

General Guidelines for the Letter of Medical Necessity (LMN)

1. The LMN needs to offer the consumer's diagnosis (and diagnosis code) and how it relates to the consumer's seating needs. This could be illustrated by the static versus progressive nature of the diagnosis (Cerebral Palsy versus Muscular Dystrophy) as well as the intra-day characteristics (Multiple Sclerosis). Also, a clinical history that will support the request for the equipment should be included.
2. The LMN needs to explain how the equipment being requested for will interface with the consumer's environment which includes the home, the school, transportation, the work place, etc. This section should demonstrate how the consumer functions better in his/her overall environment with regards to learning, visual field, A.D.L.'s, toileting, etc., by the use of the requested equipment.
3. The LMN needs to demonstrate the functional assessment of the equipment being prescribed through clinical trial.
4. The LMN needs to illustrate the interface between the mat evaluation and the equipment being prescribed with regards to range of motion, anatomical angles needed, dimensions, etc.
5. Supporting materials to substantiate the need for the equipment (ie.- Photographs, videos, drawings, custom order form, etc.) are encouraged by you and your staff and will no longer be scanned by CSC into the patient's file but will be noted in the file as an attachment and will be forwarded (hard copy) to the reviewers.
6. The LMN should not explain what lateral supports, hip supports, positioning belts, pommels, etc. are, as these items are known to the reviewers. LMN must explain how the lateral supports and/or hip supports are used to accommodate for a fixed deformity (to prevent further deterioration of the deformity) or to correct for a flexible deformity (to move a consumer back to midline). It should also describe how these positioning accessories may aid in improved respiratory function, improved gastrointestinal functions etc.. This type of verbiage will also be necessary to help justify the need for other positioning accessories, such as: anterior chest support, positioning belt, lateral knee support, medial knee support, headrest, subbasis bar, etc. If available, precise measurements documenting deformity(ies) changes should be offered(ie.- degrees, inches, etc.).
7. The LMN should document the necessity of custom contouring of seats and backs, ie. Anti-thrust seat, femoral trough, lateral contour back, scapular cut-out, Ischial relief, etc.
8. In the event a consumer needs: swing away hardware for lateral trunk support, flip down hardware for a medial knee support, removable hardware for a headrest, etc., the justification for such accessory(ies) must include, but not be limited to, the inability to transfer without such hardware.
9. Certain DVS component (ie: medial knee support, lateral trunk support, lateral hip support, headrest, ankle/toe straps, etc.), that is not commercially available, due to its characteristics (i.e.- size, method of attachment, abnormally heavy duty construction, shape etc.) can be submitted as a custom item utilizing a miscellaneous code.

Code	Code Description	Special Characteristics BioDynamics Product	LMN Needs to Explain
			<i>BACKS</i>
E2617 Caid Care S61 to S64	Custom fabricated wheelchair back cushion, any size, including any type mounting hardware	<p><u>Custom Dynamic Contoured Seating (CDCS)TM</u></p> <p>Non standard shape of back, most of the time asymmetrical, not commercially available, special foam placement (ie.: skeletal deformity, etc.), multiple types of foams within a layer, possible 1 piece seat and back system, seats and backs that incorporate alternate mediums (ie: ROHO cell, Stimulite material, Floam cells, Jayflo packs, etc.), reinforced substructure or exoskeleton structure for extra heavy duty use (ie: use of alternative materials such as steel, aluminum, birch wood, plywood, double hardware mechanism, etc.). Back mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: lateral supports (E0956 for each) and/or hip guides (EO956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports that can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip supports can also be requested via a P.A. (E1028) - Height and depth adjustable lumbar support (Misc. Code). 	<ul style="list-style-type: none"> • Detail need for dynamic component of the CDCSTM contouring versus the static contouring offered by molding (i.e.: OBSS, Contour-U, etc.) • Detail asymmetrical deformities (fixed or flexible) using degrees and inches via a sketch and/or photos (ie: kyphosis, scoliosis, lordosis, rib-hump, etc.). • Reason for special foam placement (Pressure relief, recess/build-up for skeletal deformity, accommodation for a spinal orthotic, etc.) • Explain other backs tried and/or considered and why it failed or will fail. • Detailed explanation of the need for 'extra heavy duty' back system (ie: history of breakage of previous backs, significant tone patterns, seizure disorders, etc.) • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.) • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.)
E2616 Caid S21	Positioning wheelchair back cushion, posterior-lateral, width 22 inches or greater, any height, including any type mounting hardware	<p><u>Large Planar Curved Back.</u></p> <p>Large standard size (22" wide or greater), multi-foams (up to 1.5" of Sunmate or Confor), planar back with symmetrical contours that can exist at the Thorax area or the Pelvic region (Posterior and lateral support). Back mounting hardware is included.</p>	<ul style="list-style-type: none"> • Must explain the need for a back over 22" (this is obvious) • Must include how the lateral contour of the back (at hip level and /or thoracic level) will aid in the positioning of the client. This verbiage needs to speak to a possible pressure issue solved by greater contact area via the contoured back, respiratory improvement by aiding the client to midline via the contoured back, improve gastrointestinal function, etc.

