

Prosthetics Suggested Coding

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If you need help

Contact the Ottobock Reimbursement Team

- Call 800-328-4058 and ask for Reimbursement
- Email your request to reimbursement911@ottobock.com

Revision Effective

January 1, 2024

Item	Description		Suggested HCPCS Coding:
Feet			
1A1-2	Empower		L5973 + L5969 (Contact Reimbursement for assistance OR if payer does not list L5969) See Empower Reimbursement Guide Restrictions to Coding and/or Coverage may apply
1A30	Greissinger Plus Foot HH 10mm		L5972 + L5986 Restrictions to Coding and/or Coverage may apply
1A31	Greissinger Plus Foot only		L5972 Restrictions to Coding and/or Coverage may apply
1B1	Meridium		L5973 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C11	Terion K2		L5972 + L5986 Restrictions to Coding and/or Coverage may apply
1C20	ProSymes		L5981 Restrictions to Coding and/or Coverage may apply
1C30	Trias		L5981 + L5986 Restrictions to Coding and/or Coverage may apply
1C40	C Walk		L5981 Restrictions to Coding and/or Coverage may apply
1C50	Taleo		L5981 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C51	Taleo VS		L5987 + L5986 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C52	Taleo Harmony		L5987 + L5986 + L5781 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C53	Taleo LP		L5981 Restrictions to Coding and/or Coverage may apply
1C56	Taleo Adjust		L5981, L5990 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C58	Taleo Side Flex		L5981, L5986 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C60	Triton		L5981 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C61	Triton VS		L5986 + L5987 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C62	Triton H		L5986 + L5987 + L5781 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C63	Triton LP		L5981 Restrictions to Coding and/or Coverage may apply
1C64	Triton HD		L5981 Restrictions to Coding and/or Coverage may apply PDAC Verified
1C68	Triton side flex		L5981 + L5986 Restrictions to Coding and/or Coverage may apply PDAC Verified



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Item	Description		Suggested HCPCS Coding:
1D10	Dynamic Foot with Toes		L5972 Restrictions to Coding and/or Coverage may apply
1D11	Dynamic Foot Women 20mm Toes		L5972 Restrictions to Coding and/or Coverage may apply
1D35	Dynamic Motion		L5979 Restrictions to Coding and/or Coverage may apply
1E2	ProCarve Foot		L5999 Addition to LL Prosthesis, Ottobock 1E2 Procarve Foot MSRP\$__. See Coding-Billing Tips by visiting ProCarve Foot at shop.ottobock.us PDAC Verified
1E56	Axtion Prosthetic Foot		L5981 Restrictions to Coding and/or Coverage may apply
1E57	Lo Rider 09mm HH		L5981 Restrictions to Coding and/or Coverage may apply
1E58	Axtion DP		L5980 + L5986 Restrictions to Coding and/or Coverage may apply PDAC Verified
1E81	Chopart 09mm HH		L5976 Restrictions to Coding and/or Coverage may apply
1E87	Pediatric Chopart 06mm HH		L5976 Restrictions to Coding and/or Coverage may apply
1E90	Springlite Sprinter		L5999 Addition to LL Prosthesis, Ottobock 1E90 Sprinter Foot MSRP\$__. See Coding-Billing Tips by visiting 1E90 Sprinter Foot at shop.ottobock.us PDAC Verified
1E91	Runner		L5999 Addition to LL Prosthesis, Ottobock 1E91 Runner Foot MSRP\$__. See Coding-Billing Tips by visiting 1E91 Runner Foot at shop.ottobock.us PDAC Verified
1E93	Runner junior		L5999 Addition to LL Prosthesis, Ottobock 1E93 Runner Jr Foot at MSRP\$__. See Coding-Billing Tips by visiting 1E93 Runner Jr Foot at shop.ottobock.us PDAC Verified
1E95	Challenger		L5981 Restrictions to Coding and/or Coverage may apply PDAC Verified
1G6	Cosmetic Light Foot with Toes		Included in base code For Replacement use L5971
1H38	Single Axis Foot only Men 10mm Toes		L5974
1H40	Single Axis Foot Only		L5974
1K10	Otto Bock Dynamic Foot for Children		L5972
1M10	1M10 Adjust incl Footshell		L5972 + L5986 Restrictions to Coding and/or Coverage may apply
1P9	Pirogoff Foot		L5970
1S101	SACH Foot		Included in base code For Replacement use L5971
1S30	SACH Foot Child Medium		Included in base code For Replacement use L5971
1S66	SACH Foot Men 18mm Toes		Included in base code For Replacement use L5971
1WR95	Foot for water resistant prosthesis		L5972
2C15	Taleo Foot Shell		Initial included in foot code, Replacement L5999


