

The Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid One Ashburton Place Boston, Massachusetts 02108



CHARLES D. BAKER Governor

KARYN E. POLITO Lieutenant Governor

MARYLOU SUDDERS Secretary DANIEL TSAI Assistant Secretary for MassHealth

www.mass.gov/eohhs

Administrative Bulletin 20-12

101 CMR 327.00: Rates of Payment for Ambulance and Wheelchair Van Services

Effective for dates of service on or after March 20, 2020

Procedure Code Updates

Pursuant to 101 CMR 327.01(5), the Executive Office of Health and Human Services (EOHHS) is adding a procedure code for ambulance services related to the 2019 novel Coronavirus (COVID-19) and updating the description for an unlisted code. Rates listed in this administrative bulletin are applicable until EOHHS issues revised rates.

CODE	RATE	DESCRIPTION
A0998	I.C.	Ambulance response and treatment; no transport. (Used
		for medically necessary visits to patients to obtain and
		transport specimens for COVID-19 diagnostic testing.)
A0999	I.C.	Unlisted ambulance service. (Used for transporting
		patients who require special resources to be safely
		transported, including but not limited to bariatric
		patients.)