		<p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: lateral supports (E0956 for each) and/or hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<ul style="list-style-type: none"> • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.) • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
<p>E2615 Caid S22</p>	<p>Positioning wheelchair back cushion, posterior-lateral, any size, including any type mounting hardware</p>	<p><u>Standard Planar Curved Back</u></p> <p>Any standard size (Up to 22"wide), multi-foams (up to 1.5" of Sunmate or Confor), planar back with symmetrical contours that can exist at the Thorax area or the Pelvic region (Posterior and lateral support). Back mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: lateral supports (E0956 for each) and/or hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<ul style="list-style-type: none"> • Must include how the lateral contour of the back (at hip level and /or thoracic level) will aid in the positioning of the client. This verbiage needs to speak to a possible pressure issue solved by greater contact area via the contoured back, respiratory improvement by aiding the client to midline via the contoured back, improve gastrointestinal function, etc. • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar

			<p>support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.)</p> <ul style="list-style-type: none"> The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2621 Caid S23	Positioning wheelchair back cushion, planar back with lateral supports, width 22 inches or greater, any height, including any type mounting hardware	<p><u>Large Planar Back with Std Laterals</u> Large standard size (22" wide or greater), multi-foams (up to 1.5" of Sunmate or Confor), non contoured back with standard 90 degrees, lateral trunk supports (pair). Back mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<ul style="list-style-type: none"> Must explain the need for a back over 22"(this is obvious) Must include how a planar back and lateral trunk supports will aid in the positioning of the client. This verbiage needs to speak to the benefits of the solid back and lateral trunk supports as it pertains to the prevention of future skeletal deformities and the possible correction of existing skeletal deformities. If straightening out a client's posture is possible, the benefits derived from the improved posture should also be detailed (ie: improved respiratory function, improved digestion, any neurological and/or circulatory improvement, etc.). Must detail the need for hip supports by defining its role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the hip support. The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.) The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2620 Caid S24	Positioning wheelchair back cushion, planar back with lateral supports, width less than 22 inches, any height, including any type mounting hardware	<p><u>Std Planar Back with Std Laterals</u> Standard size (up to 22" wide), multi-foams (up to 1.5" of Sunmate or Confor), non contoured back with standard 90 degrees, lateral trunk supports (pair). Back mounting hardware is included.</p>	<ul style="list-style-type: none"> Must include how a planar back and lateral trunk supports will aid in the positioning of the client. This verbiage needs to speak to the benefits of the solid back and lateral trunk supports as it pertains to the prevention of future skeletal deformities and the possible correction of existing skeletal deformities. If straightening out a client's posture is possible, the benefits derived from the improved posture should also be detailed (ie: improved

