



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
600 Washington Street
Boston, MA 02111
www.mass.gov/masshealth



MassHealth
Transmittal Letter AOH-22
May 2009

TO: Acute Outpatient Hospitals Participating in MassHealth
FROM: Tom Dehner, Medicaid Director 
RE: Acute Outpatient Hospital Manual (Revised Appendix F)

This letter transmits a revised Appendix F for the *Acute Outpatient Hospital Manual*. Revisions in the appendix are effective for all claims with *dates of service on or after January 1, 2009*.

Appendix F consists of a list of acceptable revenue codes for MassHealth. There is no longer mapping between the revenue codes and the service codes. To determine appropriate HCPCS mapping, providers must now refer to the Ingenix Uniform Billing Editor.

For more information on the reimbursement for AOH services, providers can refer to the Acute Hospital Request for Application (RFA) in effect on the date of service. The application is available at www.comm-pass.com. Regulatory and billing information is available on the MassHealth Web site at www.mass.gov/masshealth.

If you have any questions about the information in this transmittal letter, please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.

NEW MATERIAL

(The pages listed here contain new or revised language.)

Acute Outpatient Hospital Manual

Pages vi and F-1 through F-6

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Acute Outpatient Hospital Manual

Pages vi and F-1 through F-8 — transmitted by Transmittal Letter AOH-17

Commonwealth of Massachusetts MassHealth Provider Manual Series Acute Outpatient Hospital	Subchapter Number and Title Table of Contents	Page vi
	Transmittal Letter AOH-22	Date 05/26/09

6. Service Codes

Introduction.....	6-1
Nonpayable Services - CPT	6-1
Payable Services - Level II HCPCS.....	6-4
Modifiers	6-5
Appendix A. Directory	A-1
Appendix B. Enrollment Centers.....	B-1
Appendix C. Third-Party-Liability Codes	C-1
Appendix D. Utilization Management Program.....	D-1
Appendix E. Admission Guidelines	E-1
Appendix F. Revenue Codes	F-1
Appendix W. EPSDT Services: Medical Protocol and Periodicity Schedule	W-1
Appendix X. Family Assistance Copayments and Deductibles	X-1
Appendix Y. EVS Codes/Messages	Y-1
Appendix Z. EPSDT/PPHSD Screening Services Codes.....	Z-1

Commonwealth of Massachusetts MassHealth Provider Manual Series Acute Outpatient Hospital Manual	Subchapter Number and Title Appendix F. Revenue Codes	Page F-1
	Transmittal Letter AOH-22	Date 05/26/09

MassHealth Revenue Codes

The following table lists the revenue codes that may be used by acute outpatient hospitals (AOHs) including hospital-licensed health centers and other provider-based satellites, when billing for MassHealth-covered services. To determine the appropriate revenue-HCPCS code mappings, please refer to the current edition of the Ingenix Uniform Billing Editor. To purchase the application, go to <http://www.shopingenix.com>.

Acute hospitals should refer to Subchapter 6 of the *Acute Outpatient Hospital Manual* to determine if HCPCS codes are covered by MassHealth.

Revenue Code	Description
025X Pharmacy	
0250	General
0251	Generic drugs
0252	Non-generic drugs
0253	Take-home drugs
0254	Drugs incident to other diagnostic services
0255	Drugs incident to radiology
0257	Nonprescription drugs
0258	IV solutions
026X IV Therapy	
0260	General
027X Medical/Surgical Supplies and Devices – General	
0270	General
0271	Non-sterile supply
0272	Sterile supply
0273	Take-home supplies
0274	Prosthetic/orthotic devices
0275	Pacemaker
0276	Intraocular lens
0278	Other implants
028X Oncology	
0280	General
029X DME	
0290	General
0291	Rental
0292	Purchase of new DME
0293	Purchase of used DME
030X Laboratory	
0300	General
0301	Chemistry

Commonwealth of Massachusetts MassHealth Provider Manual Series Acute Outpatient Hospital Manual	Subchapter Number and Title Appendix F. Revenue Codes	Page F-2
	Transmittal Letter AOH-22	Date 05/26/09

