VOCSN is the first and only Multi-Function Ventilator that combines five traditional devices into a single, portable device including:

- **Ventilation**: Critical care ventilator (invasive, non-invasive, and mouthpiece across a comprehensive set of modes and settings)
- **Oxygen**: 6 L/min equivalent oxygen concentrator
- **Cough**: Touch button cough assist
- **Suction**: Hospital grade suction
- **Nebulizer**: High performance nebulizer (6 L/min)

**Prescribing VOCSN**

1. Simply write "VOCSN" on the prescription. Usual medical necessity rules apply for each therapy.
2. Use the prescription template to specify modes and settings for Ventilation + one additional therapy.

**More Resources at VentecLife.com/Physicians**

- Prescription Template • DME Finder • Training
- Reimbursement Information • Research • Technical Details
VOCSN is covered by Medicare, Medicaid, and Commercial Payers under E0467

- Any ventilator patient may be eligible, complete checklist below.
- Eligible patients include ventilator patients that have been using oxygen for less than 36 months and/or cough, suction, and/or nebulizer less than 13 months.

**Determine VOCSN E0467 Reimbursement Eligibility**

<table>
<thead>
<tr>
<th>Ventilation + One Additional Therapy</th>
<th>Use History: Oxygen</th>
<th>Use History: Cough, Suction, and/or Nebulizer</th>
</tr>
</thead>
<tbody>
<tr>
<td>E0467 Reimbursement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Less than 36 Months</td>
<td>Less than 36 Months</td>
<td>Less than 13 Months</td>
</tr>
<tr>
<td>37 to 60 Months</td>
<td>More than 60 Months</td>
<td>13 to 60 Months</td>
</tr>
<tr>
<td>Approved</td>
<td>Approved</td>
<td>Approved</td>
</tr>
</tbody>
</table>

Caution: U.S. Federal law restricts this device to sale by or on the order of a physician. This information is intended to serve as general reference and does not constitute reimbursement or legal advice. Ventec Life Systems makes no promise or guarantee that the information provided is comprehensive, will remain timely, will be appropriate for the specific services provided, or will result in reimbursement. For all coding, coverage, and reimbursement matters or questions, Ventec Life Systems recommends that you consult with certified coders, payers, and/or reimbursement specialists.

NOTE: Inclusion or exclusion of a code for a specific product or supply does not imply any health insurance coverage or reimbursement policy. All referenced information and codes were taken from the PDAC web site: Reference E0467. Please refer to DMEPOS Supplier Manual for complete explanations.