		<p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<p>respiratory function, improved digestion, any neurological and/or circulatory improvement, etc.).</p> <ul style="list-style-type: none"> • Must detail the need for hip supports by defining its role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.) • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2614 Caid S25	Positioning wheelchair back cushion, posterior, width 22 inches or greater, any height, including any type mounting hardware	<p style="text-align: center;"><u>Large Planar Back</u></p> <p>Large standard size (22" wide or greater), multi-foams (up to 1.5" of Sunmate or Confor), non contoured back (Posterior support only). Back mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: lateral supports (E0956 for each) and/or hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). 	<ul style="list-style-type: none"> • Must explain the need for a back over 22"(this is obvious) • Must include how a planar/linear back will aid in the positioning of the client. This verbiage needs to speak to the benefits of the solid back as it pertains to the prevention of future skeletal deformities and the possible correction of existing skeletal deformities. If straightening out a client's posture is possible, the benefits derived from the improved posture should also be detailed (ie: improved respiratory function, improved digestion, any neurological and/or circulatory improvement, etc.). • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and

		- Upgrade to quick release removable hardware for back.	<p>imperative to affect an independent/dependent lateral transfer.</p> <ul style="list-style-type: none"> • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.) • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2613 Caid S26	Positioning wheelchair back cushion, posterior, width less than 22 inches, any height, including any type mounting hardware	<p>Standard Planar Back</p> <p>Standard size (Up to 22"wide), multi-foams (up to 1.5" of Sunmate or Confor), non contoured back (Posterior support only). Back mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: lateral supports (E0956 for each) and/or hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<ul style="list-style-type: none"> • Must include how a planar/linear back will aid in the positioning of the client. This verbiage needs to speak to the benefits of the solid back as it pertains to the prevention of future skeletal deformities and the possible correction of existing skeletal deformities. If straightening out a client's posture is possible, the benefits derived from the improved posture should also be detailed (ie: improved respiratory function, improved digestion, any neurological and/or circulatory improvement, etc.). • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.) • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)

<p>E2612 Caid S27</p>	<p>General use wheelchair back cushion, width 22 inches or greater, any height, including any type mounting hardware</p>	<p style="text-align: center;"><u>Large Back</u></p> <p>Large standard size (22" wide or greater), single foam (up to 1.5" of Sunmate or Confor). Back mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: lateral supports (E0956 for each) and/or hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<ul style="list-style-type: none"> • Must explain the need for a back over 22"(this is obvious) • Must justify the need for a solid back versus a sling back as this code will offer a general use back cushion. • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.) • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
<p>E2611 Caid S28</p>	<p>General use wheelchair back cushion, width less than 22 inches, any height, including any type mounting hardware</p>	<p style="text-align: center;"><u>Standard Back</u></p> <p>Standard size (up to 22"), single foam (up to 1.5" of Sunmate or Confor). Back mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: lateral supports (E0956 for each) and/or hip guides (E0956 for each), etc.) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<ul style="list-style-type: none"> • Must justify the need for a solid back versus a sling back as this code will offer a general use back cushion. • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid

			<p>for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained.</p> <ul style="list-style-type: none"> The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.) The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
			SEATS
E2609 Caid Care S71 to S74	Custom fabricated wheelchair seat cushion, any size	<p><u>Custom Dynamic Contoured Seating (CDCS)TM</u></p> <p>Non standard size and/or shape seat, most of the time asymmetrical, not commercially available, special foam placement (i.e. pelvic obliquity, windswept deformity, scissoring, hyperextension of lower extremities, tight hamstrings, etc.), multiple types of foams within a layer, possible 1 piece seat and back system, seats and backs that incorporate alternate mediums (ie: ROHO cell, Stimulite material, Floam cells, Jayflo packs, etc.), reinforced substructure or exoskeleton structure for extra heavy duty use (ie: use of alternative materials such as steel, aluminum, Phenolic, birch wood, plywood, etc.).</p> <p>Must add seat mounting hardware (Misc. Code)</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh support (E0957), etc.) - Upgrade to removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior knee block, etc). (Misc. Code) - Upgrade to quick release removable hardware for seat. 	<ul style="list-style-type: none"> Detail need for dynamic component of the CDCSTM contouring versus the static seating offered by molding (ie: OBSS, Contour-U, etc.) Detail asymmetrical deformities (fixed or flexible) using degrees and inches via a sketch and/or photos (ie: pelvic obliquity, windswept deformity, excessive abduction, excessive adduction, hip rotation, etc.) Reason for special foam placement (Pressure relief, recess/build-up for pelvic deformity and/or obliquity, accommodation for a lower limb orthotic, etc.) Explain other seating tried and/or considered and why it failed or will fail. Detailed explanation of the need for 'extra heavy duty' seat system (ie: history of breakage of previous backs, significant tone patterns, seizure disorders, etc.) Must justify (detailed) for specialty hardware (extra heavy duty, custom hardware, etc.) Must detail the need for hip supports and/or lateral thigh supports, anterior knee blocks and medial thigh supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports). The use of quick release removable hardware will be considered when the removal of the seat is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)

