



Rifton Equipment
2032 Rte 213
Rifton, NY 12471

Dear Customer:

We appreciate your interest in asking us for assistance in identifying the appropriate HCPCS code to use in billing Medicare for Rifton Equipment's SoloLift. Although you should consult manuals and bulletins published by the individual Durable Medical Equipment Medicare Administrative Contractor (DMEMAC), we suggest using the following HCPCS codes for Medicare claims:

- For the SoloLift and SoloVest – E0635 – "Patient lift, electric, with seat or sling."
- For the replacement SoloVest for the SoloLift – E 1399 – "Durable medical equipment, Miscellaneous"

In your selection of HCPCS codes, please be aware of the following points:

- Our suggestions have not been verified with the Statistical Analysis DMERC (SADMERC).
- Under the current Medicare patient lift coverage policy, this code is not covered since Medicare views it as a convenience item and thus not primarily medical in nature. Therefore, when code E0635 is billed, if the coverage criteria for a patient lift are met, payment will be based on the least costly alternative, which would be E0630 [Patient lift, electric, hydraulic or mechanical, includes any seat, sling, strap(s) or pad(s)]
- The fee schedule for E0630 can be found for your state at the following CMS website: http://www.cms.hhs.gov/DMEPOSFeeSched/01_overview.asp or at the DME MAC website that has jurisdiction over your state.
- In billing E1399 for a replacement SoloVest for the SoloLift, the supplier must include the following information with the claim form:
 - Copy of manufacturer product information brochure
 - Manufacturer suggested retail price (MSRP) sheet
 - Physician order
 - Narrative description of the product. This should be attached to the HCFA 1500 on paper claims or for electronic E1399 claims, please insert this language into the HAO field of the electronic 1500 form.
- Since Rifton has not had the SoloLift and SoloVest code verified by the SADMERC, there is an option to use the miscellaneous DME code E1399 also to bill for the SoloLift. However, in doing so, the DME MAC contractors may still downcode the claim to E0635 and/or E0630 and pay at the least costly alternative rate, even with an explanation of medical necessity. This decision will depend on the contractor who is manually reviewing the claim.
- You should note that this information cannot guarantee coverage or reimbursement, and Rifton Equipment makes no other representations or guarantees as to selecting codes for procedures or compliance with any Medicare billing protocols or prerequisites. As with all claims, individual providers and suppliers are responsible for exercising their independent judgment in selecting the codes that most accurately reflect the patient's condition and the items and services furnished to a patient. You should refer to current, complete, and authoritative DME MAC publications or policies for selecting codes based on the items furnished to an individual patient, and you may wish to contact individual DME MACs as needed.