

Prosthetic Devices, DME 21

Table of Content

[Description & Definitions](#)
[Criteria](#)
[Document History](#)
[Coding](#)
[Special Notes](#)
[References](#)
[Keywords](#)

<u>Effective Date</u>	8/1/2025
<u>Next Review Date</u>	05/2026
<u>Coverage Policy</u>	DME 21
<u>Version</u>	9

All requests for authorization for the services described by this medical policy will be reviewed per Early and Periodic Screening, Diagnostic and Treatment (EPSDT) guidelines. These services may be authorized under individual consideration for Medicaid members under the age of 21-years if the services are judged to be medically necessary to correct or ameliorate the member's condition. Department of Medical Assistance Services (DMAS), Supplement B - EPSDT (Early and Periodic Screening, Diagnosis and Treatment) Manual.*

Description & Definitions:

A prosthetic is an artificial substitute or replacement of a part of the body.

Functional classification levels:

- Level 0: Does not have the ability or potential to ambulate or transfer safely with or without assistance and a prosthesis does not enhance their quality of life or mobility.
- Level 1: Has the ability or potential to use a prosthesis for transfers or ambulation on level surfaces at fixed cadence. Typical of the limited and unlimited household ambulator.
- Level 2: Has the ability or potential for ambulation with the ability to traverse low level environmental barriers such as curbs, stairs or uneven surfaces. Typical of the limited community ambulator.
- Level 3: Has the ability or potential for ambulation with variable cadence. Typical of the community ambulator who has the ability to traverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion.
- Level 4: Has the ability or potential for prosthetic ambulation that exceeds basic ambulation skills, exhibiting high impact, stress, or energy levels. Typical of the prosthetic demands of the child, active adult, or athlete.

Criteria:

Prosthetic devices are considered medically necessary for **1 or more** of the following:

- Request is for a lower limb for an individual with **ALL** of the following:
 - Ability or potential to ambulate or transfer safely with or without assistance
 - Adequate physical condition to tolerate transferring, walking, or both, with prosthesis
 - Adequate projected functional level, as indicated by **1 or more** of the following:
 - Active adult or athlete

- Community ambulator
- Household ambulator
- Limited community ambulator
- Infant or child using prosthesis for development and mobility
- Amputation level specified is **1 or more** of the following:
 - **Partial foot amputation** (eg, Chopart, Lisfranc, transmetatarsal) (*L5000, L5010, L5020*), and forefoot specified as **1 or more** of the following:
 - Silicone
 - Other filler
 - **Hip disarticulation** (*L5250, L5270*) with prescription specifying **ALL** of the following components:
 - **Socket** specified as **1 or more** of the following:
 - Ischial containment for limited community ambulator, community ambulator, or active adult or athlete
 - Modified quadrilateral for any anticipated functional level
 - **Socket interface** specified as **1 or more** of the following:
 - Gel liner for any anticipated functional level
 - Hard socket (no liner) for any anticipated functional level
 - Soft socket for household ambulator
 - **Suspension** specified as **1 or more** of the following:
 - Hip joint/pelvic band for active adult or athlete
 - Lanyard for household ambulator or limited community ambulator
 - Pin for any anticipated functional level
 - Shuttle for any anticipated functional level
 - Silesian for any anticipated functional level
 - Suction for limited community ambulator or community ambulator
 - Total-elastic support for household ambulator
 - **Knee system** specified as **1 or more** of the following:
 - Electronic or microprocessor for limited community ambulator, community ambulator, or active adult or athlete
 - Fluid-controlled for community ambulator or active adult or athlete
 - Manual-locking for household ambulator or limited community ambulator
 - Polycentric for community ambulator or active adult or athlete
 - Single-axis friction for household ambulator or limited community ambulator
 - Weight-controlled for household ambulator or limited community ambulator
 - **Endoskeletal pylon**
 - **Foot/ankle system** specified as **1 or more** of the following:
 - Dynamic-response for community ambulator or active adult or athlete
 - Energy-storing for community ambulator or active adult or athlete
 - Flexible-keel for community ambulator or active adult or athlete
 - Multiaxial for community ambulator or active adult or athlete
 - SACH for household ambulator or limited community ambulator
 - Single-axis for household ambulator or limited community ambulator
 - **Knee disarticulation** (through-knee amputation) (*L5150, L5160*), with prescription specifying **ALL** of the following components:
 - **Socket** specified as **1 or more** of the following:
 - Modified quadrilateral socket
 - Subischial containment for community ambulator or active adult or athlete
 - **Socket interface** specified as **1 or more** of the following:
 - Gel liner for any anticipated functional level
 - Hard socket (no liner) for any anticipated functional level
 - Soft liner for household ambulator, limited community ambulator, community ambulator, or active adult or athlete

- **Suspension** specified as **1 or more** of the following:
 - Shuttle/pin for any anticipated functional level
 - Sleeve for any anticipated functional level
 - Suction for any anticipated functional level
 - Supracondylar cuff for any anticipated functional level
- **Knee system** specified as **1 or more** of the following:
 - Electronic or microprocessor for limited community ambulator, community ambulator, or active adult or athlete
 - Fluid-controlled for community ambulator or active adult or athlete
 - Outside hinges for limited community ambulator
 - Polycentric for household ambulator, limited community ambulator, or community ambulator
 - Weight-activated for household ambulator or limited community ambulator
- **Pylon** specified as **1 or more** of the following:
 - **Endoskeletal** and **1 or more** of the following:
 - Rigid for any anticipated functional level
 - Torsion for limited community ambulator, community ambulator, or active adult or athlete
 - Vertical shock for limited community ambulator, community ambulator, or active adult or athlete
 - **Exoskeletal** and **1 or more** of the following:
 - Rigid for any anticipated functional level
 - Torsion for limited community ambulator, community ambulator, or active adult or athlete
 - Vertical shock for limited community ambulator, community ambulator, or active adult or athlete
- **Foot/ankle system** specified as **1 or more** of the following:
 - Dynamic-response for active adult or athlete
 - Energy-storing for active adult or athlete
 - Flexible-keel for household ambulator, limited community ambulator, community ambulator, or active adult or athlete
 - Multiaxial for community ambulator or active adult or athlete
 - SACH for household ambulator or limited community ambulator
 - Single-axis for limited community ambulator
 - Specialty for active adult or athlete
- **Syme amputation** (ankle disarticulation) (*L5050, L5060*) with prescription specifying **ALL** of the following components:
 - **Suspension system** specified as **1 or more** of the following:
 - Canadian Syme socket for any anticipated functional level
 - Expandable-air for any anticipated functional level
 - Removable-liner for any anticipated functional level
 - **Foot system** specified as **1 or more** of the following:
 - SACH for household ambulator or limited community ambulator
 - Seattle Syme for community ambulator or active adult or athlete
 - Single-axis for household ambulator or limited community ambulator
 - Syme flex foot for community ambulator or active adult or athlete
- **Transfemoral amputation** (Above the Knee Amputation) (*L5200, L5210, L5220, L5230*), with prescription specifying **ALL** of the following components:
 - **Socket** specified as **1 or more** of the following:
 - Ischial containment for limited community ambulator, community ambulator, or active adult or athlete