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Item	Description	Suggested HCPCS Coding:
2Z500	Sole Kit for the 1E90 Sprinter	Initial L5999 Replacement: L7510
2Z501	Sole Kit w/ Spikes for the 1E90 Sprinter	Initial L5999 Replacement: L7510
2Z540=6	Allround Sole for Runner	Initial L5999 Replacement: L7510
2Z541=6	Spike Pad for Runner	Initial L5999 Replacement: L7510
F21	Maverick Xtreme AT	L5981 Restrictions to Coding and/or Coverage may apply
F22	Maverick Comfort AT	L5981, L5986 Restrictions to Coding and/or Coverage may apply
F23	Maverick VS	 L5987 + L5986 Restrictions to Coding and/or Coverage may apply PDAC Verified
FS3	Defender	L5981 Restrictions to Coding and/or Coverage may apply
FS6	Nitro Running Tall	L5999
FS6-00-P0014-00 /FS9-00-I	Replacement Tread Nitro, Catapult	L7510 for replacement
FS9	Nitro Running Short	L5999
FTC-2A-1xxxx-S*	Foot Shell, Maverick	L7510 for replacement
FTC-2B=* /3B=*	Foot Shell, K2	L7510 for replacement
FTC-2H=* /-2M=*	Foot Shell Generation 2	L7510 for replacement
FTC-3A-1*	Foot Shell, Maverick	L7510 for replacement
FTC-3M-0* /-1*	Foot Shell, Generation 3	L7510 for replacement
FX6	Catapult Running	L5999
FX6-PS*	Catapult Power Spring Repl	L7510 for replacement
KIT-00-11* /113* /114* /121*/141*	Heel Wedges	L7510 for replacement
KIT-00-12201-00	Heel Wedges	L7510 for replacement
KIT-00-20000-00	Protective Ankle Cover for Freestyle Swim	L7510 for replacement
LP2-W2	Freestyle Swim	L5981 Restrictions to Coding and/or Coverage may apply
R11	Renegade AT	L5981 Restrictions to Coding and/or Coverage may apply
R16	Renegade LP-AT	L5981 Restrictions to Coding and/or Coverage may apply
RS1-SP-0* /RS6-SP-0*	Sole Plate for Renegade	L7510 for replacement
RS4-SP* /R14-SP*	Sole Plate for Silhouette	L7510 for replacement
RS5=0_B	Silhouette LP	L5980 Restrictions to Coding and/or Coverage may apply
VS4	Kintrol	L5972, L5968 Restrictions to Coding and/or Coverage may apply
VS5	Restore	L5972, L5986 Restrictions to Coding and/or Coverage may apply

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Item	Description	Suggested HCPCS Coding:
High Activity Knees		
3B1	Genium	Private Payer: L5999 Restrictions to Coding and/or Coverage may apply
3B5	Genium X3	Private Payer: L5999 Restrictions to Coding and/or Coverage may apply
3C88/3C98	C-Leg 4	 L5828 + L5845 + L5848 + L5856 Restrictions to Coding and/or Coverage may apply PDAC Verified
3R2	ProCarve knee joint	L5830 + L5845 + L5848 + L5925 + L5930 Restrictions to Coding and/or Coverage may apply
3R46	Polycntr. Knee Joint for KD, Titan.	L5613 Restrictions to Coding and/or Coverage may apply
3R55	Polycntr. Hydr. Knee Joint, Titan.	L5613 Restrictions to Coding and/or Coverage may apply
3R80	Modular Knee Joint with Rotary Hydraulic	 L5828 + L5845 + L5850 + L5925 Restrictions to Coding and/or Coverage may apply PDAC Verified
3R95	Lightweight Hydraulic Knee	L5826 Restrictions to Coding and/or Coverage may apply
3S80	Modular Sports Knee	L5824 + L5925 + L5930 Restrictions to Coding and/or Coverage may apply