<p>E2606 Caid</p>	<p>Positioning wheelchair seat cushion, width 22 inches or greater, any depth</p>	<p><u>Large Positioning/Contoured Seat.</u> Large standard size (22" wide or greater), multi-foams (up to 2" of Sunmate or Confor), ¼" HDPE internal base, medium-firm planar seat symmetrically contoured (medial and lateral support).</p> <p>May need to add Seat Pan with Height and Angle adjustable Hardware (E2618)</p> <p>May also include: (very detail justification needed) - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh support (E0957), etc.) - Upgrade to removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior knee block, etc). (Misc. Code) - Upgrade to quick release removable hardware for seat.</p>	<ul style="list-style-type: none"> • Must explain the need for a seat over 22" (this is obvious) • Must include how the contour of the seat (femoral troughs) will aid in the positioning of the client. This verbiage needs to speak to a possible pressure issue solved by greater contact area/femoral loading via the contoured seat, postural improvement by aiding the client to midline via the contoured seat, etc. • Must justify (detailed) for specialty hardware (extra heavy duty, custom hardware, etc.) • Must detail the need for hip supports and/or lateral thigh supports, anterior knee blocks and medial thigh supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports). • The use of quick release removable hardware will be considered when the removal of the seat is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
<p>E2605 Caid</p>	<p>Positioning wheelchair seat cushion, width less than 22 inches, any depth</p>	<p><u>Standard Positioning /Contoured Seat.</u> Any standard size (Up to 22" wide), multi-foams (up to 2" of Sunmate or Confor), ¼" HDPE internal base, medium-firm planar seat symmetrically contoured (medial and lateral support).</p> <p>May need to add Seat Pan with Height and Angle adjustable Hardware (E2618)</p> <p>May also include: (very detail justification needed) - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh support (E0957), etc.) - Upgrade to removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior</p>	<ul style="list-style-type: none"> • Must include how the contour of the seat (femoral troughs) will aid in the positioning of the client. This verbiage needs to speak to a possible pressure issue solved by greater contact area/femoral loading via the contoured seat, postural improvement by aiding the client to midline via the contoured seat, etc. • Must justify (detailed) for specialty hardware (extra heavy duty, custom hardware, etc.) • Must detail the need for hip supports and/or lateral thigh supports, anterior knee blocks and medial thigh supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip

		<p>knee block, etc). (Misc. Code) - Upgrade to quick release removable hardware for seat.</p>	<p>supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports).</p> <ul style="list-style-type: none"> The use of quick release removable hardware will be considered when the removal of the seat is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2608 Caid	<p>Skin protection and positioning wheelchair seat cushion, width 22 inches or greater, any depth</p>	<p><u>Large Skin Protection/Contoured Seat.</u> Large standard size (22" wide or greater), multi-foams (up to 2" of Sunmate or Confor), ¼" HDPE internal base, soft linear seat symmetrically contoured (medial and lateral support).</p> <p>May need to add Seat Pan with Height and Angle adjustable Hardware (E2618)</p> <p>May also include: (very detail justification needed) - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh support (E0957), etc.) - Upgrade to removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior knee block, etc). (Misc. Code) - Upgrade to quick release removable hardware for seat.</p>	<ul style="list-style-type: none"> Must explain the need for a seat over 22" (this is obvious) Must include how the contour of the seat (femoral troughs) will aid in the positioning of the client. This verbiage needs to speak to a postural improvement by aiding the client to midline via the contoured seat, etc. Must speak of pressure issue to be solved by dispersing the client's weight into a greater contact area using multilayer of soft/memory foam. Client posture will also improve by aiding the client's balance. Must justify (detailed) for specialty hardware (extra heavy duty, custom hardware, etc.) Must detail the need for hip supports and/or lateral thigh supports, anterior knee blocks and medial thigh supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports). The use of quick release removable hardware will be considered when the removal of the seat is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2607 Caid	<p>Skin protection and positioning wheelchair seat cushion, width less than 22 inches, any depth</p>	<p><u>Standard Skin Protection /Contoured Seat.</u> Any standard size (Up to 22" wide), multi-foams (up to 2" of Sunmate or Confor), ¼" HDPE internal base, soft linear seat symmetrically contoured (medial and lateral support).</p> <p>May need to add Seat Pan with Height and Angle adjustable Hardware (E2618)</p>	<ul style="list-style-type: none"> Must include how the contour of the seat (femoral troughs) will aid in the positioning of the client. This verbiage needs to speak to a postural improvement by aiding the client to midline via the contoured seat, etc. Must speak of pressure issue to be solved by dispersing the client's weight into a greater contact area using multilayer of soft/memory foam. Client posture will also improve by aiding the client's balance. Must justify (detailed) for specialty hardware (extra heavy duty, custom hardware, etc.) Must detail the need for hip supports and/or lateral thigh

		<p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh support (E0957), etc.) - Upgrade to removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior knee block, etc). (Misc. Code) - Upgrade to quick release removable hardware for seat. 	<p>supports, anterior knee blocks and medial thigh supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support.</p> <ul style="list-style-type: none"> • The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports). • The use of quick release removable hardware will be considered when the removal of the seat is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2604	Skin protection wheelchair seat cushion, with 22 inches or greater, any depth	<p><u>Large Seat Cushion.</u></p> <p>Large standard size (22" wide or greater), single foam (up to 1.5" of Sunmate or Confor), skin protection cushion attached via velcro to the seat pan or to the sling seat.</p>	<ul style="list-style-type: none"> • Must explain the need for a seat over 22"(this is obvious) • Must justify the need for a skin protection cushion versus a sling seat as this code will offer a skin protection seat cushion.
E2603	Skin protection wheelchair seat cushion, with less than 22 inches, any depth	<p><u>Standard Seat Cushion.</u></p> <p>Standard size (up to 22" wide), single foam (up to 1.5" of Sunmate or Confor), skin protection cushion attached via velcro to the seat pan or to the sling seat.</p>	<ul style="list-style-type: none"> • Must justify the need for a skin protection cushion versus a sling seat as this code will offer a skin protection seat cushion.
<i>PEDIATRIC</i>			
E2293 Caid	Back, contoured, for pediatric size wheelchair including fixed attaching hardware	<p><u>Custom Dynamic Contoured Seating (CDCS)TM</u></p> <p>Non standard shape of pediatric back, most of the time asymmetrical, not commercially available, special foam placement (ie.: skeletal deformity, etc.), multiple types of foams within a layer, possible 1 piece seat and back system, seats and backs that incorporate alternate mediums(ie.: ROHO cell, Stimulite material, Floam cells, Jayflo packs, etc.), reinforced substructure or exoskeleton structure for extra heavy duty use (ie: use of alternative materials such as steel, aluminum, birch wood versus plywood, double hardware mechanism, etc.). Back fixed mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (i.e.- lateral supports (E1025 or E1026 for each) and/or hip guides (E0956 for each), etc.) 	<ul style="list-style-type: none"> • Detail need for dynamic component of the CDCSTM contouring versus the static contouring offered by molding (i.e.: OBSS, Contour-U, etc.) • Detail asymmetrical deformities (fixed or flexible) using degrees and inches via a sketch and/or photos (ie: kyphosis, scoliosis, lordosis, rib-hump, etc.). • Reason for special foam placement (Pressure relief, recess/build-up for skeletal deformity, accommodation for a spinal orthotic, etc.) • Explain other backs tried and/or considered and why it failed or will fail. • Detailed explanation of the need for 'extra heavy duty' back system (ie: history of breakage of previous backs, significant tone patterns, seizure disorders, etc.) • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize

		<ul style="list-style-type: none"> - Upgrade to swing away brackets for lateral trunk supports that can be requested via a P.A. request. (E1028) - Upgrade to removable brackets for hip supports can also be requested via a P.A. (E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<p>degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support.</p> <ul style="list-style-type: none"> • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.). Can also justify the need to restore/support the lumbar region that is not fully developed with a means of adding lumbar support during the client's growth. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2291 Caid	Back, planar, for pediatric size wheelchair including fixed attaching hardware	<p style="text-align: center;"><u>Standard Planar/Linear Back</u></p> <p>Standard pediatric size, multi-foams (up to 1.5" of Sunmate or Confor), non contoured back (Posterior support only). Back fixed mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (i.e.- lateral supports (E1025 or E1026 for each) and/or hip guides (E0956 for each), etc) - Upgrade to swing away brackets for lateral trunk supports can be requested via a P.A. request.(E1028) - Upgrade to removable brackets for hip guides can be requested via a P.A. request.(E1028) - Height and depth adjustable lumbar support (Misc. Code). - Upgrade to quick release removable hardware for back. 	<ul style="list-style-type: none"> • Must include how a planar/linear back will aid in the positioning of the client. This verbiage needs to speak to the benefits of the solid back as it pertains to the prevention of future skeletal deformities and the possible correction of existing skeletal deformities. If straightening out a client's posture is possible, the benefits derived from the improved posture should also be detailed (ie: improved respiratory function, improved digestion, any neurological and/or circulatory improvement, etc.). • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect a transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of the height and depth adjustable lumbar support must be justified by the correction and/or accommodation of an anterior/posterior skeletal deformity (ie: lordosis, kyphosis, etc.). Can also justify the need to restore/support the lumbar region that is not fully developed with a means of adding lumbar support during the client's growth. • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system

			as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2294 Caid	Seat, contoured, for pediatric size wheelchair including fixed attaching hardware	<p><u>Custom Dynamic Contoured Seating (CDCS)TM</u></p> <p>Non standard shape of pediatric seat, most of the time asymmetrical, not commercially available, special foam placement (i.e. pelvic obliquity, windswept deformity, scissoring, hyperextension of lower extremities, tight hamstrings, etc.), multiple types of foams within a layer, possible 1 piece seat and back system, seats and backs that incorporate alternate mediums (ie: ROHO cell, Stimulite material, Floam cells, Jayflo packs, etc.), reinforced substructure or exoskeleton structure for extra heavy duty use (ie: use of alternative materials such as steel, aluminum, birch wood versus plywood, double hardware mechanism, etc.) Seat fixed mounting hardware is included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh support (E0957), etc.). - Upgrade to removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior knee block, etc). (Misc. Code) - Upgrade to quick release removable hardware for seat. 	<ul style="list-style-type: none"> • Detail need for dynamic component of the CDCSTM contouring versus the static seating offered by molding (ie: OBSS, Contour-U, etc.) • Detail asymmetrical deformities (fixed or flexible) using degrees and inches via a sketch and/or photos (ie: pelvic obliquity, windswept deformity, excessive abduction, excessive adduction, hip rotation, etc.) • Reason for special foam placement (Pressure relief, recess/build-up for pelvic deformity and/or obliquity, accommodation for a lower limb orthotic, etc.) • Explain other seating tried and/or considered and why it failed or will fail. • Detailed explanation of the need for ‘extra heavy duty’ seat system (ie: history of breakage of previous backs, significant tone patterns, seizure disorders, etc.) • Must detail the need for hip supports and/or lateral knees supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports). • The use of quick release removable hardware will be considered when the removal of the seat is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
E2292 Caid	Seat, planar, for pediatric size wheelchair including fixed attaching hardware	<p><u>Standard Planar Seat</u></p> <p>Any standard pediatric size, multi-foams (up to 1.5” of Sunmate or Confor), 1/2” HDPE internal base with T-nuts for attaching hardware. Fixed attaching hardware included.</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh 	<ul style="list-style-type: none"> • Must speak of pressure issue to be solved by dispersing the client’s weight into a greater contact area using multilayer of memory foam. Client posture will also improve by aiding the client’s balance. • Must justify (detailed) for specialty hardware (extra heavy duty, custom hardware, etc.) • Must detail the need for hip supports and/or lateral thigh supports, anterior knee blocks and medial thigh supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further

