



Patient Information		
First Name		Last Name
DOB		
Address 1		Address 2
City	State	Zip
Ordering Provi	der	
First Name		Last Name
NPI Number		Practice Name
Address 1		Address 2
City	State	Zip
Phone Number		Fax Number
Diagnosis: Peyro	onie's disease (ICD: N48.6)	
Device: One RestoreX Penile Traction Device		
HCPCS Code: E0201		
Note: This device is medically necessary to more effectively treat penile curvature and		
shortening cause	d by Peyronie's Disease	
Signature		Date
Printed Name		

Next steps: Once completed with a physician signature, this form can be submitted to an in network DME supplier that will handle the submission of the request for coverage. For Medicare, durable medical equipment (DME) can potentially be covered under Medicare part B. If you're in a Medicare Advantage Plan and you need DME, contact your plan to find out if coverage will apply.