- Modified quadrilateral for household ambulator, limited community ambulator, or community ambulator
 - Quadrilateral for limited community ambulator or community ambulator
- **Socket interface** specified as **1 or more** of the following:
 - Gel liner for any anticipated functional level
 - Hard socket (no liner) for any anticipated functional level
 - Soft liner for household ambulator
- **Suspension** specified as **1 or more** of the following:
 - Combination for active adult or athlete
 - Lanyard for household ambulator or limited community ambulator
 - Pin/shuttle for any anticipated functional level
 - Silesian for any anticipated functional level
 - Suction for limited community ambulator, community ambulator, or active adult or athlete
 - Total-elastic support for household ambulator, limited community ambulator, or community ambulator
- **Knee system** specified as **1 or more** of the following:
 - Electronic or microprocessor for limited community ambulator, community ambulator, or active adult or athlete
 - Fluid-controlled for community ambulator or active adult or athlete
 - Manual-locking for household ambulator or limited community ambulator
 - Polycentric for community ambulator or active adult or athlete
 - Single-axis friction for household ambulator or limited community ambulator
 - Transverse rotator for community ambulator or active adult or athlete
 - Weight-activated for household ambulator or limited community ambulator
- **Rigid endoskeletal pylon**
- **Foot/ankle system** specified as **1 or more** of the following:
 - Dynamic-response for active adult or athlete
 - Energy-storing for community ambulator or active adult or athlete
 - Flexible-keel for limited community ambulator or community ambulator
 - Multiaxial for limited community ambulator or community ambulator
 - SACH for household ambulator or limited community ambulator
 - Single-axis for household ambulator or limited community ambulator
 - Specialty for active adult or athlete
- **Transtibial amputation** (below-knee amputation (BKA)) (*L5100, L5105*) with prescription specifying **ALL** of the following components:
 - **Socket** specified as **1 or more** of the following:
 - Bypass prosthesis for delayed healing
 - Combination patella tendon-bearing/total-contact for any anticipated functional level
 - Patella tendon-bearing for any anticipated functional level
 - Total-contact for any anticipated functional level
 - **Socket interface** specified as **1 or more** of the following:
 - Gel liner for any anticipated functional level
 - Hard socket (no liner) for household ambulator, limited community ambulator, or community ambulator
 - Soft liner for any anticipated functional level
 - **Suspension** specified as **1 or more** of the following:
 - Shuttle/pin for any anticipated functional level
 - Sleeve for any anticipated functional level
 - Suction for community ambulator or active adult or athlete
 - Supracondylar cuff for any anticipated functional level

- Vacuum for community ambulator or active adult or athlete
- **Pylon specified** as 1 or more of the following:
 - **Endoskeletal** and **1 or more** of the following:
 - Rigid for any anticipated functional level
 - Torsion for community ambulator or active adult or athlete
 - Vertical shock for community ambulator or active adult or athlete
 - **Exoskeletal** and **1 or more** of the following:
 - Rigid for any anticipated functional level
 - Torsion for community ambulator or active adult or athlete
 - Vertical shock for community ambulator or active adult or athlete
- **Foot/ankle system** specified as **1 or more** of the following(:
 - Dynamic-response for active adult or athlete
 - Energy-storing for limited community ambulator, community ambulator, or active adult or athlete
 - Flexible-keel for any anticipated functional level
 - Multiaxial for limited community ambulator or community ambulator
 - SACH for household ambulator or limited community ambulator
 - Single-axis for household ambulator or limited community ambulator
 - Specialty for active adult or athlete
- Cognitive or behavioral status does not prohibit learning or automation (repetitive learning) for function
- Contralateral limb will tolerate weight-bearing
- Individual or caregiver has ability to understand and apply knowledge to fitting and use of prosthesis.
- Provider or team of experts with appropriate expertise in patient's condition has evaluated patient and recommended prosthesis
- Willingness and motivation to participate in prosthetic rehabilitation
- Myoelectric upper extremity prosthetic device (*L6880, L6882, L6925, L6935, L6945, L6955, L6965, L6975, L7007, L7008, L7009, L7045, L7180, L7181, L7190, L7191, L7700, L8701, L8702*) with **ALL** of the following:
 - Age 2 years or older
 - Upper extremity prosthesis needed
 - Individual is suitable candidate for myoelectric prosthesis, as indicated by **ALL** of the following:
 - Unilateral transhumeral or transradial (forearm) deficiency
 - Able and willing to participate in myoelectric prosthesis training
 - Able to tolerate weight of prosthesis
 - Adequate cognitive ability to operate myoelectric prosthesis
 - Remaining proximal arm musculature contains minimum microvolt threshold to operate myoelectric prosthesis.
 - No surrounding environment that precludes use of myoelectric prosthesis (eg, excessive moisture or dust)
 - No underlying neuromuscular disease
 - Provider or team of experts with appropriate expertise in individual's condition has evaluated individual and recommended prosthesis.
 - Standard body-powered prosthesis cannot be used or has insufficient functionality to assist individual with performance of activities of daily living
- **Vacuum-Assisted socket systems** (*L5781, L5782*) are considered medically necessary for **1 or more** of the following
 - Unable to keep prosthetic secure with current suspension system
 - Excessive swelling or edema with previous system
 - Excessive moisture with previous system
 - Three or more falls in a 6-month period in below-knee amputees (trans-tibial amputation).