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Item	Description	Suggested HCPCS Coding:
Hip Joints		
7E10	Helix3D Hip Joint	 L5331/L5341 (Base) + L5961 Restrictions to Coding and/or Coverage may apply PDAC Verified
7E4	Modular Hip Joint -Free Motion-	L5331/L5341 (Base) + L5855
7E5	Modular Single Axis Hip Joint	L5331/L5341 (Base)
7E7	Modular Hip Joint Free Mot. Titan	L5331/L5341 (Base) + L5855
7E8	Modular Hip Joint-Child	L5331/L5341 (Base) + L5855
7E9	Hydraulic Hip Joint	Private Payer: L5331/L5341 (Base) + L5999

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Item	Description	Suggested HCPCS Coding:
Low Activity Knees		
3P19	Knee-Shin Component	L5712
3P4	Knee-Shin Component	L5710
3R15	Single Axis Knee Joint, Break	L5812 + L5850
3R17	Single Axis Knee Joint, Lock	L5810 + L5850
3R30	Polycntr. Knee Joint for KD, Titan.	L5611 + L5850
3R31	Prosedo modular knee joint	L5811 + L5845
		Restrictions to Coding and/or Coverage may apply
3R32	Polycntr. Knee for KD, Lock, Titan.	L5816
3R33	Single Axis Knee Joint, Lock, Titan.	L5811 + L5850
3R36	Polycntr. Knee Joint, Titan.	L5611 + L5850
3R40	Lightweight Knee Joint, Lock	L5811
3R41	Modular Knee Joint	L5811
3R49	Single Axis Knee Joint, Brake Titan.	L5812 + L5850
3R62	Pheon - Modular Knee Joint	L5611 + L5845 + L5850 + L5925
3R90	Comfort-Brake Knee (mech Ext. Assist)	L5812 + L5845 + L5850
3R93	Modular Brake Knee Joint with Lock	L5812 + L5845 + L5850 + L5925

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Item	Description	Suggested HCPCS Coding:
Lower Limb Accessories (Pylons, Batteries, Chargers, Protective Covers)		
1288	Opra Axor II Connection Device	L5991 (Contact Reimbursement for assistance OR if payer does not list L5991)
2R102	Titanium Clamp (34mm)	L5940 (BK), L5950 (AK) or L5960 for (hip)
2R17	AXON Tube Adapter	Initial: included in Knee code + L5984 for torsion unit Replacement: L7510
2R19	AXON Tube Adapter	L7510 for replacement
2R20	AXON Tube Adapter	L7510 for replacement
2R21	AXON Tube Adapter with Torsion	Initially included in MP Knee code + L5984 for torsion unit For Replacement use L7510
2R49=AL	Tube Adapter	Initially included in L5856 or L5858 For Replacement use L7510
2R57	Tube Adapter	Initial: Included in Knee code Replacement: L7510
2R67	Tube Adapter with Torsion	Initial: included in Knee code + L5984 for torsion unit Replacement: L7510
2R81	C-Leg Tube Adapter with Torsion Unit	Initially included in L5856/L5858 plus L5984 for the Torsion unit For Replacement use L7510
2R82	Tube Adapter	Initially included in L5856 or L5858 For Replacement use L7510
3F1=1	Functional Cosmesis C-Leg	Initial: L5705 (requires Functional Stocking = 99B120*) Replacement: L7510
3F1=1-N	Functional Cosmesis C-Leg (knee part)	Replacement: L7510
3F1=2	Functional Cosmesis Genium	Initial: L5705 (requires Functional Stocking = 99B120*) Replacement: L7510
3F1=2-N	Functional Cosmesis Genium (knee part)	Replacement: L7510
3R24	Foam Cover, AK	L5705
3R48	Foam Cover, AK/HD	L5705 AK / L5707 HD
3S106* /124*	Foam Cover, AK	L5705
3S107	Foam Cover, AK/KD	L5705 AK / L5706 KD
3S26=*	Foam Cover, AK	L5705
3S27=*	Foam Cover, Hip	L5707
4E60	Inductive Charger	Replacement: L7368 (includes 757L16-4 AC Adapter)
4E70	Inductive Charger	Replacement: L7368 (includes 757L16-4 AC Adapter)
4P862	C-Leg Guard w/ Shield	Private Payer: L5999 (includes 4P863=* Shield Insert) Restrictions to Coding and/or Coverage may apply
4P863=*	Shield Insert (replacement)	Initial: included in protective cover code Replacement: L7510
4R10=111	Quickchange	L5617 Replacement: L5617
4R11	Quickchange (connecting + base element)	L5617 Replacement: L5617

