

1 Coding Options for Ottobock Microprocessor Knees.

April 29, 2024.

BASE CODE OPTIONS

KNEE DISARTICULATION	L5312	Knee disarticulation, molded socket, single axis knee, pylon, SACH foot, endoskeletal system.
ABOVE KNEE	L5321	Above knee, molded socket, open end, SACH foot, endoskeletal system, single axis knee.
HIP DISARTICULATION	L5331	Hip disarticulation, Canadian type, molded socket, endoskeletal system, hip joint, single axis knee, SACH foot
HEMIPELVECTOMY	L5341	Hemipelvectomy, Canadian type, molded socket, endoskeletal system, hip joint, single axis knee, SACH foot

SOCKET REPLACEMENT CODES

KNEE DISARTICULATION	L5701	Replacement socket, above knee/knee disarticulation, including attachment plate, molded to patient model.
ABOVE KNEE	L5701	Replacement socket, above knee/knee disarticulation, including attachment plate, molded to patient model.
HIP DISARTICULATION	L5702	Replacement socket, hip disarticulation, including hip joint, molded to patient model.

Interested in Ottobock Fabrication Services? Click [here](#)

SOCKET ADDITION CODES - KNEE DISARTICULATION AND ABOVE KNEE

Check Socket - KD	L5622	Test [check] socket, knee disarticulation
Check Socket - AK	L5624	Test [check] socket, above knee
Acrylic Socket	L5631	Above knee or Knee disarticulation, acrylic socket
Ischial Containment	L5649	Ischial containment, narrow M-L socket
Total Contact	L5650	Total Contact, above knee or knee disarticulation socket
Flex Inner Socket	L5651	Above knee, flexible inner socket, external frame
Suction Suspension	L5652	Suction suspension, above knee/knee disarticulation
Alignable System	L5920	Above knee or hip disarticulation, alignable system
Ultralight Material	L5950	Above knee, Ultralight material (titanium, carbon fiber, or equal)

SOCKET ADDITION CODES - HIP DISARTICULATION AND HEMIPELVECTOMY

Check Socket - Hip	L5626	Test [check] socket, hip disarticulation
Check Socket-Hemi	L5628	Test [check] socket, hemipelvectomy
Acrylic Socket	L5631	Above knee, acrylic socket (check with payer)
Flex Inner Socket	L5643	Hip disarticulation, flexible inner socket, external frame
Total Contact	L5650	Total Contact, above knee or knee disarticulation socket

Alignable System	L5920	Above knee or hip disarticulation, alignable system
Ultralight Material	L5960	Hip disarticulation, ultralight material (titanium, carbon fiber, or equal)

MICROPROCESSOR KNEE OPTIONS

C-LEG PYRAMID: 3C98-* THREADED 3C88-* [see C-Leg Reimbursement documents](#)



MP Control	² L5856	Microprocessor control feature, swing and stance phase, incl. sensors
Swing & Stance Ctrl	² L5828	Fluid swing and stance phase control
Stance Flexion	L5845	Stance flexion feature, adjustable
Stance Extension	² L5848	Fluid stance extension, dampening feature, with or without adjustability

KENEVO PYRAMID: 3C60 THREADED 3C60=ST [see Kenevo Reimbursement documents](#)



Swing & Stance Ctrl	² L5828	Fluid swing and stance phase control
Stance Flexion	L5845	Stance flexion feature, adjustable
Stance Extension	² L5848	Fluid stance extension, dampening feature, with or without adjustability
MP Control	² L5856	Microprocessor control feature, swing and stance phase, includes sensors

GENIUM PYRAMID: 3B1-*, THREADED: 3B1-*=ST [see Genium reimbursement documents](#)

<p><i>We do not recommend billing Medicare for the Genium until specific coding is secured.</i></p>	L5999	<p>Addition to lower extremity endoskeletal system, Ottobock 3B1-3 Genium adaptive microprocessor-controlled swing and stance phase knee, with stance flexion; stance extension damping; simulated-physiologic rule sets, predicted by multi-modal proprioceptive input; loading flexed knee to traverse obstacles and stairs; dynamic stability control for all transitional gait (i.e. safe multidirectional movement in confined spaces, stance release on ramps, transition to running, weight compensation for stance release); inertial motion control unit feature for intuitive standing and backwards walking, IP 67 weatherproof, 5 additional programmable modes.</p>
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X3² PYRAMID: 3B5-*, THREADED: 3B5-*=ST [See X3 Reimbursement documents](#)