- **Non-myoelectric upper extremity prosthetic** (L6000, L6010, L6020, L6050, L6055, L6100, L6110, L6120, L6130, L6200, L6205, L6250, L600, L6310, L6320) for amputations is proven and Medically Necessary when all of the following criteria are met:
 - Member has a traumatic or surgical amputation of upper extremity or a congenital absence or defect
 - Prosthetic replaces all or part of a missing limb
 - Prosthetic will help the member regain or maintain function
 - Prosthetic device is ordered by or under the direction of a physician
 - Prosthetic needs evaluated for member by a healthcare professional with appropriate prosthetic qualifications and training under the supervision of the ordering physician
 - Member is willing and able to participate in the training for the use of the prosthetic; and
 - Member with expected rehabilitation potential undergoes functional assessment [including Activities of Daily Living (ADLs) and Instrumental ADLs (IADLs)] evaluation
- **Finger prosthetics** (L7499) are considered medically necessary for **ALL** of the following:
 - Passive prosthesis for amputated fingers
- **Superficial facial prosthesis** (L8040, L8041, L8042, L8043, L8046, L8048) is considered medically necessary with **ALL** of the following:
 - Loss or absence of facial tissues is due to **1 or more** of the following:
 - Disease
 - Trauma
 - Surgery
 - Congenital defect
 - Prosthesis will restore function
- Replacement of a lower limb prosthesis or prosthetic component is considered medically necessary with **ALL** of the following:
 - Replacement ordered by physician
 - Replacement prosthetic is same as prosthetic being replaced (not an upgraded version)
 - Individual needs replacement due to **1 or more** of the following:
 - Change in the physiological condition of the individual
 - Wear of the device or part of the device that cannot be repaired
 - Cost of the repair equals more than 60% of replacement cost
- Accessories are considered medically necessary when necessary for effective use of the prosthetic
- Prosthetic repairs are considered medically necessary when need to make the device functional
- Prosthetic maintenance listed by manufacturer's recommendation that must be performed by a prosthetist is considered medical necessary
- Prosthetic adjustments required due to wear/tear or change in individual's condition is considered medically necessary

Prosthetic Devices are **NOT COVERED** for **ANY** of the following as they **do not meet the definition of medical necessity**, to include but not limited to:

- Bone-anchored prosthetics or Functional (myoelectric) finger prostheses for amputated fingers
- Charges to replace Boston Scleral lenses that are lost, damaged, or required solely due to refractive changes are not covered under medical plans
- Medial knee implanted shock absorber (ie. MISHA Knee system, Calypso Knee System, KineSpring) (L8699)
- More than two test (diagnostic) sockets for an individual prosthesis are considered not medically necessary without additional documentation of need.
- Osseointegrated external prosthetic connector (L5991)
- Partial-hand myoelectric prostheses (L6026)
- Powered lower limb prosthesis (e.g., Power Knee,)
- Robotic lower body exoskeleton suits (e.g., the ReWalk,)

- Superficial facial prosthesis items such as skin care products related to the prosthesis, including but not limited to cosmetics, skin cream, cleansers, etc., are not considered medical items.
- Test (diagnostic) sockets for immediate post-surgical or early fitting prostheses
- Upgrades to any existing, functional external prosthetic system to achieve aesthetic improvement, such as smaller profile components
- Non-surgical eyelid weights

Document History:

Revised Dates:

- 2024: June – Annual review, references and coding updated. Criteria updated to include non-myoelectric upper extremity.
- 2024: May
- 2023: July
- 2022: June
- 2021: November
- 2020: July, December
- 2019: December
- 2015: January, September, December
- 2014: January, October
- 2013: January, December

Reviewed Dates:

- 2025: May – Implementation date of August 1, 2025. No changes to criteria, references updated
- 2020: February, April
- 2018: September
- 2017: November
- 2016: January

Origination Date: June 2012

Coding:

Medically necessary with criteria:

Coding	Description
A9282	Wig, any type, each
L2006	Knee-ankle-foot (KAF) device, any material, single or double upright, swing and stance phase microprocessor control with adjustability,
L5000	Partial foot, shoe insert with longitudinal arch, toe filler
L5010	Partial foot, molded socket, ankle height, with toe filler
L5020	Partial foot, molded socket, tibial tubercle height, with toe filler
L5050	Ankle, Symes, molded socket, SACH foot
L5060	Ankle, Symes, metal frame, molded leather socket, articulated ankle/foot
L5100	Below knee (BK), molded socket, shin, SACH foot
L5105	Below knee (BK), plastic socket, joints and thigh lacer, SACH foot
L5150	Knee disarticulation (or through knee), molded socket, external knee joints, shin, SACH foot
L5160	Knee disarticulation (or through knee), molded socket, bent knee configuration, external knee joints, shin, SACH foot
L5200	Above knee (AK), molded socket, single axis constant friction knee, shin, SACH foot