		<p>support (E0957), etc.)</p> <ul style="list-style-type: none"> - Upgrade to removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior knee block, etc). (Misc. Code) - Upgrade to quick release removable hardware for seat. 	<p>deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support.</p> <ul style="list-style-type: none"> • The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports). • The use of quick release removable hardware will be considered when the removal of the seat is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
			MISCELLANEOUS
<p>MISC. CODE</p> <p>Caid</p>	<p>HDPE back pan with depth and angle adjustable hardware.</p>	<p><u>Back Pan with Heavy Duty, Multi-Adjustable Hardware</u> (Misc. Code)</p> <p>(Should be justified as a component of the back)</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (i.e.- lateral supports (E1025 or E1026 for each) and/or hip guides (E0956 for each), etc) - Swing away brackets for lateral trunk supports can be requested via a P.A. request.(E1028) - Removable brackets for hip guides can be requested via a P.A. request.(E1028) - Quick release removable hardware for back. 	<ul style="list-style-type: none"> • Must justify the need for the custom mounting of a vendor provided back cushion (ie: O.B.S.S., Contour-U, Silhouette, etc). This could include but is not limited to precise angles required to assist in the client's positioning for better functioning, the lack of durability of the cushion's original hardware (non heavy duty), incompatibility between the hardware and the mobility equipment (chair), etc. • Must detail the need for hip supports and/or Lateral supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of swing away brackets for lateral supports will be considered when the contour of a lateral support wraps towards the anterior side of a client's torso (for a proper posture). The contouring of the lateral support also needs to be justified. • The use of removable brackets for the hip supports will be considered when their removal is necessary and imperative to affect an independent/dependent lateral transfer. • In extreme situations, a swing away bracket will be paid for with the use of planar laterals when transfer is all but impossible without. Must be clearly explained. • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)

BioDynamics Ltd.

