



JAY[®] J2 Cushion
E2622 / E2623/ E2624 / E2625
January 2024

Mark For:

Date: _____
 Dealer Acct #: _____
 Dealer: _____
 Dealer Contact: _____
 Dealer Address: _____
 Dealer City: _____ ST: _____ ZIP: _____
 Dealer Phone: () _____ Fax: () _____
 Confirmation Email: _____
 Confirm Via: Fax Email

Submitting for:

Quote Order

PO#: _____

ADDITIONAL SHIPPING INFORMATION

Ship To: _____
 Attention: _____
 Address: _____
 Address: _____
 Ship To City: _____ ST: _____ ZIP: _____
 Ship To Phone: () _____ Fax: () _____

The **HCPCS CODES** herein are based on PDAC verification or interpretation of Medicare definitions and guidelines. Non-Medicare payers may accept alternative **HCPCS CODES**, including misc. codes to ensure access for their enrollees. The use of **HCPCS CODES** does not ensure coverage or payment.

JAY[®] J2 CUSHION**With Stretch Cover****With Incontinence Cover****With Air Exchange Cover**

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108-MJ	E2622	14" x 16"
<input type="checkbox"/>	2105-MJ	E2622	15.5" x 16"
<input type="checkbox"/>	2106-MJ	E2622	15.5" x 18"
<input type="checkbox"/>	2107-MJ	E2622	15.5" x 20"
<input type="checkbox"/>	2117-MJ	E2622	17" x 17"
<input type="checkbox"/>	2100-MJ	E2622	18" x 16"
<input type="checkbox"/>	2101	E2622	18" x 18"
<input type="checkbox"/>	2103-MJ	E2622	18" x 20"
<input type="checkbox"/>	2116-MJ	E2622	20" x 16"
<input type="checkbox"/>	2118-MJ	E2622	20" x 18"
<input type="checkbox"/>	2102-MJ	E2622	20" x 20"
<input type="checkbox"/>	2104-MJ	E2623	24" x 20"

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108N	E2622	14" x 16"
<input type="checkbox"/>	2105N	E2622	15.5" x 16"
<input type="checkbox"/>	2106N	E2622	15.5" x 18"
<input type="checkbox"/>	2107N	E2622	15.5" x 20"
<input type="checkbox"/>	2117N	E2622	17" x 17"
<input type="checkbox"/>	2100N	E2622	18" x 16"
<input type="checkbox"/>	2101N	E2622	18" x 18"
<input type="checkbox"/>	2103N	E2622	18" x 20"
<input type="checkbox"/>	2116N	E2622	20" x 16"
<input type="checkbox"/>	2118N	E2622	20" x 18"
<input type="checkbox"/>	2102N	E2622	20" x 20"
<input type="checkbox"/>	2104N	E2623	24" x 20"

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108A	E2622	14" x 16"
<input type="checkbox"/>	2105A	E2622	15.5" x 16"
<input type="checkbox"/>	2106A	E2622	15.5" x 18"
<input type="checkbox"/>	2107A	E2622	15.5" x 20"
<input type="checkbox"/>	2117A	E2622	17" x 17"
<input type="checkbox"/>	2100A	E2622	18" x 16"
<input type="checkbox"/>	2101A	E2622	18" x 18"
<input type="checkbox"/>	2103A	E2622	18" x 20"
<input type="checkbox"/>	2116A	E2622	20" x 16"
<input type="checkbox"/>	2118A	E2622	20" x 18"
<input type="checkbox"/>	2102A	E2622	20" x 20"
<input type="checkbox"/>	2104A	E2623	24" x 20"

JAY[®] J2 POSITIONING CUSHION**With Stretch Cover****With Incontinence Cover****With Air Exchange Cover**