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Item	Description	Suggested HCPCS Coding:
4R11=P-1-1	Quickchange connecting element with pyramid	L5617 (when used w/base element) Replacement: L5617 (for complete Quickchange) Replacement: L7510 (for base element only) Additional limb component: L5999
4R11=R-1-1	Quickchange connecting element with pyramid rece	L5617 (when used w/base element) Replacement: L5617 (for complete Quickchange) Replacement: L7510 (for base element only) Additional limb component: L5999
4R11=R-3-2	Quickchange base element	L5617 (when used w/connecting element) Replacement: L5617 (for complete Quickchange) Replacement: L7510 (for connecting element only) Additional limb component: L5999
4R11=ST-1-1	Quickchange connecting element with thread	L5617 (when used w/base element) Replacement: L5617 (for complete Quickchange) Replacement: L7510 (for base element only) Additional limb component: L5999
4R11=ST-2-1	Quickchange connecting element with thread for m	L5617 (when used w/base element) Replacement: L5617 (for complete Quickchange) Replacement: L7510 (for base element only) Additional limb component: L5999
4R120	DeltaTwist	L5988 + L5984
4R39	Torsion Adapter	L5984
4R40	Torsion Adapter	L5984
4R57, 4R57=WR	Rotation Adapter	L5926 (contact Ottobock Reimbursement if your payer does not have L5926 on their fee schedule)
4R82	Titanium Adapter (34mm)	L5940 (BK), L5950 (AK) or L5960 for (hip)
4R85	Torsion Adapter	L5984
4R86	Torsion Adapter	L5984
4X160	C-Leg Protector	Private Payer: L5999 Restrictions to Coding and/or Coverage may apply
4X840	Kenevo Protective Cover	Private Payer: L5999 Restrictions to Coding and/or Coverage may apply
4X860	C-Leg Protective Cover w/Shield	Private Payer: L5999 (includes 4P863=* Shield Insert) Restrictions to Coding and/or Coverage may apply
4X860=*	C-Leg Protective Cover	Private Payer: L5999 (includes 4P863=* Shield Insert)
4X880	Genium Protective Cover	Private Payer: L5999 Restrictions to Coding and/or Coverage may apply
6R6	Foam Cover, BK/KD	L5704 BK / L5706 KD
6R7 /8* /18*	Foam Cover, BK	L5704
757B38	Empower Battery	Initial included in L5973 Replacement: L7367
757L16-4	AC Aapter	Replacement: L7510 for adapter only
757L38	Empower Charger	Initial included in L5973 Replacement: L7368
757L39	Empower Charger Power Supply Cord	Initial included in L5973 Replacement: L7368 (when combined with 757L38) Replacement: L7510 (if purchased without 757L38)
99B116	SoftTouch Protective Outer Surface Cover	L5962 Restrictions to Coding and/or Coverage may apply
99B120=*	Functional Stocking	Replacement: A4467
99B14	Cosmetic Stockings	A4467 Restrictions to Coding and/or Coverage may apply