<p><i>We do not recommend billing Medicare for the X3 until specific coding is secured.</i></p>	L5999	<p>Addition to lower extremity endoskeletal system, Ottobock 3B5-3 Genium X3 adaptive microprocessor-controlled swing and stance phase knee, with stance flexion; stance extension damping; simulated-physiologic rule sets, predicted by multi-modal proprioceptive input; loading flexed knee to traverse obstacles and stairs; dynamic stability control for all transitional gait (i.e. safe multidirectional movement in confined spaces, stance release on ramps, transition to running, weight compensation for stance release); inertial motion control unit feature for intuitive standing and backwards walking, IP 68 submersible, IP 66 waterjets, Running mode, plus 5 additional programmable modes.</p>
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HIP OPTIONS

7E10 HeliX 3D (C-Leg/Genium/X3)	Base + ² L5961	Polycentric hip joint, pneumatic or hydraulic control, rotation control, with or without flexion and/or extension. See the Helix Reimbursement docs
7E9 Single Axis, Hydraul. (Kenevo/C-Leg)	Base+ L5999	Monocentric, Hydraulic Swing and Stance Phase Control, Independently and Individually Adjustable Flexion and Extension Resistance. See the 7E9 Reimbursement documents
<i>We do not recommend billing Medicare for the 7E9 until specific coding is secured.</i>		
7E7 Single Axis, Int Ext (Kenevo/C-Leg)	Base+ L5855	Mechanical Hip Extension Assist

FOOT OPTIONS

1A1-2 Empower (Genium, X3) Note: private pay only	² L5973 ² L5969	Ankle-foot system, microprocessor control feature Power Assist (Contact reimbursement if payer does not have L5969) See Empower Reimbursement documents
1A30 Greissinger Plus (Kenevo/C-Leg/Genium)	L5972 ² L5986	Flexible keel foot Multiaxial rotation unit
1B1 Meridium Foot (C-Leg/Genium/X3)	² L5973	Ankle-foot system, microprocessor control feature See Meridium Reimbursement documents
1C11 Terion K2 (Kenevo)	L5972 ² L5986	Flexible keel foot Multiaxial rotation unit
1C30 Trias (Kenevo/C-Leg/Genium/X3)	² L5981 ² L5986	Flex-walk system Multiaxial rotation unit
1C40 C-Walk (C-Leg/Genium/X3)	² L5981	Flex-walk system
1C50 Taleo (C-Leg/Genium/X3)	² L5981	Flex-walk system
1C51 Taleo Vertical Shock (C-Leg/Genium/X3)	² L5987 ² L5986	Shank foot system with vertical loading pylon Multiaxial rotation unit
1C52 Taleo Harmony (C-Leg/Genium/X3)	² L5987 ² L5986 L5781	Shank foot system with vertical loading pylon Multiaxial rotation unit Vacuum pump, residual limb volume mgmt. and moisture evacuation See Vacuum reimbursement documents
1C53 Taleo LP (C-Leg/Genium/X3)	² L5981	Flex-walk system
1C56 Taleo Adjust (C-Leg/Genium/X3)	² L5981 L5990	Flex-walk system User adjustable heel height (coding/coverage restrictions may apply)

1C58 Taleo Side Flex	² L5981	Flex-walk system	
	² L5986	Multiaxial rotation unit	
1C60 Triton (C-Leg/Genium/X3)	² L5981	Flex-walk system	
1C61 Triton Vertical Shock (C-Leg/Genium/X3)	² L5987	Shank foot system with vertical loading pylon	
	² L5986	Multiaxial Rotation unit	
1C62 Triton Harmony (C-Leg/Genium/X3)	² L5987	Shank foot system with vertical loading pylon	
	² L5986	Multiaxial rotation unit	
	L5781	Vacuum pump, residual limb volume mgmt. and moisture evacuation See Vacuum Reimbursement documents	
*1C63 Triton LP (low profile) (C-Leg/Genium/X3)	² L5981	Flex-walk system	
1C64 Triton HD (heavy duty) (C-Leg/Genium/X3)	² L5981	Flex-walk system	
1C68 Triton side flex (C-Leg/Genium/X3)	² L5981	Flex-walk system	
	² L5986	Multiaxial rotation unit	
1C70 Evanto (Kenevo/C-Leg/Genium/X3)	² L5981	Flex-walk system	
	² L5986	Multiaxial rotation unit	
1D10/11 Dynamic Foot (Kenevo/C-Leg)	² L5972	Flexible keel foot	
1D35 Dynamic Motion (Kenevo/C-Leg/Genium/X3)	² L5979	Multiaxial ankle, dynamic response foot	
1E56 Axtion (C-Leg/Genium/X3)	² L5981	Flex-walk system	
1E58 Axtion DP (C-Leg/Genium/X3)	² L5980	Flex-foot system (Effective 02/19/21)	
	² L5986	Multiaxial rotation unit	
1E57 Lo Rider (C-Leg/Genium/X3)	² L5981	Flex-walk system	
1E95 Challenger* (Genium/X3)	² L5981	Flex-walk system	
1H38 / 1H40 Single Axis Foot (Kenevo)	L5974	Single axis ankle/foot	
1M10 Adjust (Kenevo/C-Leg/Genium)	² L5972	Flexible keel foot	
	² L5986	Multiaxial rotation unit	
1S66 / 1S101 Sach Foot (Kenevo)	Incl. Base	Sach foot	
F21=0_B Maverick Xtreme AT (Genium/X3)	² L5981	Flex-walk system	

