



## QUANTUM® AND STEALTH PRODUCTS® SEAT AND BACK CUSHIONS

Medicare Product Planning Guide - 2018

SEAT CUSHIONS	HCPCS	DESCRIPTION
Stealth Products® Simplicity G Wheelchair Seat Cushion	E2601	General use, width less than 22 inches, any depth
	E2602	General use, width 22 inches or greater, any depth
Quantum® Solution® 1 Wheelchair Seat Cushion	E2603	Skin protection, width less than 22 inches, any depth
	E2604	Skin protection, width 22 inches or greater, any depth
Stealth Products® Solution SPP Wheelchair Seat Cushion	E2607	Skin protection and positioning, width less than 22 inches, any depth
	E2608	Skin protection and positioning, width 22 inches or greater, any depth
Stealth Products® TRU-Comfort 2 SPP Wheelchair Seat Cushion	E2607	Skin protection and positioning, width less than 22 inches, any depth
	E2608	Skin protection and positioning, width 22 inches or greater, any depth
Stealth Products® Spectrum Foam SPP Wheelchair Seat Cushion	E2607	Skin protection and positioning, width less than 22 inches, any depth
	E2608	Skin protection and positioning, width 22 inches or greater, any depth
Stealth Products® Spectrum Gel SPP Wheelchair Seat Cushion	E2607	Skin protection and positioning, width less than 22 inches, any depth
	E2608	Skin protection and positioning, width 22 inches or greater, any depth
BACK CUSHIONS	HCPCS	DESCRIPTION
Stealth Products® Active Contour ADI Q-Back	E2613	Positioning wheelchair back cushion, posterior, width less than 22 inches, any height, including any type mounting hardware
Stealth Products® Deep Contour ADI Q-Back	E2615	Positioning wheelchair back cushion, posterior-lateral, width less than 22 inches, any height, including any type mounting hardware
Stealth Products® Extra Deep Contour ADI Q-Back	E2620	Positioning wheelchair back cushion, planar back with lateral supports, width less than 22 inches, any height, including any type mounting hardware
Quantum® TRU-Comfort 2	E2620	Positioning wheelchair back cushion, planar back with lateral supports, width less than 22 inches, any height, including any type mounting hardware
	E2621	Positioning wheelchair back cushion planar back with lateral supports, width 22 inches or greater, any height, including any type mounting hardware

DME providers are responsible for determining appropriate billing codes when submitting for insurance reimbursement. HCPCS should not be considered as legal advice and do not guarantee reimbursement. Payer coding, coverage, and bundling guidelines may apply.

### **General Use Seat Cushion or Back - E2601, E2602, E2611, E2612**

General use seat or back cushions are covered by Medicare for a beneficiary who has a manual or power wheelchair with a sling/solid seat/back which meets 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 style seat, the cushion will be denied as not reasonable and necessary.

For beneficiaries 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 only 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 (codes K0839, K0840, K0843, K0860 – K0864); 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.

### **Skin Protection Cushion or Back - E2603, E2604, E2622, E2623**

A skin protection seat cushion is covered for a beneficiary who meets both of the following criteria:

1. The beneficiary has a manual wheelchair or a power wheelchair with a sling/solid seat/back and the patient meets Medicare coverage criteria for it; and
2. The beneficiary has either of the following:
  - a. Current pressure ulcer or past history of a pressure ulcer on the area of contact with the seating surface (see diagnosis codes that support medical necessity\*); or...
  - b. Absent or impaired sensation in the area of contact with the seating surface or inability to carry out a functional weight shift due to a covered ICD-10 code.\*

### **Positioning Seat Cushion or Back - E2605, E2606, E2613, E2614, E2615, E2616, E2620, E2621**

A positioning seat cushion, or a positioning back cushion are covered for a beneficiary who meets both of the following criteria:

1. The beneficiary has a manual wheelchair or a power wheelchair with a sling/solid seat/back and the beneficiary meets Medicare coverage criteria for it; and...
2. The beneficiary has any significant postural asymmetries that are due to a covered ICD-10 code.\*

### **Combination Skin Protection and Positioning Cushion or Back – E2607, E2608, E2624, E2625**

A combination skin protection and positioning seat cushion is covered for a beneficiary who meets the criteria for both a skin protection seat cushion and a positioning seat cushion.\*

1. The beneficiary has a manual wheelchair or a power wheelchair with a sling/solid seat/back and the beneficiary meets Medicare coverage criteria for it; and
2. Current pressure ulcer or past history of a pressure ulcer on the area of contact with the seating surface (see diagnosis codes that support medical necessity\*); or...
3. Absent or impaired sensation in the area of contact with the seating surface or inability to carry out a functional weight shift due to a covered ICD-10 code.\*; and...
4. The beneficiary has any significant postural asymmetries that are due to a covered ICD-10 code.\*

\* Refer to Medicare's LCD and Policy Article for Wheelchair Seating for additional information and specific ICD-10 codes.