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Item	Description	Suggested HCPCS Coding:
99B16	Cosmetic Stockings	A4467 Restrictions to Coding and/or Coverage may apply
Moderate Activity Knees		
3C60	Kenevo	L5828 + L5845 + L5848 + L5856 Restrictions to Coding and/or Coverage may apply PDAC Verified
3R106	Modular Knee Joint, servo-pneumatic	L5840 + L5850 Restrictions to Coding and/or Coverage may apply
3R60	Modular Polycentric EBS Knee Joint	L5814 + L5845 + L5848 Restrictions to Coding and/or Coverage may apply PDAC Verified as L5814 + L5848
3R60-PRO	EBS-PRO-Knee	L5814 + L5845 + L5848 Restrictions to Coding and/or Coverage may apply PDAC Verified as L5814 + L5848
3R78	Modular Knee Joint, pneumatic	L5840 + L5850 Restrictions to Coding and/or Coverage may apply
3R85	Dynion	L5828, L5845, L5850, L5925, L5848 Restrictions to Coding and/or Coverage may apply
3R92	Comfort-Brake Knee (pneumatic system)	L5822 + L5845 + L5850 Restrictions to Coding and/or Coverage may apply
3WR95	Aqua Knee	L5826 + L5925 Restrictions to Coding and/or Coverage may apply
Pediatric Knees		
3R38	Single Axis Knee Joint Children	L5850
3R39	Knee Joint Children, Lock	L5811
3R65	Single Axis Knee Joint, Children	L5826 Restrictions to Coding and/or Coverage may apply
3R66	Polycntr. Knee Joint, Children	L5611 + L5850 + L5984
3R67	Children's knee joint	L5814 Restrictions to Coding and/or Coverage may apply
Socket Technology		
21A37	Cable Housing	L5695
21Y12	Threaded Valve W/Housing	L5647 or L5652 or L6686
21Y14	Push Valve	L5647 or L5652 or L6686
21Y21	Click Valve	L5647 or L5652 or L6686
451F10	Prosthetic Shrinker Sock - TT - CCL2	L8440
451F11	AK Prosthetic Shrinker	L8460
451F18 /19	Sock w/ Hole	L8420 (BK) or L8430 (AK)
451F21=*	Nylon Sheath	L8400 (BK) or L8410 (AK)
451F24 /25/ 26 /27	Thin-Thick Prosthetic Sock - Multiply	L8420 (BK) or L8430 (AK)
451F39	Soft Sock X-Static	L8420 (BK) or L8435 (Upper Limb)
451F4	Special Prosthetic sock	L8400 (BK) or L8410 (AK)
451F6	Special Prosthetic sock	L8420 (BK) or L8430 (AK)
452A1	ProSeal Ring	L5652 (socket code)
453A1	Derma Protection ArmComfort	L7499 - suspension/sealing sleeve, with or without valve, any material; Similar to L5685
453A2	Derma Protection Knee Comfort	L5685 Restrictions to Coding and/or Coverage may apply
453A3	Derma ProFlex	L5685 Restrictions to Coding and/or Coverage may apply
453A30	ProFlex Plus Sleeve - regular	L5685 Restrictions to Coding and/or Coverage may apply
453A4	Derma ProFlex short	L5685 Restrictions to Coding and/or Coverage may apply
453A40	ProFlex Plus Sleeve - short	L5685 Restrictions to Coding and/or Coverage may apply

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Item	Description	Suggested HCPCS Coding:
453D2 /D4 /D5	Derma Seal Gel Sock	L8417
454A7	Harmony Sleeve	L5685
454A8	Harmony Tapered Sleeve	L5685
4R144	Harmony P2	L5781 + L5984 + L5988 Restrictions to Coding and/or Coverage may apply
4R147=K	Harmony P3	L5781 + L5984 + L5988 Restrictions to Coding and/or Coverage may apply
4R152	Harmony E2	L5781 Restrictions to Coding and/or Coverage may apply
4R160	Delrin KISS Kit	L5671
4R180	Harmony P4 Vacuum Pump	L5781 + L5984 + L5988 Restrictions to Coding and/or Coverage may apply
4R181	Harmony P4 Vacuum Pump HD	L5782 + L5984 + L5988
4R182	Harmony P4 Modular	L5781 + L5984 + L5988 Restrictions to Coding and/or Coverage may apply
4R183	Harmony P4 HD modular	L5782 + L5984 + L5988 Restrictions to Coding and/or Coverage may apply
4R220	Dynamic Vacuum System	L5781 Restrictions to Coding and/or Coverage may apply
5A60	Varos Socket -Pin	Definitive: L5321 + L5649 + L5650 + L5920 + L5950 + L5671 (+ L5673 for 6Y200 Varos Liner) Replacement: L5701 + L5649 + L5650 + L5950 + L5671 (+ L5673 for 6Y200 Varos Liner) Preparatory: L5585 + L5649 + L5650 + L5950 + L5671 (+ L5673 for 6Y200 Varos Liner)
6A100	Pro Push Lock w/2 Plunger Pins	L5671
6A30=*	Shuttle Lock	L5671
6A40	MagnoFlex Lock - US Version	L5671
6S400	EMS Multi-Surface Flexible Inner Socket	L5645 or L5651 or L5653
6Y100	Hybrid Liner	L5679
6Y110; 6Y111	Skeo Sealing and Skeo Sealing 3D Liners (TF/AK)	L5679
6Y200=*	Varos Liner	L5673
6Y400	Custom BK Liner-Cast	L5681 or L5683 for initial liner Additional/future liners from same mold: L5673 or L5679
6Y41	Skeo Pure (TT/BK)	L5679
6Y42	Skeo (TT/BK)	L5673
6Y43	Skeo Pure	L5673
6Y510	Profile PUR Liner	L5679
6Y512	Anatomic 3D PUR Liner	L5679
6Y520	Simplicity PUR Liner	L5679
6Y522	Simplicity Tapered PUR Liner	L5679
6Y523	Simplicity Tapered PUR Liner	L5679
6Y70	Skeo (TT/BK)	L5673
6Y700	Skeo Unique BK Standard	L5681 or L5683 for initial liner Additional/future liners from same mold: L5673 or L5679
6Y75	Skeo Skinguard (TT/BK)	L5673
6Y78	Skeo 3D (TT/BK)	L5673
6Y80	Skeo (TF/ AK)	L5673
6Y81	ProSeal SIL Liner	L5679
6Y85	Skeo Skinguard (TF/AK)	L5673
6Y88	Skeo 3D (TT/BK)	L5673
6Y90	Basic TPE Liner	L5673
6Y92	TPE Liner	L5679
6Y93	Balance TPE Liner	Cushion Liner: L5679 Locking Liner: L5673

