



## MEDICARE

Part A Intermediary  
Part B Carrier  
DME Regional Carrier

February 24, 2004

Beth K. Guevara  
Manager, Reimbursement Planning  
Respironics, Homecare Division  
5250 Logan Ferry Road  
Murrysville, Pennsylvania 15668-9727

Re: REMstar Pro with C Flex CPAP System (submission number 03.89)

Dear Ms. Guevara:

In response to your request for verification of the appropriate Healthcare Common Procedure Coding System (HCPCS) code to use for your product when billing Medicare, we provide the following Coding Verification information. You have submitted a copy of the confirmation letter you received from the National Panel verifying that your product was considered and assigned a code during the annual HCPCS Modification Process. The SADMERC recognizes and acknowledges the National Panel decisions.

In order to ensure appropriate billing to Medicare, these HCPCS coding decisions for your product(s) were reviewed by the SADMERC for correct coding category placement. It is our determination that the above listed product(s) meet(s) the description and characteristics of the HCPCS code for a continuous positive airway pressure device. Therefore, the correct Medicare billing code for the product(s) is/are

***E0601 Continuous airway pressure (CPAP) device.***

The above listed product(s) and HCPCS code(s) will be effective January 1, 2004. The product(s) will be added to the Product Classification List. Classification lists are located on our website at [www.palmettogba.com](http://www.palmettogba.com). Our HCPCS Coding Helpline is available toll free at 1-877-735-1326.

This HCPCS coding decision applies to your product(s) as reviewed by the SADMERC in response to the HCPCS National Panel decision(s). Any modification to the product(s) could change the HCPCS code and would need to be reviewed for coding verification. 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 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.

### **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) 763-8111.

Sincerely,



Bonnie Brooks

Bonnie Brooks, RN  
Manager, SADMERC HCPCS Review

cc: DMERCs