L5210	Above knee (AK), short prosthesis, no knee joint (stubbies), with foot blocks, no ankle joints, each
L5220	Above knee (AK), short prosthesis, no knee joint (stubbies), with articulated ankle/foot, dynamically aligned, each
L5230	Above knee (AK), for proximal femoral focal deficiency, constant friction knee, shin, SACH foot
L5250	Hip disarticulation, Canadian type; molded socket, hip joint, single axis constant friction knee, shin, SACH foot
L5270	Hip disarticulation, tilt table type; molded socket, locking hip joint, single axis constant friction knee, shin, SACH foot
L5280	Hemipelvectomy, Canadian type; molded socket, hip joint, single axis constant friction knee, shin, SACH foot
L5301	Below knee (BK), molded socket, shin, SACH foot, endoskeletal system
L5312	Knee disarticulation (or through knee), molded socket, single axis knee, pylon, SACH foot, endoskeletal system
L5321	Above knee (AK), molded socket, open end, SACH foot, endoskeletal system, single axis knee
L5331	Hip disarticulation, Canadian type, molded socket, endoskeletal system, hip joint, single axis knee, SACH foot
L5341	Hemipelvectomy, Canadian type, molded socket, endoskeletal system, hip joint, single axis knee, SACH foot
L5400	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment, suspension, and one cast change,
L5410	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment and suspension, below knee (BK),
L5420	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment and suspension and one cast
L5430	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment and suspension, above knee (AK)
L5450	Immediate postsurgical or early fitting, application of nonweight bearing rigid dressing, below knee (BK)
L5460	Immediate postsurgical or early fitting, application of nonweight bearing rigid dressing, above knee (AK)
L5500	Initial, below knee (BK) PTB type socket, nonalignable system, pylon, no cover, SACH foot, plaster socket, direct formed
L5505	Initial, above knee (AK), knee disarticulation, ischial level socket, nonalignable system, pylon, no cover, SACH foot, plaster socket,
L5510	Preparatory, below knee (BK) PTB type socket, nonalignable system, pylon, no cover, SACH foot, plaster socket, molded to model
L5520	Preparatory, below knee (BK) PTB type socket, nonalignable system, pylon, no cover, SACH foot, thermoplastic or equal, direct formed
L5530	Preparatory, below knee (BK) PTB type socket, nonalignable system, pylon, no cover, SACH foot, thermoplastic or equal, molded to
L5535	Preparatory, below knee (BK) PTB type socket, nonalignable system, no cover, SACH foot, prefabricated, adjustable open end socket
L5540	Preparatory, below knee (BK) PTB type socket, nonalignable system, pylon, no cover, SACH foot, laminated socket, molded to model
L5560	Preparatory, above knee (AK), knee disarticulation, ischial level socket, nonalignable system, pylon, no cover, SACH foot, plaster
L5570	Preparatory, above knee (AK), knee disarticulation, ischial level socket, nonalignable system, pylon, no cover, SACH foot, thermoplastic

L5580	Preparatory, above knee (AK), knee disarticulation, ischial level socket, nonalignable system, pylon, no cover, SACH foot, thermoplastic
L5585	Preparatory, above knee (AK), knee disarticulation, ischial level socket, nonalignable system, pylon, no cover, SACH foot, prefabricated
L5590	Preparatory, above knee (AK), knee disarticulation, ischial level socket, nonalignable system, pylon, no cover, SACH foot, laminated
L5595	Preparatory, hip disarticulation/hemipelvectomy, pylon, no cover, SACH foot, thermoplastic or equal, molded to patient model
L5600	Preparatory, hip disarticulation/hemipelvectomy, pylon, no cover, SACH foot, laminated socket, molded to patient model
L5610	Addition to lower extremity, endoskeletal system, above knee (AK), hydracandence system
L5610	Addition to lower extremity, endoskeletal system, above knee (AK), knee disarticulation, four-bar linkage, with friction swing phase
L5611	Addition to lower extremity, endoskeletal system, above knee (AK), knee disarticulation, four-bar linkage, with friction swing phase control
L5613	Addition to lower extremity, endoskeletal system, above knee (AK), knee disarticulation, four-bar linkage, with hydraulic swing phase
L5614	Addition to lower extremity, exoskeletal system, above knee (AK), knee disarticulation, four-bar linkage, with pneumatic swing phase
L5615	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control
L5616	Addition to lower extremity, endoskeletal system, above knee (AK), universal multiplex system, friction swing phase control
L5617	Addition to lower extremity, quick change self-aligning unit, above knee (AK) or below knee (BK), each
L5618	Addition to lower extremity, test socket, Symes
L5620	Addition to lower extremity, test socket, below knee (BK)
L5622	Addition to lower extremity, test socket, knee disarticulation
L5624	Addition to lower extremity, test socket, above knee (AK)
L5626	Addition to lower extremity, test socket, hip disarticulation
L5628	Addition to lower extremity, test socket, hemipelvectomy
L5629	Addition to lower extremity, below knee, acrylic socket
L5630	Addition to lower extremity, Symes type, expandable wall socket
L5631	Addition to lower extremity, above knee (AK) or knee disarticulation, acrylic socket
L5632	Addition to lower extremity, Symes type, PTB brim design socket
L5634	Addition to lower extremity, Symes type, posterior opening (Canadian) socket
L5636	Addition to lower extremity, Symes type, medial opening socket
L5637	Addition to lower extremity, below knee (BK), total contact
L5638	Addition to lower extremity, below knee (BK), leather socket
L5639	Addition to lower extremity, below knee (BK), wood socket
L5640	Addition to lower extremity, knee disarticulation, leather socket
L5642	Addition to lower extremity, above knee (AK), leather socket
L5643	Addition to lower extremity, hip disarticulation, flexible inner socket, external frame
L5644	Addition to lower extremity, above knee (AK), wood socket

