



Pro-Flex® Terra

Reimbursement Guide



Coding and Coverage

CODING

Össur suggests* the following L codes for Pro-Flex Terra:

For Claims Submitted to All Payers Except the VA

L5999 - All lower extremity prostheses, foot, pre-tensioned carbon unit with single anchor point and gliding contact pad, compressed and stepped foam heel bumper, separate carbon keel

For Claims Submitted to the VA

L5999 - Össur Pro-Flex Terra prosthetic foot

**The health care provider is solely responsible for submitting appropriate codes and charges for care provided. Össur's coding suggestions do not guarantee coverage or payment. Coverage requirements and coding are subject to change without notice. This information is provided for informational purposes only.*

To obtain the current MSRP for Pro-Flex Terra, please contact your Össur sales representative.

Because L5999 does not have a set fee schedule amount, *you must look at the contract between your facility and the relevant payer* - e.g., commercial insurance, workers compensation, the VA - to understand how it will calculate payment for this code. Medicare does not have a public methodology for calculating fees for L5999. The DME MAC responsible for processing your claim will determine payment on an “individual consideration” basis.

When billing Pro-Flex Terra on the CMS 1500 claim form, make sure to fill out the following:

Box 19: Enter description of Pro-Flex Terra within the 71 character limit

For commercial insurance/workers comp/Medicare: “Foot, pretensioned carbon unit w single anchor pt/gliding contact pad”

For the VA: “Össur Pro-Flex Terra prosthetic foot”

Box 21: The appropriate ICD-10 diagnosis code based upon documented medical records

Box 24D: L5999

When billing Pro-Flex Terra electronically:

Loop 2400 (line note), segment NTE02 (NTE01=ADD) of the ANSI X12N, version 5010A1 professional electronic claim format:

For commercial insurance/workers comp/Medicare: “Foot, pretensioned carbon unit w single anchor pt/gliding contact pad”

For the VA: “Össur Pro-Flex Terra prosthetic foot”

Clinical Evidence Supporting Pro-Flex Terra

Clinical Challenge	Supporting Research
Fatigue	Energy storing and return feet like Pro-Flex Terra require less effort to walk than non-ESAR feet. ^{1, 2, 3, 4}
Excessive impact and shock on residual limb joints	ESAR feet like Pro-Flex Terra decrease vertical force on the affected side, reducing impact and shock on those joints. ^{5, 6, 7}

In addition, new evidence suggests Pro-Flex-Terra provides both (1) an increased range of ankle motion and (2) greater push-off force when compared to current advanced ESAR feet.^{8, 9, 10}

[1] Czerniecki JM, Gitter A, Munro C. Joint moment and muscle power output characteristics of below knee amputees during running: the influence of energy storing prosthetic feet. *J Biomech.* 1991;24(1):63-75.

[2] Macfarlane PA, Nielsen DH, Shurr DG, Meier K. Perception of walking difficulty by below-knee amputees using a conventional foot versus the Flex-Foot. *JPO J Prosthet Orthot.* 1991 Spring;3(3):114-119.

[3] Macfarlane PA, Nielsen DH, Shurr DG. Mechanical gait analysis of transfemoral amputees: SACH foot versus the Flex-Foot. *JPO J Prosthet Orthot.* 1997 Fall;9(4):144-151.

[4] Macfarlane PA, Nielsen DH, Shurr DG, Meier KG, Clark R, Kerns J, Moreno M, Ryan B. Transfemoral amputee physiological requirements: Comparisons between SACH foot walking and Flex-Foot walking. *JPO J Prosthet Orthot.* 1997 Fall;9(4):138-143.

[5] Runciman P, Cockcroft J, Derman W. A novel pivot ankle/foot prosthesis reduces sound side loading and risk for osteoarthritis: a pragmatic randomized controlled trial. *Prosthet Orthot Int.* 2022 Jun 1;46(3):258-266. doi:10.1097/PXR.000000000000079. Epub 2022 Jan 10. PMID: 35019886; PMCID: PMC9201932.

[6] Pröbsting E, Altenburg B, Bellmann M, Krug K, Schmalz T. How does ankle power on the prosthetic side influence loading parameters on the sound side during level walking of persons with transfemoral amputation? *Prosthet Orthot Int.* 2022 Aug 1;46(4):306-313. doi:10.1097/PXR.000000000000099. Epub 2022 Mar 22. PMID: 35315835; PMCID: PMC9376874.

[7] Powers CM, Torburn L, Perry J, Ayyappa E. Influence of prosthetic foot design on sound limb loading in adults with unilateral below-knee amputations. *Arch Phys Med Rehabil.* 1994 Jul;75(7):825-829. PMID: 8024435.

[8] Starker F. Can machine-based tests predict prosthetic foot performance outcomes and user experience? Presented at: OT World Congress; May 15, 2024; Leipzig, Germany. Abstract 108.

[9] Ármannsdóttir AL. Biomechanical evaluation of functionally demanding gait tasks, comparing a novel prosthetic foot to a conventional ESAR prosthetic foot. Presented at: OT World Congress; May 15, 2024; Leipzig, Germany. Abstract 294.

[10] Wolf S. A novel prosthetic foot addressing both high activity and everyday use: A case report. Presented at: OT World Congress; May 15, 2024; Leipzig, Germany. Abstract 243.

Physician Documentation

Medicare has issued guidance to physicians detailing the type of documentation that they must include in their medical records in order for a patient to receive prosthetic or orthotic care. Medicare requires physicians to document the following findings for people with limb loss/difference:

- The patient's *current* functional capabilities, *expected* functional potential, and an explanation for the *difference* between the two if there is one.

NOTE: For individuals with limb loss, functional capabilities are described by 5 “K-levels.” The physician’s notes must contain patient-specific information supporting K-level designation.

K0: Cannot walk/transfer - would not benefit from a prosthesis

K1: Ability or potential to use prosthesis for walking/transfers in the home only

K2: Ability or potential to use prosthesis for limited community walking

K3: Ability or potential to use prosthesis for variable cadence walking in the community without limitation

K4: Ability or potential to use prosthesis beyond basic ambulation (e.g., child, active adult, or athlete).

- The patient’s motivation to ambulate.
- Other ambulatory assistance currently used, if any
- Description of ADL’s and how they are impacted by the identified deficits
- Musculoskeletal exam (arm and leg strength/ROM)
- Neurological exam
 - Gait
 - Balance and coordination

In addition, if the physician has reviewed the prosthetist’s medical record for their mutual patient and is in agreement with his/her findings, a statement of concurrence with the prosthetist’s findings is both appropriate and helpful in ensuring that their mutual patient receives timely and appropriate prosthetic care.

FOLLOW ÖSSUR ON



USA (800) 233-6263
WWW.ÖSSUR.COM

CANADA (800) 663-5982
WWW.ÖSSUR.CA

