



April 28, 2026

STEPHEN OHARE
PEDORS SHOES
2403 CAPE SABLE DRIVE
MARIETTA, GA 30066

Document Control Number (DCN): 26040047000016

Manufacturer Name	Product Name	Model Number	Assigned HCPCS Code(s)
PEDORS SHOES	CLASSIC SUPER MAX	SMX600	A5500
PEDORS SHOES	CLASSIC MAX	MX600	A5500

Dear STEPHEN OHARE,

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:

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

If you disagree with this decision, you may request a reconsideration within 45 calendar days of the Coding Verification 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 of PDAC's coding determination is made after the 45 calendar 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 Product Classification List (PCL) on the Durable Medical Equipment Coding System (DMECS). Further information for requesting updates to the PCL can be found on the PDAC website at www.dmepdac.com. 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 Palmetto GBA; nor does it imply or guarantee claim reimbursement or coverage.

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

September 11, 2001

Stephen O'Hare
Pedors Shoes
1349 Old 41 Highway, Suite 130
Marietta, GA 30060

Re: Pedors Shoes- Black Velcro (Model 600)
Pedors Shoes- Beige Velcro (Model 601)
Pedors Shoes- Black Lace (Model 604)

Dear Mr. O'Hare:

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) completed the HCPCS Coding Verification Review for the above listed products manufactured by your company. This review resulted in a consensus coding decision.

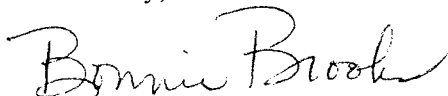
It is our determination that the Pedors Shoes- Black Velcro (Model 600), Pedors Shoes- Beige Velcro (Model 601), Pedors Shoes- Black Lace (Model 604) meet the characteristics and description of the HCPCS code for a therapeutic shoe for diabetics as defined by the DMERC Medical Policy for Therapeutic Shoes For Diabetics. Therefore, the correct Medicare billing code for these products is

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.

This HCPCS coding decision applies to your products as they were presented to and reviewed by the SADMERC. Any modifications to these products could change the HCPCS code and would need to be reviewed for coding verification. The assignment of a HCPCS code to these products should in no way be construed as an approval or endorsement of these products by SADMERC or Medicare, nor does it imply or guarantee reimbursement or coverage. For questions regarding coverage or reimbursement please contact your regional DMERC.

If you have any questions regarding this coding decision, please contact me at the address below or by telephone at (803) 763-8111.

Sincerely,



Bonnie Brooks, RN
HCPCS Medical Analyst
SADMERC

cc: DMERCs

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

A HCFA Contracted Intermediary and Carrier



MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

January 7, 2004

Stephen O'Hare, President
Pedors Shoes-OMI Corporation
1349 Old 41 Highway
Marietta, GA 30060

Re: Pedors Mary Jane Shoe (Model 500)

Dear Mr. O'Hare:

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Review on January 5, 2004 for the above listed product(s) manufactured by your company. This review resulted in a consensus coding decision.

It is our determination that the Pedors Mary Jane Shoe (Model 500) meets the description for a therapeutic shoe as defined in the DMERC Medical Policy for Therapeutic Shoes for Persons with Diabetes. Therefore, the correct Medicare billing code(s) for the product(s) is/are

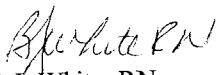
A5500 For diabetics only, fitting (including follow-up) custom preparation and supply of off-the-shelf depth-inlay shoe manufactured to accommodate multi-density insert(s), per shoe

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

If you have any questions regarding this coding decision, please contact me at the address below or by telephone at (803) 763-8225.

Sincerely,


B.J. White, RN
HCPCS Medical Analyst
SADMERC

cc: DMERCs

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

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MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

June 9, 2004

Stephen O'Hare, President
Pedors
1349 Old 41 Highway, Suite 130
Marietta, GA 30060

Re: Pedors 600 High Tops (Model 600-H)

Dear Mr. O'Hare:

The SADMERC and the four Durable Medical Equipment Regional Carriers (DMERCs) have completed the HCPCS Coding Verification Review on June 7, 2004 for the above listed product(s) manufactured by your company. This review resulted in a consensus coding decision.

It is our determination that the Pedors 600 High Tops (Model 600-H) meets the description for a therapeutic shoe as defined in the DMERC Medical Policy for Therapeutic Shoes for Diabetics. Therefore, the correct Medicare billing code(s) for the product(s) is/are

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

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

If you have any questions regarding this coding decision, please contact me at the address below or by telephone at (803) 763-7373.

Sincerely,

Janice Neely, RN
HCPCS Medical Analyst
SADMERC

cc: DMERCs

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

A CMS Contracted Intermediary and Carrier

November 19, 2004

Stephen O'Hare
Pedors Shoes
1349 Old 41 Highway #130
Marietta, GA 30060

Re: 3P Total Contact Inserts (Model 3P INS TC)

Dear Mr. O'Hare:

This letter is in response to your recent inquiry for coding verification of the 3P Total Contact Inserts (Model 3P INS TC). The Statistical Analysis Durable Medical Equipment Regional Carrier (SADMERC) has reviewed the documentation and information submitted for HCPCS Coding. The SADMERC conducts reviews of products to determine the correct HCPCS code(s) of DMEPOS product(s) for Medicare billing.