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108-MJP	E2624	14" x 16"
<input type="checkbox"/>	2105-MJP	E2624	15.5" x 16"
<input type="checkbox"/>	2106-MJP	E2624	15.5" x 18"
<input type="checkbox"/>	2107-MJP	E2624	15.5" x 20"
<input type="checkbox"/>	2117-MJP	E2624	17" x 17"
<input type="checkbox"/>	2100-MJP	E2624	18" x 16"
<input type="checkbox"/>	2101P	E2624	18" x 18"
<input type="checkbox"/>	2103-MJP	E2624	18" x 20"
<input type="checkbox"/>	2116-MJP	E2624	20" x 16"
<input type="checkbox"/>	2118-MJP	E2624	20" x 18"
<input type="checkbox"/>	2102-MJP	E2624	20" x 20"
<input type="checkbox"/>	2104-MJP	E2625	24" x 20"

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108NP	E2624	14" x 16"
<input type="checkbox"/>	2105NP	E2624	15.5" x 16"
<input type="checkbox"/>	2106NP	E2624	15.5" x 18"
<input type="checkbox"/>	2107NP	E2624	15.5" x 20"
<input type="checkbox"/>	2117NP	E2624	17" x 17"
<input type="checkbox"/>	2100NP	E2624	18" x 16"
<input type="checkbox"/>	2101NP	E2624	18" x 18"
<input type="checkbox"/>	2103NP	E2624	18" x 20"
<input type="checkbox"/>	2116NP	E2624	20" x 16"
<input type="checkbox"/>	2118NP	E2624	20" x 18"
<input type="checkbox"/>	2102NP	E2624	20" x 20"
<input type="checkbox"/>	2104NP	E2625	24" x 20"

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108AP	E2624	14" x 16"
<input type="checkbox"/>	2105AP	E2624	15.5" x 16"
<input type="checkbox"/>	2106AP	E2624	15.5" x 18"
<input type="checkbox"/>	2107AP	E2624	15.5" x 20"
<input type="checkbox"/>	2117AP	E2624	17" x 17"
<input type="checkbox"/>	2100AP	E2624	18" x 16"
<input type="checkbox"/>	2101AP	E2624	18" x 18"
<input type="checkbox"/>	2103AP	E2624	18" x 20"
<input type="checkbox"/>	2116AP	E2624	20" x 16"
<input type="checkbox"/>	2118AP	E2624	20" x 18"
<input type="checkbox"/>	2102AP	E2624	20" x 20"
<input type="checkbox"/>	2104AP	E2625	24" x 20"

JAY® J2 RECLINE CUSHION

With Stretch Cover

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108.1	E2622	14" x 16"
<input type="checkbox"/>	2105.1	E2622	15.5" x 16"
<input type="checkbox"/>	2106.1	E2622	15.5" x 18"
<input type="checkbox"/>	2107.1	E2622	15.5" x 20"
<input type="checkbox"/>	2117.1	E2622	17" x 17"
<input type="checkbox"/>	2100.1	E2622	18" x 16"
<input type="checkbox"/>	2101.1	E2622	18" x 18"
<input type="checkbox"/>	2103.1	E2622	18" x 20"
<input type="checkbox"/>	2116.1	E2622	20" x 16"
<input type="checkbox"/>	2118.1	E2622	20" x 18"
<input type="checkbox"/>	2102.1	E2622	20" x 20"
<input type="checkbox"/>	2104.1	E2623	24" x 20"

With Incontinence Cover

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108.1N	E2622	14" x 16"
<input type="checkbox"/>	2105.1N	E2622	15.5" x 16"
<input type="checkbox"/>	2106.1N	E2622	15.5" x 18"
<input type="checkbox"/>	2107.1N	E2622	15.5" x 20"
<input type="checkbox"/>	2117.1N	E2622	17" x 17"
<input type="checkbox"/>	2100.1N	E2622	18" x 16"
<input type="checkbox"/>	2101.1N	E2622	18" x 18"
<input type="checkbox"/>	2103.1N	E2622	18" x 20"
<input type="checkbox"/>	2116.1N	E2622	20" x 16"
<input type="checkbox"/>	2118.1N	E2622	20" x 18"
<input type="checkbox"/>	2102.1N	E2622	20" x 20"
<input type="checkbox"/>	2104.1N	E2623	24" x 20"

