



MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

January 4, 2007

Norman H. Tiffin
Vice President of Marketing
PARI Respiratory Equipment, Inc.
2943 Oak Lake Boulevard
Midlothian, VA 23112

Re: PARI SinuStar Aerosol Delivery System (Model 85F77-LCS)

Dear Mr. Tiffin:

The SADMERC and the three Program Safeguard Contractors (PSCs) have completed the HCPCS Coding Verification Review on January 4, 2007 for the above listed product(s) manufactured and/or distributed 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 a nebulizer as defined in the PSC Medical Policy for Nebulizers. Therefore, the correct Medicare billing code(s) for the product(s) is/are:

E0570 Nebulizer, with compressor.

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the SADMERC and three PSCs. 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

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Should you have any questions regarding this coding decision, please contact me below or by telephone at (803) 763-1639.

Sincerely,

A handwritten signature in black ink that reads "Jana Brown, RN". The signature is written in a cursive style with a large initial 'J'.

Jana Brown, RN
HCPCS Medical Analyst
SADMERC