L5645	Addition to lower extremity, below knee (BK), flexible inner socket, external frame
L5646	Addition to lower extremity, below knee (BK), air, fluid, gel or equal, cushion socket
L5647	Addition to lower extremity, below knee (BK), suction socket
L5648	Addition to lower extremity, above knee (AK), air, fluid, gel or equal, cushion socket
L5649	Addition to lower extremity, ischial containment/narrow M-L socket
L5650	Additions to lower extremity, total contact, above knee (AK) or knee disarticulation socket
L5651	Addition to lower extremity, above knee (AK), flexible inner socket, external frame
L5652	Addition to lower extremity, suction suspension, above knee (AK) or knee disarticulation socket
L5653	Addition to lower extremity, knee disarticulation, expandable wall socket
L5654	Addition to lower extremity, socket insert, Symes, (Kemblo, Pelite, Aliplast, Plastazote or equal)
L5655	Addition to lower extremity, socket insert, below knee (BK) (Kemblo, Pelite, Aliplast, Plastazote or equal)
L5656	Addition to lower extremity, socket insert, knee disarticulation (Kemblo, Pelite, Aliplast, Plastazote or equal)
L5658	Addition to lower extremity, socket insert, above knee (AK) (Kemblo, Pelite, Aliplast, Plastazote or equal)
L5661	Addition to lower extremity, socket insert, multidurometer Symes
L5665	Addition to lower extremity, socket insert, multidurometer, below knee (BK)
L5666	Addition to lower extremity, below knee (BK), cuff suspension
L5668	Addition to lower extremity, below knee (BK), molded distal cushion
L5670	Addition to lower extremity, below knee (BK), molded supracondylar suspension (PTS or similar)
L5671	Addition to lower extremity, below knee (BK)/above knee (AK), suspension locking mechanism (shuttle, lanyard, or equal), excludes
L5672	Addition to lower extremity, below knee (BK), removable medial brim suspension
L5673	Addition to lower extremity, below knee (BK)/above knee (AK), custom fabricated from existing mold or prefabricated, socket insert,
L5676	Additions to lower extremity, below knee (BK), knee joints, single axis, pair
L5677	Additions to lower extremity, below knee (BK), knee joints, polycentric, pair
L5678	Additions to lower extremity, below knee (BK), joint covers, pair
L5679	Addition to lower extremity, below knee (BK)/above knee (AK), custom fabricated from existing mold or prefabricated, socket insert, silicone gel, elastomeric or equal, not for use with locking mechanism
L5680	Addition to lower extremity, below knee (BK), thigh lacer, nonmolded
L5681	Addition to lower extremity, below knee (BK)/above knee (AK), custom fabricated socket insert for congenital or atypical traumatic amputee, silicone gel, elastomeric or equal, for use with or without locking mechanism, initial only (for other than initial, use code L5673 or L5679)
L5682	Addition to lower extremity, below knee (BK), thigh lacer, gluteal/ischial, molded
L5683	Addition to lower extremity, below knee (BK)/above knee (AK), custom fabricated socket insert for other than congenital or atypical traumatic amputee, silicone gel, elastomeric or equal, for use with or without locking mechanism, initial only (for other than initial, use code L5673 or L5679)
L5684	Addition to lower extremity, below knee, fork strap
L5685	Addition to lower extremity prosthesis, below knee, suspension/sealing sleeve, with or without valve, any material, each

L5686	Addition to lower extremity, below knee (BK), back check (extension control)
L5688	Addition to lower extremity, below knee (BK), waist belt, webbing
L5690	Addition to lower extremity, below knee (BK), waist belt, padded and lined
L5692	Addition to lower extremity, above knee (AK), pelvic control belt, light
L5694	Addition to lower extremity, above knee (AK), pelvic control belt, padded and lined
L5695	Addition to lower extremity, above knee (AK), pelvic control, sleeve suspension, neoprene or equal, each
L5696	Addition to lower extremity, above knee (AK) or knee disarticulation, pelvic joint
L5697	Addition to lower extremity, above knee (AK) or knee disarticulation, pelvic band
L5698	Addition to lower extremity, above knee (AK) or knee disarticulation, Silesian bandage
L5699	All lower extremity prostheses, shoulder harness
L5700	Replacement, socket, below knee (BK), molded to patient model
L5701	Replacement, socket, above knee (AK)/knee disarticulation, including attachment plate, molded to patient model
L5702	Replacement, socket, hip disarticulation, including hip joint, molded to patient model
L5703	Ankle, Symes, molded to patient model, socket without solid ankle cushion heel (SACH) foot, replacement only
L5704	Custom shaped protective cover, below knee (BK)
L5705	Custom shaped protective cover, above knee (AK)
L5706	Custom shaped protective cover, knee disarticulation
L5707	Custom shaped protective cover, hip disarticulation
L5710	Addition, exoskeletal knee-shin system, single axis, manual lock
L5711	Additions exoskeletal knee-shin system, single axis, manual lock, ultra-light material
L5712	Addition, exoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)
L5714	Addition, exoskeletal knee-shin system, single axis, variable friction swing phase
L5716	Addition, exoskeletal knee-shin system, polycentric, mechanical stance phase lock
L5718	Addition, exoskeletal knee-shin system, polycentric, friction swing and stance phase control
L5722	Addition, exoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control
L5724	Addition, exoskeletal knee-shin system, single axis, fluid swing phase control
L5726	Addition, exoskeletal knee-shin system, single axis, external joints, fluid swing phase control
L5728	Addition, exoskeletal knee-shin system, single axis, fluid swing and stance phase control
L5780	Addition, exoskeletal knee-shin system, single axis, pneumatic/hydra pneumatic swing phase control
L5781	Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system
L5782	Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, heavy-duty
L5785	Addition, exoskeletal system, below knee (BK), ultra-light material (titanium, carbon fiber or equal)
L5790	Addition, exoskeletal system, above knee (AK), ultra-light material (titanium, carbon fiber or equal)
L5795	Addition, exoskeletal system, hip disarticulation, ultra-light material (titanium, carbon fiber or equal)
L5810	Addition, endoskeletal knee-shin system, single axis, manual lock
L5812	Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)
L5814	Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock
L5816	Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock
L5818	Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control
L5822	Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control

L5824	Addition, endoskeletal knee-shin system, single axis, fluid swing phase control
L5826	Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame
L5828	Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control
L5830	Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control
L5840	Addition, endoskeletal knee-shin system, four-bar linkage or multiaxial, pneumatic swing phase control
L5845	Addition, endoskeletal knee-shin system, stance flexion feature, adjustable
L5848	Addition to endoskeletal knee-shin system, fluid stance extension, dampening feature, with or without adjustability
L5850	Addition, endoskeletal system, above knee (AK) or hip disarticulation, knee extension assist
L5855	Addition, endoskeletal system, hip disarticulation, mechanical hip extension assist
L5856	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing and stance phase, includes electronic sensor(s), any type
L5857	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing phase only, includes electronic sensor(s), any type
L5858	Addition to lower extremity prosthesis, endoskeletal knee shin system, microprocessor control feature, stance phase only, includes electronic sensor(s), any type
L5859	Addition to lower extremity prosthesis, endoskeletal knee-shin system, powered and programmable flexion/extension assist control, includes any type motor(s)
L5910	Addition, endoskeletal system, below knee (BK), alignable system
L5920	Addition, endoskeletal system, above knee (AK) or hip disarticulation, alignable system
L5925	Addition, endoskeletal system, above knee (AK), knee disarticulation or hip disarticulation, manual lock
L5926	Addition to lower extremity prosthesis, endoskeletal, knee disarticulation, above knee, hip disarticulation, positional rotation unit, any type
L5930	Addition, endoskeletal system, high activity knee control frame
L5940	Addition, endoskeletal system, below knee (BK), ultra-light material (titanium, carbon fiber or equal)
L5950	Addition, endoskeletal system, above knee (AK), ultra-light material (titanium, carbon fiber or equal)
L5960	Addition, endoskeletal system, hip disarticulation, ultra-light material (titanium, carbon fiber or equal)
L5961	Addition, endoskeletal system, polycentric hip joint, pneumatic or hydraulic control, rotation control, with or without flexion and/or extension control
L5962	Addition, endoskeletal system, below knee (BK), flexible protective outer surface covering system
L5964	Addition, endoskeletal system, above knee (AK), flexible protective outer surface covering system
L5966	Addition, endoskeletal system, hip disarticulation, flexible protective outer surface covering system
L5968	Addition to lower limb prosthesis, multiaxial ankle with swing phase active dorsiflexion feature
L5970	All lower extremity prostheses, foot, external keel, SACH foot
L5971	All lower extremity prostheses, solid ankle cushion heel (SACH) foot, replacement only
L5972	All lower extremity prostheses, foot, flexible keel
L5973	Endoskeletal ankle foot system, microprocessor controlled feature, dorsiflexion and/or plantar flexion control, includes power source
L5974	All lower extremity prostheses, foot, single axis ankle/foot