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Item	Description	Suggested HCPCS Coding:
6Y94	Liner – Dynamic Vacuum	L5679
6Y95	Caleo 3D	Cushion Liner: L5679 Locking Liner: L5673

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Item	Description	Suggested HCPCS Coding:
Upper Extremity Accessories		
12K20	Elbow Set-Up	Included in base code
12K39	Automatic Forearm Balance (AFB)	L6693
13E200	Electrode	Included in base code Use L7510 for replacement
13E202	Suction Socket Electrode	Included in base code Use L7510 for replacement
13E205	MyoRotronic	Included in base code Use L7510 for replacement
13E210	Power Pack for Dynamic Arm	Initial included in base code Replacement use L7367
13G9=59	Upper Arm Rotation Piece	Included in base code
13R1=L	Modular Elbow Joint	Included in base code
14A1	Lock Set	L6698
14Y5	Silicone Arm Liner with CVD coating	L6694
16X4	Stainless Steel Elbow Joint Bars	For transradial use L6605 Elbow disarticulation and above elbow are included in the base code
21A47	Active TH Harness	L6672
21A48	Armloop for 21A47	Suggested HCPCS Coding: Included in the harness code (L6672) Replacement: L7510
6Y455	Custom Liner Upper Extremity	For Initial use L6696 or L6697 For other than initial use L6694 or L6695
757B13	Interchangeable Battery	Initial included in base code Replacement use L7360
757B15	X-ChangePack	L7360 - Replacement Only
757B20	Otto Bock EnergyPack	L7367 - Replacement Only
757B21	Otto Bock EnergyPack	L7367 - Replacement Only
757B35	MyoEnergy Integral	L7367
757B501	AxonEnergy Integral	L7367
757L13	Pulse Battery Charger	Initial included in base code Replacement use L7362
757L14	Pulse Battery Charger	Initial included in base code Replacement use L7362
757L20	Li-Ion Battery Charger	L7368 - Replacement Only
757L24	DynamicArm charger	L7368
757L35	MyoCharge Integral	L7368 - Replacement Only
757L500	AxonCharge Integral	L7368
757L60	Universal Charger	Initial included in base code Replacement use L7368
8S11	System Cosmetic Glove f. Adolescents/Men	L6890
8S11N	MyoSkin Natural	L6890
8S12	Cosmetic Glove - Women	L6890
8S12N	MyoSkin Natural	L6890
8S13	Syst. Cosm. Glove f. Child./Adoles./Wom.	L6890
8S13N	MyoSkin Natural	L6890
8S20	Cosmetic Glove	L6890
8S20N	MyolinoSkin Natural	L6890
8S4	Cosmetic Glove - Men	L6890
8S5	Cosmetic Glove for Women	L6890
8S500	AxonSkin - Glove	L6890
8S501	AxonSkin Natural	L6890
8S502	AxonSkin Natural	L6890
8S511	AxonSkin Silicone Glove	L6890
8S6	Cosmetic Glove	L6890



