Suggested Coding

The following codes are PDAC Verified for the C-Leg

L5828  SINGLE AXIS, FLUID (HYDRAULIC), SWING AND STANCE PHASE KNEE.
L5845  STANCE FLEXION FEATURE, ADJUSTABLE
L5848  FLUID STANCE EXTENSION DAMPING FEATURE
L5856  MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES SENSORS

Additional codes for the new functionality of C-Leg 4

Please check with your payer for coverage of these codes.

L5850  KNEE EXTENSION ASSIST
L5925  MANUAL LOCK
**L5999  ADDITION TO ENDOSKELETAL SYSTEM (OTTOBOCK 3C98 / 3C88 C-LEG), INERTIAL MOTION UNIT CONTROL FEATURE FOR INTUITIVE STANDING AND WALKING BACKWARDS.

Other codes that you might see on a C-Leg claim

L5920  ALIGNABLE SYSTEM (for a new prosthesis/replacement that needs realignment)
L5950/L5960  ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER, OR EQUAL) (when added to a socket)

**It is not recommended to bill L5999 to Medicare for Microprocessor Knees.

Manufacturer Suggested Retail Price (MSRP)

2020 MSRP for the Inertial Motion Control Unit miscellaneous (NOC) code is $5,000
C-Leg® Microprocessor Knee
Tips for Billing Private Payers

Billing Tips for the C-Leg Miscellaneous code - L5999

Because L5999 is an unlisted (NOC) code, the claim must have additional information to describe the
item. This will allow the payer to understand what you are billing for. Most payers require a narrative
be added to the claim (e.g. description, manufacturer, name & model#, serial number#, and MSRP).
Please check with your software vendor and payer for to confirm narrative placement.

Where to Put the Narrative

Electronic Claim

Notes can be added in 2 places; the 2300 Segment (pertains to the entire claim) and
the 2400 Segment (pertains to each line item). Note: Segments are limited to 80
characters each (including spaces).

2300 Segment:
Insert information here about the overall device you are billing for (socket, knee,
ankle, foot, etc.)
Example:
TF PROSTHESIS W/SOCKET, 3C98 C-LEG MP KNEE W/IMU, VS PYLON FOOT, CUST
LINER, COVER

2400 Segment:
Insert information here about each line item (L5999)
Examples:
ADDITION, INERTIAL MOTION CONTROL FEATURE ON OTTOBOCK 3C98 C-LEG MSRP
$5000

Paper Claim

Enter entire narrative on Line 19 when submitting a hand-written paper claim (CMS-
1500). Include the HCFA 1500 line number (1-6) that the L5999 code is located on.
Example:
TF PROSTHESIS W/SOCKET, 3C98 C-LEG, VS PYLON FOOT, CUST LINER, PROTECTIVE
COVER; Line 3: L5999 ADDITION, INERTIAL MOTION CONTROL FEATURE (ON
OTTOBOCK 3C98 C-LEG) MSRP $ 5,000.
C-Leg® Microprocessor Knee
Tips for Billing Private Payers

3 Reimbursement Amount

The reimbursement methodology for miscellaneous codes is generally stated in your contract with the payer. Miscellaneous codes are sometimes referred to as Not Otherwise Classified (NOC), Not Otherwise Specified (NOS) or Non-Assigned codes. The most common methodologies are:

- MSRP minus ___%
- Cost plus ___%
- Usual and Customary (average amount that you bill for similar devices)
- Average Regional Amount billed for similar devices
- Lesser of the above

It is highly recommended to carefully review your contract with the payer when providing a miscellaneous coded product. If the information is not in your contract, provider relations may be able to help.

Medical Review

Sometimes codes requiring narratives are sent to Medical Review regardless of proper claim submission. If this happens, you will need to submit all documentation (including proof of medical necessity and reason for replacement) as the claim will likely undergo medical necessity review.

References

1 The 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 are based on reasonable judgment and are not recommended to replace the Supplier’s judgment. These recommendations may be subject to revision based on additional information or alpha-numeric system changes.

2 The manufacturer’s suggested retail pricing (MSRP) is a suggested retail price only. Ottobock has provided the suggested MSRP in the event that third-party and/or federal healthcare payers request it for reimbursement purposes. ConThe practitioner and/or patient care facility is neither obligated nor required to charge the MSRP when submitting billing claims for third-party reimbursement for the product(s).


Contact

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