decision will be available within ten (10) working days on the Durable Medical Equipment Coding System (DMECS), which is located on the PDAC web site, www.dmepdac.com. Please take the time to verify that this coding decision is correctly reflected in DMECS.

CMS
CENTERS for MEDICARE & MEDICAID SERVICES

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, related to their current listing on the Product Classification List (PCL) on DMECS. Further information for requesting updates to the PCL can be found on the PDAC website at https://www.dmepdac.com/review/notifying.html.

The assignment of a HCPCS code to this product is not an approval or endorsement of the product by Medicare or Noridian Administrative Services, LLC; nor does it imply or guarantee claim reimbursement or coverage. If you have questions about claim coverage or reimbursement, please contact the DME MAC for your jurisdiction.

If you disagree with this decision, you may request a reconsideration within 45 days of the date of this letter. To request a reconsideration, complete the Reconsideration Request form located on the PDAC web site at https://www.dmepdac.com/review/requesting.html. If your request for a reconsideration is made after the 45-day time frame, we will treat it as a coding verification review request and require a new application and documentation to support the request.

If you have questions about claim coverage or reimbursement, please contact the DME MAC for your jurisdiction. For other questions, contact the PDAC Contact Center at the address listed above or by telephone at (877) 735-1326. The Contact Center is open Monday through Friday from 8:30 a.m. to 4 p.m. CT.

PDAC
Noridian Administrative Services, LLC
www.dmepdac.com

PO BOX 100320 | COLUMBIA, SC 29202-3320 | DMEPDAC.COM | ISO 9001

PRICING DATA ANALYSIS AND CODING (PDAC)

PALMETTO GBA®
A CELERIAN GROUP COMPANY

May 14, 2021

CRAIG ARMSTRONG
PROTEOR USA
1236 WEST SOUTHERN AVE #101
TEMPE, AZ 85282

Document Control Number (DCN): 21071C22100001

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
PROTEOR USA	RUSH ROGUE 2	ROG2-XX-YY-ZZ	L5987+L5984

Dear CRAIG ARMSTRONG,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5987 ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON

L5984 ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESIS, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our website to chat with one of our representatives or select the Contact Us button at the top of the page for email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding (PDAC)
Palmetto GBA, LLC
www.dmepdac.com

PO BOX 100320 | COLUMBIA, SC 29202-3320 | DMEPDAC.COM | ISO 9001

PRICING DATA ANALYSIS AND CODING (PDAC)

PALMETTO GBA®
A CELERIAN GROUP COMPANY

May 14, 2021

CRAIG ARMSTRONG
PROTEOR USA
1236 WEST SOUTHERN AVE #101
TEMPE, AZ 85282

Document Control Number (DCN): 21071C22100002

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
PROTEOR USA	RUSH ROGUE 2 H20	H2R2-XX-YY-ZZ	L5987+L5984

Dear CRAIG ARMSTRONG,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5987 ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON

L5984 ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESIS, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our website to chat with one of our representatives or select the Contact Us button at the top of the page for email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding (PDAC)
Palmetto GBA, LLC
www.dmepdac.com

PO BOX 100320 | COLUMBIA, SC 29202-3320 | DMEPDAC.COM | ISO 9001

PRICING DATA ANALYSIS AND CODING (PDAC)

PALMETTO GBA®
A CELERIAN GROUP COMPANY

May 14, 2021

CRAIG ARMSTRONG
PROTEOR USA
1236 WEST SOUTHERN AVE #101
TEMPE, AZ 85282

Document Control Number (DCN): 21071C22100003

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
PROTEOR USA	RUSH ROGUE 2 EVAQ8	EVQR2-XX-YY-ZZ	L5987+L5984+L5781

Dear CRAIG ARMSTRONG,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5987 ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON

L5984 ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESIS, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY

L5781 ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our website to chat with one of our representatives or select the Contact Us button at the top of the page for email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding (PDAC)
Palmetto GBA, LLC
www.dmepdac.com

noridian
Healthcare Solutions

900 42nd Street South
Fargo, ND 58103

January 10, 2017

ABILITY DYNAMICS LLC
1236 WEST SOUTHERN AVENUE # 101
TEMPE AZ 85282

Re: Assigned HCPCS Codes for DME Billing

Xref: 60935480

RUSH ROVER	ABILITY DYNAMICS LLC	L5981

Dear J Blount Swain:

The Pricing, Data Analysis, and Coding (PDAC) contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies **(**DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

The PDAC has reviewed the above listed product(s). Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5981 - All Lower Extremity Prostheses, Flex-Walk System Or Equal

The Ability Dynamic's foot model RUSH ROVER coding verification application requested two codes, in combination, be assigned to this product:

- L5981 (ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL)

- L5986 (ALL LOWER EXTREMITY PROSTHESES, MULTI-AXIAL ROTATION UNIT ('MCP' OR EQUAL)

The RUSH ROVER prosthetic foot has the following characteristics:

• It is a composite material foot with the optional connectors that allow it to be utilized for Endoskeletal and possibly Exoskeletal as well.
• It has a two-part keel; each part is constructed of a continuous monolithic laminate. One keel is full length from heel to toe. The second keel is shorter and cantilevers over the sole plate and provides the fastening point for a specialized 4-hole pattern connector. This keel locates the connector at the 1/3 distance of full length sole plate. It is adjoined at the heel with a gap between to two keels to allow sagittal plane bending. This design provides for energy storing function.
• Height of the connector is kept to a minimum to facilitate use for amputees with a long residual limb.
• There is no distinct component that is identifiable as a multi-axial rotation unit.
• There is no distinct component that is identifiable as a vertical loading pylon.
• Removable foot shell is included to cover keel and soleplate.

The HCPCS code assigned to the RUSH ROVER is based upon criteria set out in the code narrative, CMS and DME MAC coding instructions contained in bulletin articles, relevant Coding Guidelines and an analysis of the relevant predicate product(s). Predicate products is the term used to refer to the items that form the basis of the code descriptor and are important to provide context in interpretation of the code narrative and related coding guidelines. Based upon these sources, the requested HCPCS codes require:

• L5981 (ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL)

Code L5981 describes specific predicate product in the narrative, i.e. Flex-Walk system or equal. The Flex-Walk is an energy storing J-shaped design based on a monolithic carbon composite keel. At 4 inches the Flex-Walk system makes a 90+ degree bend anteriorly to form a flat coupling surface. It has a heel component bolted midway onto the J-shaped keel section. A 4-hole pattern coupling option is used. The Flex Walk is no longer available on the market. It has been replaced with the Vari-Flex which has similar characteristics with a similar shank height but has a straight shank. The foot shell may or may not include cosmetic details. Vari-Flex XC with Evo has been reviewed and assigned to L5981.

• L5986 (ALL LOWER EXTREMITY PROSTHESES, MULTI-AXIAL ROTATION UNIT ('MCP' OR EQUAL)

Code L5986 represents a component that is attached to a foot. The narrative “multi-axial rotation unit ('mcp' or equal)” describes a product that would allow motion in all three planes of motion: Coronal, Sagittal, and Transverse. This component may have distinct axles or pivots or some type of compressible material, like a firm rubber along with coupling surfaces, is attached to the foot and simulates anatomic ankle motions for the amputee while walking. This code does not describe multi-axial motion through multiple planes achieved as a result of the inherent flexibility of the foot design.

The RUSH ROVER does not have a distinct component that is identifiable as a multi-axial rotation unit; therefore, L5986 is not assigned.

Based upon the requirements described above, HCPCS code L5981 is assigned.

This decision applies to the application we received on October 14, 2016. If information submitted in that application has changed or were to change, it could impact our decision. Therefore, a new application would need to be submitted for HCPCS coding verification review. The coding assigned in this decision letter will be available on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS) within ten (10) working days from the letter's date. The DMECS can be accessed on the PDAC website, www.dmepdac.com. Please take the time to verify that this coding decision is correctly reflected in DMECS.

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at https://www.dmepdac.com/review/requesting.html. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the PCL on DMECS. Further information for requesting updates to the PCL can be found on the PDAC website at https://www.dmepdac.com/review/notifying.html. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Noridian Healthcare Solutions; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions about policy, claim coverage or reimbursement, please contact the DME MAC for your jurisdiction. For other questions, contact the PDAC Contact Center at the address listed above or by telephone at (877) 735-1326. The Contact Center is open Monday through Friday from 8:30 a.m. to 4 p.m. CT.

Sincerely,

PDAC
Noridian Healthcare Solutions, LLC
www.dmepdac.com

noridian
Healthcare Solutions

900 42nd Street South
Fargo, ND 58103

January 10, 2017

ABILITY DYNAMICS LLC
1236 WEST SOUTHERN AVENUE # 101
TEMPE AZ 85282

Re: Assigned HCPCS Codes for DME Billing

Xref: 60935466

RUSH76	ABILITY DYNAMICS LLC	L5976

Dear J Blount Swain:

The Pricing, Data Analysis, and Coding (PDAC) contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies **(**DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

The PDAC has reviewed the above listed product(s). Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5976 - All Lower Extremity Prostheses, Energy Storing Foot (Seattle Carbon Copy II Or Equal)

This decision applies to the application we received on October 14, 2016. If information submitted in that application has changed or were to change, it could impact our decision. Therefore, a new application would need to be submitted for HCPCS coding verification review. The coding assigned in this decision letter will be available on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS) within ten (10) working days from the letter's date. The DMECS can be accessed on the PDAC website, www.dmepdac.com. Please take the time to verify that this coding decision is correctly reflected in DMECS.