<p>MISC. CODE Caid</p>	<p>HDPE seat pan with depth and angle adjustable hardware</p>	<p><u>Seat Pan with Heavy Duty, Multi-Adjustable Hardware</u> (MISC. CODE) (Should be justified as a component of the seat)</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Non-integral positioning accessories that can be billed utilizing D.V.S. codes (ie: hip guides (E0956 for each), medial thigh support (E0957), etc.). - Removable brackets for hip supports, lateral thigh supports, medial thigh support, etc., can also be requested via a P.A. (E1028) - Non-integral positioning accessories that can be billed utilizing a miscellaneous code (ie: lateral thigh supports, anterior knee block, etc). (Misc. Code) - Quick release removable hardware for seat. 	<ul style="list-style-type: none"> • Must justify the need for the custom mounting of a vendor provided seat cushion (ie: O.B.S.S., Contour-U, Silhouette, etc). This could include but is not limited to precise angles required to assist in the client's positioning for better functioning, the lack of durability of the cushion's original hardware (non heavy duty), incompatibility between the hardware and the mobility equipment (chair), etc. • Must detail the need for hip supports and/or lateral thigh supports, anterior knee blocks and medial thigh supports by defining their role in the correction of skeletal deformities (flexible) and/or the prevention of further deterioration or the accommodation of a deformity (fixed). Documentation needs to utilize degrees and inches referring to the deformity and describing the intervention of the lateral and/or hip support. • The use of removable brackets for lateral thigh supports, lateral hip supports and medial thigh supports will be considered when their removal is necessary and imperative to affect a transfer (i.e.: independent/dependent lateral transfers would require the removal of the lateral thigh and/or lateral hip supports and/or medial thigh supports, independent/dependent standing pivot transfers would require the removal of the medial thigh supports). • The use of quick release removable hardware will be considered when the removal of the back is needed for portability of the wheelchair and/or the seating system as well as the need to switch the seating system between chairs (ie: power chair to manual chair, primary chair to back up chair, etc.)
<p>MISC. CODE Caid</p>	<p>Custom Upper Extremity Support, Clear Lexan or opaque Phenolic material. HDPE slides, belt with fastex closure, stops on slides to support surface into correct position.</p>	<p><u>Custom Upper Extremity Support</u> Clear Lexan or opaque Phenolic material. HDPE slides, belt with fastex closure, stops on slides to support surface into correct position</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Padded inner-rim, elbow areas, top of surface, underside of surface, etc. - Protraction blocks. - Surface may be angle adjustable (Misc. Code) - Integrated arm troughs (K0106) 	<ul style="list-style-type: none"> • Must justify that it is used as a genuine upper extremity support. This could include, but is not limited to; padded surfaces to protect the safety of the client during uncontrolled movements (ATNR, STNR, etc.), protraction blocks to ensure upper extremities stay in front of chair during uncontrolled movements (not in wheels or behind chair where there could be physical harms), arm troughs used to aid in stabilizing the clients posture, etc.
<p>MISC. CODE Caid</p>	<p>Custom Lower Extremity Support, Single or double foot support, HDPE structure attached to legrest and/or seat.</p>	<p><u>Custom Lower Extremity Support</u> <u>(Footbox)</u></p> <p>Single or double foot support, custom made to client's specifications secured by selected hardware</p> <p>May also include: (very detail justification needed)</p> <ul style="list-style-type: none"> - Padding - Leg drop discrepancy ankle or knee 	<ul style="list-style-type: none"> • Must justify that footbox is needed to protect the client legs due to poor blood circulation, to achieve a proper body (hip) positioning, to protect the safety of the client during uncontrolled movements. • Must properly justify each extra customization

BioDynamics Ltd.

		(contracted, extended, adducted, abducted, etc.), length, etc. - Feet with different resting angles (inversion, eversion, plantar flexion, dorsi flexion).	
MISC. CODE Caid	Custom Anterior Chest Support, fabricated with elastic, non elastic or a combination of both materials	<p><u>Custom Anterior Chest Support</u> Anterior chest support custom fabricated, with at least 3 securing points, from an sketch and/or a template with either elastic, non elastic or a combination of both materials</p> <p>May also include: (very detail justification needed) - G-Tube cut out. - Anatomical deformities cut out. - Extra straps for anterior/lateral thoracic support</p>	<ul style="list-style-type: none"> • Must justify that a standard anterior chest support would not suffice due to client's medical needs (ie: G-tube, anatomical deformity, need heavy duty support necessitating the need for the use of different material, etc.) • Must properly justify each extra customization
MISC. CODE Caid	Custom Head Support	<p><u>Custom Head Support</u> Head support that is its size is not available in a standard size and/or shape.</p> <p>May also include: (very detail justification needed) - Special type of foams - Special shape - Special hardware may include removable, flip down, extra heavy duty, etc.</p>	<ul style="list-style-type: none"> • Need to justify the use of other than the standard head rest due to medical condition (ie: hydrocephalic head, micro cephalic head, malformation due to bran surgery, pressure issues involving the head, shunts, etc.) • Need to justify the use of the removable/flip down hardware for the head support (ie: inability to transfer client with fixed head rest hardware, needs to be reinforced due to significant tone, etc.)

© BioDynamics Ltd. 2005