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Item	Description	Suggested HCPCS Coding:
8Y1	Pincer	L6810
9E370	4in1 Controller LS	Included in base code
9E375=R	Switch	Included in base code for switch controlled device. Use L6611 if added to Myo device
9E420	7in1 Controller	Included in base code
9X14	Harness Pull Switch	Included in base code for switch controlled device. Use L6611 if added to Myo device
9X18	Cable Pull Switch	Included in base code for switch controlled device. Use L6611 if added to Myo device
9X25	Rocker Switch	Included in base code for switch controlled device. Use L6611 if added to Myo device
9X37	Pressure Switch	Included in base code for switch controlled device. Use L6611 if added to Myo device
9X50	Linear Transducer	Included in base code Use L6611 when used as additional switch
9X51	4-Step Transducer	Included in base code for switch controlled device. Use L6611 if added to Myo device
9X52	Linear Transducer	Included in base code Use L6611 when used as additional switch
9X53	4-Step Transducer	Included in base code for switch controlled device. Use L6611 if added to Myo device
OC1560	Donning Sheath EasyFit Arm	L7600

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Item	Description	Suggested HCPCS Coding:
Upper Extremity Body Powered		
10A30	Adapter for 10V39	L6616 Adapter may be used with other terminal devices
10A43	Attachment Plate	L6616
10A56	Attachment Plate with short Stud	L6616
10R3	Adapter with Flexion	L6620
10R4=1/2"-20	Hand Adapter	L6616
10R4=M12X1.5	Adapter Plate	L6616
10R5	Adapter	L6616
10V30	Wrist Unit - Ratchet Type Rotation,short	L6615 + L6630
10V36	Otto Bock Friction Wrist Unit	Included in base code
10V39	MovoWrist Flex	L6624
10V8	Wrist Unit - Ratchet Type Rotation	L6615 + L6630 Attachment plate required to use L6615
12A13	Elbow Joint	Included in base code
12K41	ErgoArm	Included in base code
12K42	ErgoArm plus	Base Code + L6693
12K49=50	Forearm	Included in base code
12K5	Elbow Set-Up	Included in base code
12R6	Modular Kit Transhumeral	Included in base code
12R7	Modular Kit Shoulder Disarticulation	Included in base code
12S6	MovoShoulder Swing	L6646
13Z157	Carbon Shell	Private Payer: L7499 Contact reimbursement for assistance 800 328 4058 / reimbursement911@ottobock.com

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Item	Description		Suggested HCPCS Coding:
21A35=1	Triple-Control Above-Elbow Harness-Perlon	PDAC Verified 	L6677 PDAC Verified
21A35=2	Triple-Control Above-Elbow Harness-Steel	PDAC Verified 	L6677 + L6655 PDAC Verified for L6677
21A36	Below-Elbow Harness		L6675 + L6655
8K19	Otto Bock System Hand -passive-		L6708
8K23	Otto Bock System Hand -voluntary opening		L6708
8K27	Otto Bock System Hand -voluntary closing		L6709
8S7	passive inner Hand		L6703
8S8	Inner Hand for Women		L6703
8S9	Inner Hand for Children		L6703

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Item	Description	Suggested HCPCS Coding:
Upper Extremity Myoelectrics and Hybrid		
10S1	Lamination Ring	If used with coupling (10S4): L6629
10S17	Electric Wrist Rotator	L7259
10S4	Coupling Piece	If used with lamination ring (10S1): L6629
10V38	MyoWrist Transcarpal	L6621
10V40	MyoWrist 2Act	L6621
11S47	Quick Disconnect Adapt w/ 1/2"-20	L6628
12K100	DynamicArm	Base Code + L6693* Add L7180 for Sequential Ctrl/L7181 for Simultaneous Ctrl *A-N Panel issued add-on code L6693 for DynamicArm's forearm counterbalance feature in 2007
12K102	Forearm with Sensor	Included in base code
12K110	DynamicArm Plus	Base Code + L6693* Add L7181 for Simultaneous Ctrl *A-N Panel issued add-on code L6693 for DynamicArm's forearm counterbalance feature in 2007
12K44	ErgoArm Hybrid plus	Base Code + L6693
12K50	ErgoArm Electronic plus	Base Code + L6693 + L6638
12K501	AxonArm Ergo	Private Payer: Base Code + L6693 + L6638 + L7499
12V10	Tube Valve for Suction Socket	Code socket with L6686
13E100	AnalogAdapter	Included in base code Use L7510 for replacement
8E33	System Electric Greifer DMC VariPlus	L7009 + L6882 + L6621 (L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, servicing, etc.)
8E34=9-1	System Electric Greifer DMC VariPlus	L7009 + L6882 + L6621
8E38=6	System Electric Hand DMC Plus with QD Wrist	L7007 + L6882 (L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing)
8E38=7	System Electric Hand Digital Twin with QD Wrist	L7007 + L6882 (L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing)
8E38=8	SensorHand Speed with QD Wrist	L7007 + L6881 + L6882 (L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing)
8E38=9	MyoHand VariPlus Speed with QD Wrist	L7007 + L6882 (L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing)
8E39=6	System Electric Hand DMC Plus with Lamination Ring	L7007 + L6882
8E39=8	SensorHand Speed with Lamination Ring	L7007 + L6881 + L6882
8E39=9	MyoHand VariPlus Speed with Lamination Ring	L7007 + L6882
8E41=9	MyoHand VariPlus Speed with Threaded Stud	L7007 + L6882

