



PDAC
Medicare Pricing, Data Analysis
and Coding

900 42nd Street South
PO Box 6757
Fargo, ND 58108-6757

October 21, 2008

GF HEALTH PRODUCTS Inc.
ATTN: BEATRICE SHERER, CEO
2935 NORTHEAST PARKWAY
ATLANTA GA 30360

Re: Patriot Full-Electric Bed(Refer to information below for model number/s)
Xref #: 66922242

Dear Ms. Sherer:

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:

E0297 HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT
ADJUSTMENTS), WITHOUT SIDE RAILS, WITHOUT MATTRESS (Model # US0458,
US0458PL)

(or)

E0266 HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT
ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS (Model #
US0458-RPKG, US0458PL-RPKG, US0458-RPKGHRA, US0458PL-RPKGHRA, US0458-
RPKGHRB, US0458PL-RPKGHRB)

(or)

E0265 HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT
ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITH MATTRESS (Model numbers
listed below:)

US0458-PKG, US0458PL-PKG
US0458-PKGHRA, US0458PL-PKGHRA
US0458-PKGHRB, US0458PL-PKGHRB
US0458-BFPKG, US0458PL-BFPKG
US0458-BFPKGHRA, US0458PL-BFPKGHA
US0458-BFPKGHRB, US0458PL-BFPKGHNB
US0458-BFPKGNGAP, US0458PL-BFPKGNG



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US0458-FPPKG, US045PL-FPPKG
US0458-FPPKGHRA, US0458PL-FPPKGHA
US0458-FPPKGHRB, US0458PL-FPPKGHB
US0458-IFPKG, US0458PL-IFPKG
US0458-IFPKGHRA, US0458PL-IFPKGHA
US0458-IFPKGHRB, US0458PL-IFPKGHB
US0458-RPPKG, US0458PL-RPPKG
US0458-RPPKGHRA, US0458PL-RPPKGHA
US0458-RPPKGHRB, US0458PL-RPPKGHB
US0458-XFIPKGFRR, US0458PL-XFIPKGFRR
US0458-XFIPKGHRA, US0458PL-XFIPKGHA
US0458-XFIPKGHRB, US0458PL-XFIPKGHB

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.dmeppac.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.

Should you have questions, regarding this decision, you may contact the PDAC Contact Center at the address listed above or by telephone at (877) 735-1326.

Sincerely,

Christi Brown, RN, BSN
PDAC Coding Analyst