Ride Designs®
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Corbac™, (Regular/Tall), U.S. Funding

Medicare Code: E2611

General Use Wheelchair Back Cushion, width less than 22 inches, any height, including any type mounting hardware

Medicare Coverage Criteria:

Per the Medicare LCD, a general use wheelchair back cushion (E2611–E2612) is covered for a beneficiary who has a manual wheelchair or a power wheelchair with a sling/solid seat/back, which meet Medicare coverage criteria. If the beneficiary does not have a covered wheelchair, then the cushion will be denied as not reasonable and necessary. If the beneficiary has a POV or a power wheelchair with a captain's chair seat, the cushion will be denied as not reasonable and necessary.

For beneficiaries who meet coverage criteria for a power wheelchair and who do not have special skin protection or positioning needs, a power wheelchair with Captain's Chair provides appropriate support. Therefore, if a general use cushion is provided with a power wheelchair with a sling/solid seat/back instead of Captain's Chair, the wheelchair and the cushion(s) will be covered if either criterion 1 or criterion 2 is met:

1. The cushion is provided with a covered power wheelchair base that is not available in a Captain's Chair model – i.e. codes K0839, K0840, K0843, K0860-K0864, K0870, K0871, K0879, K0880, K0886, K0890, K0891; OR
2. A skin protection and/or positioning seat or back cushion that meets coverage criteria is provided.

If one of these criteria is not met, both the power wheelchair with a sling/solid seat and the general use cushion will be denied as not reasonable and necessary.

The only products, which may be billed using code E2611, are those products for which the Pricing, Data Analysis, and Coding (PDAC) contractor has made a written coding verification. A Product Classification List with products which have received a coding verification can be found on the PDAC website (www.dmepdac.com).

Appropriate User:

Examples of an appropriate user of the Corbac:

- requires mild guidance into a neutral trunk posture, or
- has flexible postural issues, such as a kyphosis that is easily corrected and supported

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Helpful Tips:

- There are no qualifying ICD-10 codes for this back, however be sure to have supporting documentation for the basic medical need.
- Do not forget that even a general use back requires PDAC code verification.

2017 Medicare Fee Schedule*

***Non-Rural*:**

Varies by state, please see attached spreadsheet

***Rural*:**

E2611 / NU: $163.63
E2611 / NU KU: unpublished
E2611 / RR: $16.36
E2611 / RR KU: unpublished

*KU modifier is to be applied when the cushion is used as part of a Group 3 power wheelchair system.

Note: If the code is subject to competitive bidding and billed for use on any wheelchair system (with the exception of Group 3 power wheelchairs, the allowable will be based on the single payment amount for the specific area.

These allowables were effective January 1st, 2017

Pricing Category: Inexpensive & Routinely Purchased