



MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

June 8, 2005

FLA Orthopedics, Inc.
2881 Corporate Way
Miramar, FL 33025

Re: Perforated Suede Finish Wrist Splint (Model 22-441, 22-442)

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Review on June 6, 2005 for the above listed product manufactured by your company. This review resulted in a consensus coding decision.

It is our determination that the above listed product(s) meet(s) the description for the HCPCS code(s) as assigned. Therefore, the correct Medicare billing code(s) for the product(s) is/are:

L3908 Wrist hand orthosis, wrist extension control cock-up, nonmolded, 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.

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.

Palmetto GBA

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

A CMS Contracted Intermediary and Carrier

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