With Air Exchange Cover

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108.1A	E2622	14" x 16"
<input type="checkbox"/>	2105.1A	E2622	15.5" x 16"
<input type="checkbox"/>	2106.1A	E2622	15.5" x 18"
<input type="checkbox"/>	2107.1A	E2622	15.5" x 20"
<input type="checkbox"/>	2117.1A	E2622	17" x 17"
<input type="checkbox"/>	2100.1A	E2622	18" x 16"
<input type="checkbox"/>	2101.1A	E2622	18" x 18"
<input type="checkbox"/>	2103.1A	E2622	18" x 20"
<input type="checkbox"/>	2116.1A	E2622	20" x 16"
<input type="checkbox"/>	2118.1A	E2622	20" x 18"
<input type="checkbox"/>	2102.1A	E2622	20" x 20"
<input type="checkbox"/>	2104.1A	E2623	24" x 20"

JAY® J2 RECLINE POSITIONING CUSHION

With Stretch Cover

✓	Option #	HCPCS	Definition
<input type="checkbox"/>	2108.1P	E2624	14" x 16"
<input type="checkbox"/>	2105.1P	E2624	15.5" x 16"
<input type="checkbox"/>	2106.1P	E2624	15.5" x 18"
<input type="checkbox"/>	2107.1P	E2624	15.5" x 20"
<input type="checkbox"/>	2117.1P	E2624	17" x 17"
<input type="checkbox"/>	2100.1P	E2624	18" x 16"
<input type="checkbox"/>	2101.1P	E2624	18" x 18"
<input type="checkbox"/>	2103.1P	E2624	18" x 20"
<input type="checkbox"/>	2116.1P	E2624	20" x 16"
<input type="checkbox"/>	2118.1P	E2624	20" x 18"
<input type="checkbox"/>	2102.1P	E2624	20" x 20"
<input type="checkbox"/>	2104.1P	E2625	24" x 20"

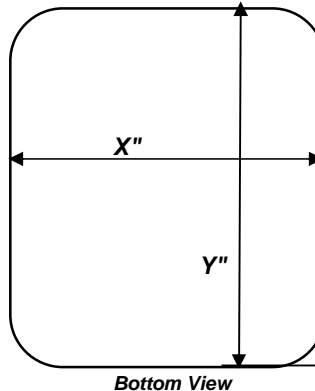
JAY J2 Size Matrix

		WIDTH										
		14	15	15.5	17	18	19	20	21	22	23	24
DEPTH	14	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW
	15	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW
	16		JYW		JYW		JYW		JYW	JYW	JYW	JYW
	17	JYW	JYW	JYW		JYW	JYW	JYW	JYW	JYW	JYW	JYW
	18	JYW	JYW		JYW	JYW		JYW	JYW	JYW	JYW	
	19	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW	JYW
	20	JYW	JYW		JYW		JYW		JYW	JYW	JYW	JYW
	21	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	22	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	23	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

	=	Standard Offering
JYW	=	Offered Via Jay Your Way
N/A	=	Not available

JAY J2 Deep Measuring Guide

Measurements made from completed cushion with covers.



Width
 $X = \text{Width}$
Note: Measurement made from outside edge to outside edge of cushion.
Ex: 2106-MJ $X = 16"$

Depth
 $Y = \text{Depth}$
Note: Measurement made from rear edge to front edge of cushion.
Ex: 2106-MJ $Y = 18"$

Cushion Size	Actual Width & Depth	
	X	Y
14" x 16"	13.5"	16"
15.5"x16"	15.75"	16"
15.5"x18"	15.75"	18"
15.5"x20"	15.5"	20"
17" x 17"	16.5"	17"
18" x 16"	17.5"	16"
18" x 18"	17.5"	18"
18" x 20"	17.5"	20"
20" x 16"	19.5"	15.75"
20" x 18"	19.5"	18"
20" x 20"	19.5"	19.75"
24" x 20"	23.5"	20"