noridian
Healthcare Solutions

900 42nd Street South
Fargo, ND 58103

January 10, 2017

ABILITY DYNAMICS LLC
1236 WEST SOUTHERN AVENUE # 101
TEMPE AZ 85282

Re: Assigned HCPCS Codes for DME Billing

Xref: 60935451

RUSH87	ABILITY DYNAMICS LLC	L5981

Dear J Blount Swain:

The Pricing, Data Analysis, and Coding (PDAC) contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies **(**DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

The PDAC has reviewed the above listed product(s). Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L5981 - All Lower Extremity Prostheses, Flex-Walk System Or Equal

The Ability Dynamic's foot model RUSH87 coding verification application requested two codes, in combination, be assigned to this product:

- L5987 (ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON)

- L5986 (ALL LOWER EXTREMITY PROSTHESES, MULTI-AXIAL ROTATION UNIT ('MCP' OR EQUAL)

The RUSH87 prosthetic foot has the following characteristics:

• It is a composite material foot with the optional connectors that allow it to be utilized for Endoskeletal and possibly Exoskeletal prosthesis as well.
• It has a continuous (monolithic), J-shape keel that extends proximally into a vertical orientation. This design provides for energy storing function.
• Height of the vertical section from the sole extends to just under 6 inches and does not include 4-hole pattern connectors which are bolted thru the flat vertical surface of the upper end of the J-shaped keel.
• Adjoining at the toe is a sole plate that extends posteriorly to create a heel section.
• There is a large black rectangular block of compressible material affixed to the underside of the J-shaped keel which impacts the sole plate to constrain motion of these two sections.
• There is no distinct component that is identifiable as a multi-axial rotation unit.
• There is no distinct component that is identifiable as a vertical loading pylon.
• Removable foot shell is included to cover keel and soleplate.

The HCPCS code assigned to the RUSH87 is based upon criteria set out in the code narrative, CMS and DME MAC coding instructions contained in bulletin articles, relevant Coding Guidelines, and an analysis of the relevant predicate product(s). Predicate products is the term used to refer to the items that form the basis of the code descriptor and are important to provide context in interpretation of the code narrative and related coding guidelines. Based upon these sources, the requested HCPCS codes require:

• L5987 (ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON) requires a distinct component of the shank foot system that allows purely vertical motion within the pylon or shank section. In addition, L5987 describes a product that has all of the required components integrated into a single product, i.e., not an assembly of separate components. It is a J-shaped foot with energy storing foot design. It has a vertical loading pylon. “Shank” refers to the product having sufficient vertical height that emulates the lower leg. The “vertical loading pylon” is a vertically telescoping pylon with a composite fiber spring link. The pylon can be adjusted for optimal height with respect to the prosthesis as a whole. The composite spring attached to the side of the pylon allows a controlled motion of the telescoping pylon component. The predicate product is the Flex Foot Reflex VSP, CMS application #94.44. This code does not describe vertical loading or shock absorption achieved as a result of the inherent flexibility of the J-shaped foot design. The foot shell may or may not include cosmetic details.

• L5986 (ALL LOWER EXTREMITY PROSTHESES, MULTI-AXIAL ROTATION UNIT ('MCP' OR EQUAL) describes a separate component that is attached to a foot. The narrative “multi-axial rotation unit ('mcp' or equal)” describes a product that allows motion in all three planes of motion: Coronal, Sagittal, and Transverse. This component may have distinct axles or pivots or some type of compressible material, like a firm rubber along with coupling surfaces, is attached to the foot and simulates anatomic ankle motions for the amputee while walking. This code does not describe multi-axial motion through multiple planes achieved as a result of the inherent flexibility of the foot design.

The RUSH87 does not have a distinct component that is identifiable as a vertical loading pylon; therefore, L5987 is not assigned. Also, there is no distinct component that is identifiable as a multi-axial rotation unit; therefore, L5986 is not assigned.

Based upon the requirements described above, the following HCPCS code is assigned:

> • Code L5981 (ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL). This code describes a specific predicate product in the narrative, i.e., Flex-Walk system or equal. The Flex-Walk is an energy storing J-shaped design based on a monolithic carbon composite keel. At 4 inches the Flex-Walk system makes a 90+ degree bend anteriorly to form a flat coupling surface. It has a heel component bolted midway onto the J-shaped keel section. A 4-hole pattern coupling option is used. The Flex-Walk is no longer available on the market. It has been replaced with the Vari-Flex which has similar characteristics with a similar shank height but now has a straight shank. It includes a foot shell which may or may not include cosmetic details. Vari-Flex XC with Evo has been reviewed and assigned to code L5981.

This decision applies to the application we received on October 14, 2016. If information submitted in that application has changed or were to change, it could impact our decision. Therefore, a new application would need to be submitted for HCPCS coding verification review. The coding assigned in this decision letter will be available on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS) within ten (10) working days from the letter's date. The DMECS can be accessed on the PDAC website, www.dmepdac.com. Please take the time to verify that this coding decision is correctly reflected in DMECS.

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Sincerely,

PDAC
Noridian Healthcare Solutions, LLC
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