L5975	All lower extremity prostheses, combination single axis ankle and flexible keel foot
L5976	All lower extremity prostheses, energy storing foot (Seattle Carbon Copy II or equal)
L5978	All lower extremity prostheses, foot, multiaxial ankle/foot
L5979	All lower extremity prostheses, multiaxial ankle, dynamic response foot, one piece system
L5980	All lower extremity prostheses, flex-foot system
L5981	All lower extremity prostheses, flex-walk system or equal
L5982	All exoskeletal lower extremity prostheses, axial rotation unit
L5984	All endoskeletal lower extremity prostheses, axial rotation unit, with or without adjustability
L5985	All endoskeletal lower extremity prostheses, dynamic prosthetic pylon
L5986	All lower extremity prostheses, multiaxial rotation unit (MCP or equal)
L5987	All lower extremity prostheses, shank foot system with vertical loading pylon
L5988	Addition to lower limb prosthesis, vertical shock reducing pylon feature
L5991	Addition to lower extremity prostheses, osseointegrated external prosthetic connector
L5999	Lower extremity prosthesis, not otherwise specified
L6000	Partial hand, thumb remaining
L6010	Partial hand, little and/or ring finger remaining
L6020	Partial hand, no finger remaining
L6621	Upper extremity prosthesis addition, flexion/extension wrist with or without friction, for use with external powered terminal device
L6638	Upper extremity addition to prosthesis, electric locking feature, only for use with manually powered elbow
L6646	Upper extremity addition, shoulder joint, multipositional locking, flexion, adjustable abduction friction control, for use with body powered or external powered system
L6647	Upper extremity addition, shoulder lock mechanism, body powered actuator
L6648	Upper extremity addition, shoulder lock mechanism, external powered actuator
L6677	Upper extremity addition, harness, triple control, simultaneous operation of terminal device and elbow
L6697	Addition to upper extremity prosthesis, below elbow/above elbow, custom fabricated socket insert for other than congenital or atypical traumatic amputee, silicone gel, elastomeric or equal, for use with or without locking mechanism, initial only (for other than initial, use code L6694 or L6695)
L6698	Addition to upper extremity prosthesis, below elbow/above elbow, lock mechanism, excludes socket insert
L6880	Electric hand, switch or myoelectric controlled, independently articulating digits, any grasp pattern or combination of grasp patterns,
L6881	Automatic grasp feature, addition to upper limb electric prosthetic terminal device
L6882	Microprocessor control feature, addition to upper limb prosthetic terminal device
L6883	Replacement socket, below elbow/wrist disarticulation, molded to patient model, for use with or without external power
L6884	Replacement socket, above elbow/elbow disarticulation, molded to patient model, for use with or without external power
L6885	Replacement socket, shoulder disarticulation/interscapular thoracic, molded to patient model, for use with or without external power
L6920	Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal switch, cables, two
L6925	Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal electrodes, cables, two
L6930	Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal switch, cables, two batteries

L6935	Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal electrodes, cables, two
L6940	Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or
L6945	Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or
L6950	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, Otto Bock or equal switch,
L6955	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, Otto Bock or equal
L6960	Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section,
L6965	Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section,
L6970	Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical
L6975	Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical
L7007	Electric hand, switch or myoelectric controlled, adult
L7008	Electric hand, switch or myoelectric, controlled, pediatric
L7009	Electric hook, switch or myoelectric controlled, adult
L7045	Electric hook, switch or myoelectric controlled, pediatric
L7170	Electronic elbow, Hosmer or equal, switch controlled
L7180	Electronic elbow, microprocessor sequential control of elbow and terminal device
L7181	Electronic elbow, microprocessor simultaneous control of elbow and terminal device
L7185	Electronic elbow, adolescent, Variety Village or equal, switch controlled
L7186	Electronic elbow, child, Variety Village or equal, switch controlled
L7190	Electronic elbow, adolescent, Variety Village or equal, myoelectronically controlled
L7191	Electronic elbow, child, Variety Village or equal, myoelectronically controlled
L7259	Electronic wrist rotator, any type
L7400	Addition to upper extremity prosthesis, below elbow/wrist disarticulation, ultra-light material (titanium, carbon fiber or equal)
L7401	Addition to upper extremity prosthesis, above elbow disarticulation, ultra-light material (titanium, carbon fiber or equal)
L7402	Addition to upper extremity prosthesis, shoulder disarticulation/interscapular thoracic, ultra-light material (titanium, carbon fiber or equal)
L7403	Addition to upper extremity prosthesis, below elbow/wrist disarticulation, acrylic material
L7404	Addition to upper extremity prosthesis, above elbow disarticulation, acrylic material
L7405	Addition to upper extremity prosthesis, shoulder disarticulation/interscapular thoracic, acrylic material
L7499	Upper extremity prosthesis, not otherwise specified
L7510	Repair of prosthetic device, repair or replace minor parts
L7520	Repair prosthetic device, labor component, per 15
L7600	Prosthetic donning sleeve, any material, each
L8040	Nasal prosthesis, provided by a nonphysician
L8041	Midfacial prosthesis, provided by a nonphysician
L8042	Orbital prosthesis, provided by a nonphysician