F22=0_B Maverick Comfort AT (C-Leg/Genium/X3)	² L5981 ² L5986	Flex-walk system Multiaxial rotation unit	
F23=0_B Maverick VS (C-Leg/Genium/X3)	² L5987 ² L5986	Shank foot system with vertical loading pylon Multiaxial Rotation unit	
LP2-W2=0_B Freestyle Swim (X3)	² L5981	Flex-walk system	
VS5=0_B Restore (Kenevo)	² L5972 ² L5986	Flexible keel foot Multiaxial rotation unit	
VS4=0_B Kintrol (Kenevo)	² L5972 L5968	Flexible keel foot Multiaxial ankle	

LINERS, SHUTTLE LOCKS, SOCKS (not all inclusive)

PREFABRICATED LINERS WITH DISTAL CONNECTION

6Y80 Skeo 6Y85 Skeo Skinguard TF 6Y88 Skeo 3D Skinguard TF	L5673	Custom/Prefabricated socket insert, silicone gel, elastomeric or equal, for use with lock.
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PREFABRICATED LINERS WITHOUT DISTAL CONNECTION

6Y81 ProSeal (uncovered) 6Y110 Skeo Sealing Liner 6Y111 Skeo 3D Sealing Liner 6Y520 Uneo (uniform) 6Y522 Uneo (tapered, uncovered) 6Y523 Uneo (tapered, covered)	L5679	Custom/Prefabricated socket insert, silicone gel, elastomeric or equal, not for use with lock.
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CUSTOM LINERS

Uneo Unique Urethane Liners 6Y416 ShapePlus (initial) 6Y417 ShapePlus (replacement) 6Y430 AK Standard (initial) 6Y432 AK Standard (replacement)	L5681 L5683	For Initial Liner use: Custom socket insert, for congenital/atypical traumatic amputee, silicone gel, elastomeric or equal, for use with/without lock. OR For Replacement Liner (same mold) use: Custom socket insert, not for congenital/atypical traumatic amputee, silicone gel, elastomeric or equal, for use with/without lock.
Skeo Unique Silicone Liners 6Y716 ShapePlus (initial) 6Y717 ShapePlus (replacement) 6Y730 AK Standard (initial) 6Y732 AK Standard (replacement)	L5681 L5683	For Initial Liner use: Custom socket insert, for congenital/atypical traumatic amputee, silicone gel, elastomeric or equal, for use with/without lock. OR For Replacement Liner (same mold) use: Custom socket insert, not for congenital/atypical traumatic amputee, silicone gel, elastomeric or equal, for use with/without lock.

SHUTTLE LOCKS

6A20=10, =20 Shuttle Lock	L5671	Suspension Lock (shuttle, lanyard, or equal)
6A30=10, =20 Shuttle Lock		
6A40 MagnoFlex Shuttle Lock		
4R160=1, =2 KISS Lanyard System		

SOCKS

453D4, D5, D7 Derma Seal	L8417	Sheath/Sock, including Gel cushion layer.
451F4=20 TF Residual Limb Sock-Nylon	L8410	Sheath, above knee
451F6=20 TF Residual Limb Sock-Cotton	L8430	Sock, multiple ply

PROTECTIVE COVERING (if used)

