



August 5, 2021

KELLY GRAHOVAC
 ORTHO SYSTEMS (DBA OVATION MEDICAL)
 101 MARIETTA STREET NW SUITE 2460
 ATLANTA, GA 30303

Document Control Number (DCN): 21159C24100041

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45023	L1812
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45023	L1810

Dear KELLY GRAHOVAC,

The Pricing, Data Analysis, and Coding (PDAC) Contractor has reviewed the product(s) listed above and has approved the listed Healthcare Common Procedure Coding System (HCPCS) code(s) for billing the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs).

The PDAC Contractor provides coding assistance to manufacturers to ensure proper coding of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). The PDAC publishes coding decisions based on the coding guidelines established by the Local Coverage Determinations (LCDs) and associated Policy Articles and any related Advisory Articles established by the DME MACs. All products submitted to the PDAC for a coding verification review are examined by coders and professionals following a formal, standardized process.

Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

L1812 KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED, OFF-THE-SHELF

L1810 KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE

If you disagree with this decision, you may request a reconsideration within 45 days of the letter's date and provide evidence to substantiate a reconsideration of PDAC's original coding determination. To request a reconsideration, complete the Reconsideration Request form located on the PDAC website at www.dmepdac.com. If your request for a reconsideration is made after the 45-day time frame, it will require a new application and documentation to support the request.

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If you have questions, please contact the PDAC HCPCS Helpline at (877) 735-1326 during the hours of 9:30 a.m. to 5:00 p.m. ET, Monday through Friday. You may also visit our [website](#) to chat with one of our representatives or select the Contact Us button at the top of the page for email, FAX or postal mail information.

Sincerely,

Pricing, Data Analysis, and Coding (PDAC)
Palmetto GBA, LLC
www.dmepdac.com



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 ATLANTA, GA 30303

Document Control Number (DCN): 21159C24100046

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45025	L1812
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45025	L1810

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 ATLANTA, GA 30303

Document Control Number (DCN): 21159C24100042

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45027	L1812
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45027	L1810

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 ATLANTA, GA 30303

Document Control Number (DCN): 21159C24100040

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45028	L1812
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45028	L1810

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 ATLANTA, GA 30303

Document Control Number (DCN): 21159C24100045

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45029	L1812
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45029	L1810

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 ATLANTA, GA 30303

Document Control Number (DCN): 21159C24100044

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45030	L1812
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45030	L1810

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 ATLANTA, GA 30303

Document Control Number (DCN): 21159C24100043

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45031	L1812
ORTHO SYSTEMS (DBA OVATION MEDICAL)	NEOPRENE HINGED KNEE SUPPORT ANTERIOR CLOSURE	45031	L1810

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