



Felix™ NeuroAI™ Wristband

ORDER CHECKLIST

Non-Medicare

To order your prescriptions, simply follow these steps:

1. Complete the Prescription Form

2. FAX THE ORDER TO



800-673-3999

NON-MEDICARE

Felix™ NeuroAI™ Wristband for Tremor Relief – Prescription Form

Patient Information

First Name:		Last Name:	
Policy Number:		Date of Birth:	
Address:			
City:		State:	Zip Code:
Email:	Mobile Phone:		Home Phone:

Diagnosis ICD-10 Code

<input type="checkbox"/> G25.0: Essential tremor
<input type="checkbox"/> Other:

External Upper Limb Tremor Stimulator Description

Felix™ NeuroAI™ Wristband for Essential Tremor HCPCS Code: E0734 Description: External upper limb tremor stimulator of the peripheral nerves of the wrist	
Felix™ NeuroAI™ Electrode Bands HCPCS Code: A4542 Description: Supplies and accessories for external upper limb tremor stimulator of the peripheral nerves of the wrist Quantity: 1 (90-day supply) Refill frequency: every 90 days	

Prescriber Authorization

Treating Practitioner Signature:		Order Date:
Treating Practitioner Name:		NPI #
Clinic Name:	Email Address:	
Phone Number:	Fax Number:	

Please fax the completed form to 800-673-3999.