3S26=L44 Cosmetic Foam Cover	L5705	
4X840 Kenevo Protective Cover	*L5999	Ottobock 4X840 Kenevo Protector
4X860 + 4P863=* C-Leg Protective Cover + Shield	*L5999	Ottobock 4X860=* C-Leg Protective Cover
4P862 + 4P863=* C-Leg Guard + Shield	*L5999	Ottobock 4P862 C-Leg Guard Protective Cover
4X880 Genium Protective Cover	*L5999	Ottobock 4X880 Genium Protective Cover
4X193-1 X3 Protective Cover	*L5999	Ottobock 4X193-1 Protective Cover for the X3 Knee
4X900 X3 Protective Cover	*L5999	Ottobock 4X900 Protective Cover for the X3 Knee.
99B16 Soft Touch Stocking	A4467	Above knee, flexible, protective outer surface covering

*It is not recommended to bill L5999 to Medicare for protective covers.

ADAPTORS (if used)

4R10=111 Quickchange (C-Leg/Genium/X3/Kenevo)	L5617	Quick change self-aligning unit
4R57 Rotation Adaptor 4R57=WR Rotation Adapter (C-Leg/Genium/X3/Kenevo)	L5926	(contact Ottobock Reimbursement if your payer does not have L5926 on their fee schedule)
4R40 Torsion Adapter (C-Leg/Genium/X3/Kenevo)	² L5984	Axial rotation unit, with or without adjustability

BATTERY/CHARGER (Replacement only) *Contact service department for battery replacement

4E50 + 757L16 C-Leg Charger and Adapter	L7368	Charger & Adapter for Lithium Ion Battery, replacement only (initial charger included in microprocessor code)
4E60 + 757L16 Genium/X3 Charger and Adapter	L7368	Charger & Adapter for Lithium Ion Battery, replacement only (initial charger included in microprocessor code)

4E70 + 757L16 Kenevo Charger and Adapter	L7368	Charger & Adapter for Lithium Ion Battery, replacement only (initial charger included in microprocessor code)
757L38 + 757L39 Empower Charger and Adapter	L7368	Charger & Adapter for Lithium Ion Battery, replacement only (initial charger included in microprocessor code)
757B38 Empower Battery	L7367	Lithium Ion Battery, replacement only (initial battery included in microprocessor code)
Li-Ion Battery (C-Leg/Genium/X3/Kenevo)	L7367	Lithium Ion Battery, replacement only (initial battery included in microprocessor code)
PYLONS (Replacement only)		
2R57 Tube Adaptor (C-Leg)	L7510	Replace 2R57 Electronic Pylon on Ottobock C-Leg (include model #, original purchase date, reason for replacement, continued medical need & MSRP)
2R67 Tube Adaptor w/ Torsion (C-Leg)	² L5984 or L7510	(initial claim only) Axial rotation unit, with or without adj. Replace 2R67 Electronic Pylon w/ Torsion on Ottobock C-Leg (include model number, original purchase date, reason for replacement, continued medical need & MSRP)
2R17 Axon Tube Adaptor (Kenevo)	L7510	Replace 2R17 Electronic Pylon on Ottobock Kenevo (include model #, original purchase date, reason for replacement, continued medical need & MSRP)
2R19 Axon Tube Adapter (X3)	L7510	Replace 2R19 Electronic Pylon on Ottobock X3 (include model #, original purchase date, reason for replacement, continued medical need & MSRP)
2R20 Axon Tube Adapter (Kenevo/Genium)	L7510	Replace 2R20 Electronic Pylon on Ottobock Genium/Kenevo (include model #, original purchase date, reason for replacement, continued medical need & MSRP)
2R21 Axon Tube Adaptor w/Torsion (Kenevo/Genium)	² L5984 or L7510	(Initial claim only) Axial rotation unit, with or without adjustability Replace 2R21 Electronic Pylon w/Torsion on Ottobock Genium/Kenevo (include model #, original purchase date, reason for replacement, continued medical need & MSRP)

Disclaimer

¹The product/device “Supplier” (defined as an O&P practitioner, O&P patient care facility, or DME supplier) assumes full responsibility for accurate billing of Ottobock products. It is the Supplier’s responsibility to determine medical necessity; ensure coverage criteria is met; and submit appropriate HCPCS codes, modifiers, and charges for services/products delivered. It is also recommended that Supplier’s contact insurance payer(s) for coding and coverage guidance prior to submitting claims. Ottobock Coding Suggestions and Reimbursement Guides do not replace the Supplier’s judgment. These recommendations may be subject to revision based on additional information or alpha-numeric system changes.

² Coding and/or coverage restrictions may apply to this code. Please check with your payer.

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