



900 42nd Street South  
Fargo, ND 58103

October 02, 2018

IDEAL SHOES & MEDICAL SUPPLIES INC  
10111 BROADWAY ST  
SAN ANTONIO TX 78217  
UNITED STATES

**Re: Assigned HCPCS Codes for DME Billing**

**Xref Number: 83383755**

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Codes
IDEAL SHOES & MEDICAL SUPPLIES INC	IDEAL	357C	A5500
IDEAL SHOES & MEDICAL SUPPLIES INC	IDEAL	357	A5500
IDEAL SHOES & MEDICAL SUPPLIES INC			
IDEAL SHOES & MEDICAL SUPPLIES INC			
IDEAL SHOES & MEDICAL SUPPLIES INC			

Dear Fernando Herrera:

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.



The PDAC has reviewed the above listed product(s). Based on this review and application of DME MAC policy, the HCPCS code(s) listed below should be used when billing the DME MACs:

**A5500 - FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF OFF-THE-SHELF DEPTH-INLAY SHOE MANUFACTURED TO ACCOMMODATE MULTI-DENSITY INSERT(S), PER SHOE**

**A9270 - NON-COVERED ITEM OR SERVICE**

The "Local Coverage Article: Therapeutic Shoes for Persons with Diabetes - Policy Article (A52501)" states:

A depth shoe (A5500) is one that:

1. Has a full length, heel-to-toe filler that when removed provides a minimum of 3/16" of additional depth used to accommodate custom-molded or customized inserts; and
2. Is made from leather or other suitable material of equal quality; and
3. Has some form of shoe closure; and
4. Is available in full and half sizes with a minimum of three widths so that the sole is graded to the size and width of the upper portions of the shoe according to the American standard last sizing schedule or its equivalent. (The American last sizing schedule is the numerical shoe sizing system used for shoes in the United States.)

The products, Rose 633, Maricela 210 and 210C, submitted for review do not meet the heel-to-toe filler requirement of 3/16" additional depth for code A5500; the filler tapers to 1/16" at the metatarsals and along the edges. Therefore, code A9270 is assigned.

This decision applies to the application we received on 8/8/2018. If information submitted in that application has changed or were to change, it could impact our decision. Therefore, a new application would need to be submitted for HCPCS coding verification review. The coding assigned in this decision letter will be available on the Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS) within ten (10) working days from the letter's date. The DMECS can be accessed on the PDAC website, [www.dmeprdac.com](http://www.dmeprdac.com). Please take the time to verify that this coding decision is correctly reflected in DMECS.

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 <https://www.dmepdac.com/review/requesting.html>. 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.

It is the responsibility of manufacturers and distributors to notify the PDAC immediately of any changes involving their products, as listed on the PCL on DMECS. Further information for requesting updates to the PCL can be found on the PDAC website at <https://www.dmepdac.com/dmecs/notifying.html>. It is also the responsibility of manufacturers and distributors to assure their websites and product marketing materials accurately reflect the product reviewed by the PDAC and the coding decision assigned.

An assignment of the HCPCS code(s) to product(s) is not an approval or endorsement of the product(s) by Medicare or Noridian Healthcare Solutions; nor does it imply or guarantee claim reimbursement or coverage.

If you have questions about policy, claim coverage or reimbursement, please contact the DME MAC for your jurisdiction. For other questions, contact the PDAC Contact Center at the address listed above or by telephone at (877) 735-1326. The Contact Center is open Monday through Friday from 8:30 a.m. to 4 p.m. CT.

**Reminder:** There are new versions of the Code Verification Review applications available on the PDAC website at [https://www.dmepdac.com/review/applications\\_forms.html](https://www.dmepdac.com/review/applications_forms.html). The old versions of the applications are no longer accepted as of 9/1/2018.

Sincerely,

PDAC  
Noridian Healthcare Solutions, LLC  
[www.dmepdac.com](http://www.dmepdac.com)