L8043	Upper facial prosthesis, provided by a nonphysician
L8044	Hemi-facial prosthesis, provided by a nonphysician
L8045	Auricular prosthesis, provided by a nonphysician
L8046	Partial facial prosthesis, provided by a nonphysician
L8047	Nasal septal prosthesis, provided by a nonphysician
L8048	Unspecified maxillofacial prosthesis, by report, provided by a nonphysician
L8049	Repair or modification of maxillofacial prosthesis, labor component, 15 minute increments, provided by a nonphysician
L8400	Prosthetic sheath, below knee, each
L8410	Prosthetic sheath, above knee, each
L8415	Prosthetic sheath, upper limb, each
L8417	Prosthetic sheath/sock, including a gel cushion layer, below knee (BK) or above knee (AK), each
L8420	Prosthetic sock, multiple ply, below knee (BK), each
L8430	Prosthetic sock, multiple ply, above knee (AK), each
L8435	Prosthetic sock, multiple ply, upper limb, each
L8465	Prosthetic shrinker, upper limb, each
L8470	Prosthetic sock, single ply, fitting, below knee (BK), each
L8480	Prosthetic sock, single ply, fitting, above knee (AK), each
L8485	Prosthetic sock, single ply, fitting, upper limb, each
L8499	Unlisted procedure for miscellaneous prosthetic services
L8631	Metacarpal phalangeal joint replacement, two or more pieces, metal (e.g., stainless steel or cobalt chrome), ceramic-like material (e.g., pyrocarbon), for surgical implantation (all sizes, includes entire system)
L8659	Interphalangeal finger joint replacement, two or more pieces, metal (e.g., stainless steel or cobalt chrome), ceramic-like material (e.g., pyrocarbon) for surgical implantation, any size
L8699	Prosthetic implant, not otherwise specified
L8701	Powered upper extremity range of motion assist device, elbow, wrist, hand with single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated
L8702	Powered upper extremity range of motion assist device, elbow, wrist, hand, finger, single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated

Considered Not Medically Necessary:

Coding	Description
L5969	Addition, endoskeletal ankle-foot or ankle system, power assist, includes any type motor(s)
L5990	Addition to lower extremity prosthesis, user adjustable heel height
L5991	Addition to lower extremity prostheses, osseointegrated external prosthetic connector
L6026	Transcarpal/metacarpal or partial hand disarticulation prosthesis, external power, self-suspended, inner socket with removable forearm
L8699	Prosthetic implant, not otherwise specified (If used for MISHA)

The preceding codes are included above for informational purposes only and may not be all inclusive. Additionally, inclusion or exclusion of a treatment, procedure, or device-code(s) does not constitute or imply member coverage or provider reimbursement.

Special Notes: *

- **Coverage:** See the appropriate benefit document for specific coverage determination. Member specific benefits take precedence over medical policy.
- **Application to Products:** Policy is applicable to Sentara Health Plan Virginia Medicaid Plans

- **Authorization Requirements:** Pre-certification by the Plan is required.
- **Special Notes:**
 - This medical policy express Sentara Health Plan's determination of medically necessity of services, and they are based upon a review of currently available clinical information. These policies are used when no specific guidelines for coverage are provided by the Department of Medical Assistance Services of Virginia (DMAS). Medical Policies may be superseded by state Medicaid Plan guidelines. Medical policies are not a substitute for clinical judgment or for any prior authorization requirements of the health plan. These policies are not an explanation of benefits.
 - Medical policies can be highly technical and complex and are provided here for informational purposes. These medical policies are intended for use by health care professionals. The medical policies do not constitute medical advice or medical care. Treating health care professionals are solely responsible for diagnosis, treatment and medical advice. Sentara Health Plan members should discuss the information in the medical policies with their treating health care professionals. Medical technology is constantly evolving and these medical policies are subject to change without notice, although Sentara Health Plan will notify providers as required in advance of changes that could have a negative impact on benefits.
 - The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) covers services, products, or procedures for children, if those items are determined to be medically necessary to "correct or ameliorate" (make better) a defect, physical or mental illness, or condition (health problem) identified through routine medical screening or examination, regardless of whether coverage for the same service or support is an optional or limited service under the state plan. Children enrolled in the FAMIS Program are not eligible for all EPSDT treatment services. All requests for authorization for the services described by this medical policy will be reviewed per EPSDT guidelines. These services may be authorized under individual consideration for Medicaid members under the age of 21-years if the services are judged to be medically necessary to correct or ameliorate the member's condition. Department of Medical Assistance Services (DMAS), Supplement B - EPSDT (Early and Periodic Screening, Diagnosis and Treatment) Manual.
 - **Documentation Requirements** DME Chapter IV (updated 10.24.24) Final.pdf appendix-b-21-excel-version-with-all-categories-of-appendix-b-2025.xlsx
 - All durable medical equipment (DME) and supplies must be ordered by a practitioner on the form: CMN/DMAS-352 (revised 2017) and must be medically necessary to treat a health condition. The CMN/DMAS352 may be completed by the practitioner, DME provider, or other health care professionals, but the practitioner must sign and date the completed Certification of Medical Necessity (CMN).
 - The CMN and any supporting verifiable documentation must be completed (signed and dated by the practitioner) within 60 days.
 - The CMN shall be valid for a maximum period of six (6) months for Medicaid individuals under 21 years of age. The CMN shall be valid for a maximum period of twelve (12) months for Medicaid individuals 21 years and older.
 - **Repair vs. Replacement Guidelines**
 - If individual owned equipment needs to be replaced prior to the service limit (Per Appendix B) expiring the provider will be required to justify and obtain service authorization.
 - Documentation for service authorization should include the required information as stated in this manual and the provider shall also include additional documentation as stated below:
 - What equipment the individual is currently using and why that equipment is no longer appropriate for the individual. This description shall include the reason why repairs could not be done or why the option to repair the equipment was not cost effective.
 - The provider shall include a breakdown of what items need to be repaired and include the cost to repair the items to justify why the purchase of new equipment would be more cost effective; and
 - If the item is no longer appropriate due to a change in medical condition, limitations and symptoms, or if the equipment was provided inappropriately, the provider shall give justification to describe the circumstances.
 - **Rental vs. Purchase Guideline**

- When determined to be cost effective by SHP, payment may be made for rental of the equipment in lieu of purchase. (12 VAC 30-50-165)
- When usage is anticipated to be long-term, and the individual's need or condition is not expected to change, the items must be considered for purchase

References:

Including but not limited to: Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; UpToDate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD).