It is our determination that the Medicare HCPCS code(s) to bill the four Durable Medical Equipment Regional Carriers (DMERCs) is/are

K0628 For diabetics only, multiple density insert, direct formed, molded to foot after external heat source of 230 degrees Fahrenheit or higher, total contact with patient's foot, including arch, base layer minimum of ¼ inch material of Shore A 35 Durometer or 3/16 inch material of Shore A 40 Durometer (or higher), prefabricated, each.

OR

A5510 For diabetics only, direct formed, compression molded to patient's foot without external heat source, multiple-density insert(s) prefabricated, per shoe.

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the SADMERC. Any modifications to the product(s) could change the HCPCS code and would need to be reviewed for coding verification. The assignment of a HCPCS code to the product(s) should in no way be construed as an approval or endorsement of the product(s) 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.

Should you have any questions regarding this decision, please contact me at the address below or by telephone at (803) 763-8707.

Sincerely,



Judy McCamy, RN
HCPCS Medical Analyst
SADMERC

cc: DMERCs

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

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MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

March 12, 2007

Stephen O'Hare, President
Pedors Shoes
1349 Old Highway 41, Suite 130
Marietta, GA 30060

Re: Stretch Walker Touch Closure (Models 800, 801)

Dear Mr. O'Hare:

This letter is in response to your recent inquiry for coding verification of the above listed product(s) manufactured and/or distributed by your company. The Statistical Analysis Durable Medical Equipment Regional Carrier (SADMERC) has reviewed the documentation and information submitted for HCPCS Coding. The SADMERC conducts reviews of products to determine the correct HCPCS code(s) of DMEPOS product(s) for Medicare billing.

It is our determination that the Medicare HCPCS code(s) to bill the four Durable Medical Equipment Regional Carriers (DMERCs) is/are:

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.

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the SADMERC. Any modifications to the product(s) could change the HCPCS code and would need to be reviewed for coding verification. The assignment of a HCPCS code to the product(s) should in no way be construed as an approval or endorsement of the product(s) 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.

Should you have any questions regarding this decision, please contact me at the address below or by telephone at (803) 763-7373.

Sincerely,

Janice Neely, RN
HCPCS Medical Analyst
SADMERC

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

A CMS Contracted Intermediary and Carrier



MEDICARE

Part A Intermediary
Part B Carrier
DME Regional Carrier

March 12, 2007

Stephen O'Hare, President
Pedors Shoes
1349 Old Highway 41, Suite 130
Marietta, GA 30060

Re: Stretch Walker Lace Closure (Models 900, 901)

Dear Mr. O'Hare:

This letter is in response to your recent inquiry for coding verification of the above listed product(s) manufactured and/or distributed by your company. The Statistical Analysis Durable Medical Equipment Regional Carrier (SADMERC) has reviewed the documentation and information submitted for HCPCS Coding. The SADMERC conducts reviews of products to determine the correct HCPCS code(s) of DMEPOS product(s) for Medicare billing.

It is our determination that the Medicare HCPCS code(s) to bill the four Durable Medical Equipment Regional Carriers (DMERCs) is/are:

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.

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the SADMERC. Any modifications to the product(s) could change the HCPCS code and would need to be reviewed for coding verification. The assignment of a HCPCS code to the product(s) should in no way be construed as an approval or endorsement of the product(s) 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.

Should you have any questions regarding this decision, please contact me at the address below or by telephone at (803) 763-7373.

Sincerely,

Janice Neely, RN
HCPCS Medical Analyst
SADMERC

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

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MEDICARE

Part A Intermediary
Part B Carrier

July 1, 2008

Stephen O'Hare, President
Pedors Shoes
1349 Old 41 Highway, Suite 130
Marietta, GA 30060

Re: Pedors 2P Bilam

Dear Mr. O'Hare:

This letter is in response to your recent inquiry for coding verification of the above listed product(s) manufactured and/or distributed by your company. The Statistical Analysis Durable Medical Equipment Regional Carrier (SADMERC) has reviewed the documentation and information submitted for HCPCS Coding. The SADMERC conducts reviews of products to determine the correct HCPCS code(s) of DMEPOS product(s) for Medicare billing.

It is our determination that the Medicare HCPCS code(s) to bill the four Durable Medical Equipment Medicare Administrative Contractors (DME MACs) is/are:

A5512 For diabetics only, multiple density insert, direct formed, molded to foot after external heat source of 230 degrees Fahrenheit or higher, total contact with patient's foot, including arch, base layer minimum of 1/4 inch material of Shore A 35 durometer or 3/16 inch material of Shore A 40 durometer (or higher), prefabricated, each.

OR

A5510 For diabetics only, direct formed, compression molded to patient's foot without external heat source, multiple-density insert(s), prefabricated, per shoe.

This HCPCS coding decision applies to the submitted product(s) as presented to and reviewed by the SADMERC. Any modifications to the product(s) could change the HCPCS code and would need to be reviewed for coding verification. The assignment of a HCPCS code to the product(s) should in no way be construed as an approval or endorsement of the product(s) 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 DME MAC.

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.

Should you have any questions regarding this decision, please contact me at the address below or by telephone at (803) 763-7373.

Sincerely,

Janice Neely, RN
HCPCS Medical Analyst
SADMERC

Palmetto GBA

Statistical Analysis Durable Medical Equipment Regional Carrier
Post Office Box 100143 • Columbia, South Carolina • 29202-3143

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