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Administrative Bulletin 14-13 101 CMR 334.00: Prostheses, Prosthetic Devices and Orthotic Devices

Effective October 1, 2014

HCPCS Updates and Corrections

Under the authority of 101 CMR 334.01(4), the Executive Office of Health and Human Services is adding two new orthotic codes for services provided on or after October 1, 2014.

New codes with associated Medicare fees are set at a percentage of prevailing Medicare fees as described in 101 CMR 334.01(4)(d).

Pursuant to Medicare Learning Network (MLN) Matters Number MM8865, which is issued by the Centers for Medicare & Medicaid Services, Medicare rates for the following two new off-theshelf orthotic codes are set by applying the fees of the prefabricated orthotic codes, L1843 and L1845, respectively. Accordingly, EOHHS has set the rates for the following two new codes based on their respective Medicare rates, utilizing the methodology described in 101 CMR 334.01(4)(d)3.

New Code	Rate	Description
K0901	\$689.34	Knee orthosis (KO), single upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the- shelf
K0902	\$640.98	Knee orthosis (KO), double upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the- shelf