(2024, Mar 14). Retrieved Apr 28, 2025, from MCG 28th Edition:
<https://careweb.careguidelines.com/ed28/index.html>

Clinical Practice Guidelines for the Rehabilitation of Lower Limb Amputation: An Update from the Department of Veterans Affairs and Department of Defense. (2019, Sep). Retrieved Apr 29, 2025, from PubMed:
<https://pubmed.ncbi.nlm.nih.gov/31419214/>

Durable Medical Equipment. (2024, Oct 24). Retrieved Apr 29, 2025, from Virginia Department of Medical Services: https://vamedicaid.dmas.virginia.gov/sites/default/files/2024-10/DME%20Chapter%20IV%20%28updated%2010.24.24%29_Final.pdf

Kalapatapu, V. (2025, Mar 04). Lower extremity amputation. Retrieved Apr 29, 2025, from UpToDate:
https://www.uptodate.com/contents/lower-extremity-amputation?search=Lower%20extremity%20prosthesis§ionRank=2&usage_type=default&anchor=H1434397871&source=machineLearning&selectedTitle=1%7E150&display_rank=1#H614730646

LCD: Eye Prostheses (L33737). (2020, Jan 01). Retrieved Apr 28, 2025, from Centers for Medicare and Medicaid Services: <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=33737&ver=20&keyword=prostheses&keywordType=starts&areald=s53&docType=NCA,CAL,NCD,MEDCAC,TA,MCD,6,3,5,1,F,P&contractOption=all&sortBy=relevance&bc=1>

LCD: Facial Prostheses (L33788). (2020, Jan 01). Retrieved Apr 28, 2025, from Centers for Medicare and Medicaid Services: <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=33788&ver=18&keyword=prostheses&keywordType=starts&areald=s53&docType=NCA,CAL,NCD,MEDCAC,TA,MCD,6,3,5,1,F,P&contractOption=all&sortBy=relevance&bc=1>

LCD: Lower Limb Prostheses (L33787). (2025, Apr 01). Retrieved Apr 28, 2025, from Centers for Medicare and Medicaid Services: <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=33787&ver=35&keyword=prostheses&keywordType=starts&areald=s53&docType=NCA,CAL,NCD,MEDCAC,TA,MCD,6,3,5,1,F,P&contractOption=all&sortBy=relevance&bc=1>

LUKE Arm (Mobius Bionics LLC) for Upper Extremity Amputation. (2021, Nov 29). Retrieved Apr 29, 2025, from Hayes - a symplr company: <https://evidence.hayesinc.com/report/htb.lukearm4333>

NCD: Prosthetic Shoe (280.10). (N/D). Retrieved Apr 29, 2025, from Centers for Medicare and Medicaid Services: <https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=208&ncdver=1&keyword=prosthetic%20shoe&keywordType=starts&areald=s53&docType=NCA,CAL,NCD,MEDCAC,TA,MCD,6,3,5,1,F,P&contractOption=all&sortBy=relevance&bc=1>

NCD: Scleral Shell (80.5). (N/D). Retrieved Apr 29, 2025, from Centers for Medicare and Medicaid Services: <https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=235&ncdver=1&keyword=scleral%20shell&keywordType=starts&areald=s53&docType=NCA,CAL,NCD,MEDCAC,TA,MCD,6,3,5,1,F,P&contractOption=all&sortBy=relevance&bc=1>

Osseointegrated Prosthetic Implants for Lower Leg Amputation. (2022, Sep 14). Retrieved Apr 29, 2024, from Hayes: <https://evidence.hayesinc.com/report/crr.osseointegrated5407>

Prosthetic Device Manual - Covered Services, Limitations, and Payment. (2012, Apr 02). Retrieved Apr 29, 2025, from Virginia Department of Medical Assistance Services: <https://vamedicaid.dmas.virginia.gov/sites/default/files/2022-10/Chapter-4%20Covered%20Services%20and%20Limitations%20%28Prosthetic%20Devices%29.pdf>

Subpart D - Physical Medicine Prosthetic Devices. (2025, Apr 12). Retrieved Apr 29, 2025, from Code of Federal Regulations: <https://www.ecfr.gov/current/title-21/chapter-I/subchapter-H/part-890/subpart-D?toc=1>

Upper extremity amputation. (2024, Mar 06). Retrieved Apr 29, 2025, from UpToDate: https://www.uptodate.com/contents/upper-extremity-amputation?search=upper%20extremity%20prosthetics&source=search_result&selectedTitle=9%7E150&usage_ttype=default&display_rank=9#H226877741

VA/Dod Clinical Practice Guideline for the Management of Upper Limb Amputation Rehabilitation. (2022). Retrieved Apr 29, 2025, from Department of Veterans Affairs and Department of Defense: https://www.healthquality.va.gov/guidelines/Rehab/ULA/VADoDULACPG_Final_508.pdf

Keywords:

SHP Prosthetic Devices, SHP Durable Medical Equipment 21, Prosthetic, limb, scleral, lens, ankle, knee, upper extremity, lower extremity, prosthesis, amputee, mastectomy, socket, vacuum assisted, vacuum, feet, foot, microprocessor, finger, SYMBIONIC® LEG 3, LiNX®, Otto Bock C-Leg; Otto-Bock Genium Bionic Prosthetic System (also known as Otto-Bock Genium X3; Otto Bock HealthCare, Minneapolis, MN), Intelligent Prosthesis (Endoliete North America, Centerville, OH), and Ossur Rheo Knee/Ossur RKXC Knee (Ossur-Flexfoot) wig