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Item	Description	Suggested HCPCS Coding:
8E41=9 -F	MyoHand VariPlus Speed with Myoflex QD Wrist	L7007 + L6882 + L6621 (L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing)
8E44=6	Transcarpal Hand DMC Plus with Lamination Plate	L7007 + L6882
8E44=6 -F	Transcarpal Hand DMC Plus with Myoflex QD Wrist	L7007 + L6882 + L6621 (L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing)
8E500	Michelangelo Hand	Private Payer: L7499 + L6882 + L6881 + L6629 + L6890 + Wrist (9S501 wrist=L6624), (9S503 wrist=L6624 + L7259 + L6882)
8E550	Michelangelo Hand Transcarpal	Private Payer: L7499 + L6881 + L6882 + L6890
8E600	AxonHook	Private Payer: L7499 + L6882 + L6881 + L6629 + Wrist (9S501 wrist=L6624), (9S503 wrist=L6624 + L7259 + L6882)

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Item	Description		Suggested HCPCS Coding:
8E70=*	bebionic Hand, EQD Wrist		L6880 L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing PDAC Verified
8E71=*	bebionic Hand, Short Wrist		L6880 PDAC Verified
8E72=*	bebionic Hand, Flex EQD Wrist		L6880 + L6621 L6629 may be added to the prosthesis for a lamination collar with coupling used for quick disconnect for terminal device interchange, cleaning, or servicing PDAC Verified
8S710=*	Bebionic glove		L6890
8S711=*	Bebionic glove		L6890
9S266	Hand Chassis with Quick Disconnect Wrist		L6615
9S317-2=1-6	bebionic Modular replacement finger, Pinky		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S317-2=1-7	bebionic Modular replacement finger, Pinky		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S317-2=2-6	bebionic Modular replacement finger, Ring		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S317-2=2-7	bebionic Modular replacement finger, Ring		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S317-2=3-6	bebionic Modular replacement finger, Middle		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S317-2=3-7	bebionic Modular replacement finger, Middle		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S317-2=4-6	bebionic Modular replacement finger, Pointing		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S317-2=4-7	bebionic Modular replacement finger, Pointing		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S366-2=1-7	bebionic Modular replacement finger, Pointing		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S366-2=2-7	bebionic Modular replacement finger, Pinky		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S367-2=1-7	bebionic Modular replacement finger, Middle		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S367-2=2-7	bebionic Modular replacement finger, Ring		L7499 / L7510 (Check with payer for correct coding) See Coding and Billing Tips
9S501	AxonRotation - Passive		L6624
9S503	AxonRotation – Active Rotation		L6624 + L7259 + L6882
BB BATTERY-SPLIT CELL	Split cell battery		Replacement L7367

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Item	Description	Suggested HCPCS Coding:
Upper Extremity Pediatric		
10R2	Adapter	Included in base code If used with ball shoulder joint (12S7) use L6650
10V51	MyolinoWrist 2000	L6621
12K12	MovolinoArm Friction	Included in base code
12K19	Elbow Set-Up for Children	Included in base code
12S4	Otto Bock Shoulder Joint	L6645
12S7	Otto Bock Ball Shoulder Joint	L6650 with Adapter
8E51	Electric Hand 2000	L7008 + L6882
8K5	Physolino Babyhand	L6703

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