JAY Your Way - Modifications

Fluid Volume Change

<input type="checkbox"/>	OF	Fluid Volume Overfill		NC
		<input type="checkbox"/> 10%	<input type="checkbox"/> 20%	
<input type="checkbox"/>	UF	Fluid Volume Underfill		NC
		<input type="checkbox"/> -10%	<input type="checkbox"/> -20%	

Obliquity Fluid Volume Change

<input type="checkbox"/>	OOFR	Obliquity Overfill - Right Side		NC
		<input type="checkbox"/> 10%	<input type="checkbox"/> 20%	
<input type="checkbox"/>	OOFL	Obliquity Overfill - Left Side		NC
		<input type="checkbox"/> 10%	<input type="checkbox"/> 20%	
<input type="checkbox"/>	Oufr	Obliquity Underfill - Right Side		NC
		<input type="checkbox"/> -10%	<input type="checkbox"/> -20%	
<input type="checkbox"/>	Oufl	Obliquity Underfill - Left Side		NC
		<input type="checkbox"/> -10%	<input type="checkbox"/> -20%	

Embroidery

<input type="checkbox"/>	EMBROIDERY	K0108	Embroidery (32 Character Max)	\$25.00
			Location: <input type="checkbox"/> Front	
			Font: <input type="checkbox"/> Block <input type="checkbox"/> Script	
			Embroidery Text: <input style="width: 100%;" type="text"/>	
			Embroidery Color: <input style="width: 100%;" type="text"/>	

Don't see the option you want? NO PROBLEM! Write your request below and we can evaluate it and provide a quote.

Notes:

Length Change

<input type="checkbox"/>	IL	Increase Length		NC
	<input type="checkbox"/> +1"	<input type="checkbox"/> +2"	<input type="checkbox"/> +3"	<input type="checkbox"/> +4"
<input type="checkbox"/>	RL	Reduce Length		NC
	<input type="checkbox"/> -1"	<input type="checkbox"/> -2"	<input type="checkbox"/> -3"	<input type="checkbox"/> -4"
<input type="checkbox"/>	IW	Increase Width		NC
	<input type="checkbox"/> +1"	<input type="checkbox"/> +1.5"		
<input type="checkbox"/>	RW	Reduce Width		NC
	<input type="checkbox"/> -1"	<input type="checkbox"/> -2"		
<input type="checkbox"/>	LLCR	Length Cut - Right		NC
	<input type="checkbox"/> 1"	<input type="checkbox"/> 2"	<input type="checkbox"/> 3"	<input type="checkbox"/> 4"
<input type="checkbox"/>	LLCL	Length Cut - Left		NC
	<input type="checkbox"/> 1"	<input type="checkbox"/> 2"	<input type="checkbox"/> 3"	<input type="checkbox"/> 4"

Slope Change

<input type="checkbox"/>	ACP	Posterior Slope Cut		NC
	<input type="checkbox"/> 1/2"	<input type="checkbox"/> 1"	<input type="checkbox"/> 1.5"	
<input type="checkbox"/>	WGP	Wedgeglue Posterior Slope		NC
<input type="checkbox"/>	WGA	Wedgeglue Anterior Slope		NC

Positioning

<input type="checkbox"/>	UC	Lateral Thigh - Adductor Wedges (PR)		\$59.00
	<input type="checkbox"/> 1"	<input type="checkbox"/> 2"	<input type="checkbox"/> 3"	<input type="checkbox"/> 2" Child

Cover Options

<input type="checkbox"/>	JISC	Incontinent Shower Cap	NC
<input type="checkbox"/>	JIOC	Incontinent Zipper	NC
<input type="checkbox"/>	JSOC	Stretch Zipper	NC
<input type="checkbox"/>	JBOC	X-Static TM Outer Cover	NC
<input type="checkbox"/>	JDOC	Dartex TM Outer Cover	NC
<input type="checkbox"/>	JRDOC	Reverse Dartex TM Outer Cover	NC