Revenue Code	Description
0302	Immunology
0304	Nonroutine dialysis
0305	Hematology
0306	Bacteriology and microbiology
0307	Urology
0309	Other
031X Laboratory Pathological – General	
0310	Laboratory pathological – general
0311	Cytology
0312	Histology
0314	Biopsy
0319	Other
032X Radiology - Diagnostic	
0320	General
0321	Angiocardiology
0322	Arthrography
0323	Arteriography
0324	Chest X ray
0329	Other
033X Radiology – Therapeutic and/or Chemotherapy Administration	
0330	General
0331	Chemotherapy administration – injected
0332	Chemotherapy – oral
0333	Radiation therapy
0335	Chemotherapy administration – IV
034X Nuclear Medicine	
0340	General
0341	Diagnostic
0342	Therapeutic
0343	Diagnostic radiopharmaceuticals
0349	Other
035X Computerized Tomographic (CT) Scans	
0350	General
0351	Head scan
0352	Body scan
0359	Other
036X Operating Room Services	
0360	General

Commonwealth of Massachusetts MassHealth Provider Manual Series Acute Outpatient Hospital Manual	Subchapter Number and Title Appendix F. Revenue Codes	Page F-3
	Transmittal Letter AOH-22	Date 05/26/09

Revenue Code	Description
0361	Minor surgery
037X Anesthesia	
0370	General
0371	Anesthesia incident to radiology
0372	Anesthesia incident to other diagnostic services
038X Blood	
0381	Packed red blood cells
0383	Plasma
0384	Platelets
0385	Leukocytes
0386	Other components
0387	Other derivatives
039X Blood Storage and Processing	
0390	General
0391	Administration
040X Other Imaging Services	
0400	General
0401	Diagnostic mammography
0402	Ultrasound
0403	Screening mammography
0404	Positron emission tomography (PET)
041X Respiratory Services	
0410	General
0412	Inhalation services
0413	Hyperbaric oxygen therapy
0419	Other
042X Physical Therapy	
0420	General
0421	Visit charge
0423	Group charge
0424	Evaluation or reevaluation
043X Occupational Therapy	
0430	General
0431	Visit charge
0433	Group rate
0434	Evaluation or reevaluation
044X Speech-Language Pathology	
0440	General
0441	Visit charge

Commonwealth of Massachusetts MassHealth Provider Manual Series Acute Outpatient Hospital Manual	Subchapter Number and Title Appendix F. Revenue Codes	Page F-4
	Transmittal Letter AOH-22	Date 05/26/09

Revenue Code	Description
0443	Group rate
0444	Evaluation or reevaluation
045X Emergency Room	
0450	General
0456	Urgent care
0459	Other ER
046X Pulmonary Function	
0460	General
0469	Other
047X Audiology	
0470	General
0471	Diagnostic
0472	Treatment
0479	Other
048X Cardiology	
0480	General
0481	Cardiac catheterization lab
0482	Stress test
0483	Echocardiology
0489	Other
049X Ambulatory Surgical Care	
0490	General
0499	Other
051X Clinic	
0510	General
0514	OB/GYN
0515	Pediatric clinic
0519	Other
053X Osteopathic Services	
0530	General
061X Magnetic Resonance Technology	
0610	General
0611	MRI – brain
0612	MRI – spinal cord
062X Medical/Surgical Supplies	
0621	Supplies incident to radiology
0622	Supplies incident to other diagnostic services
063X Pharmacy	
0634	EPO, less than 10,000 units

Commonwealth of Massachusetts MassHealth Provider Manual Series Acute Outpatient Hospital Manual	Subchapter Number and Title Appendix F. Revenue Codes	Page F-5
	Transmittal Letter AOH-22	Date 05/26/09

Revenue Code	Description
0635	EPO, 10,000 or more units
0636	Drugs requiring detail coding
0700	General
071X Recovery Room	
0710	General
072X Labor Room/Delivery	
0720	General
0721	Labor
0722	Delivery
073X EKG/ECG	
0730	General
0731	Holter monitor
0732	Telemetry
074X EEG	
0740	General
075X Gastroenterology	
0750	General
760X Treatment/Observation Room	
0761	Treatment room
0762	Observation room
077X Preventive Services	
0771	Vaccine administration
082X Hemodialysis	
0820	General
0821	Hemodialysis composite/other rate
0825	Support Services
083X Peritoneal Dialysis	
0830	General
0831	Peritoneal composite/other rate
0835	Support Services
084X CAPD	
0840	General
0841	CAPD composite/other rate
0845	Support Services
085X CCPD	
0850	General
0851	CCPD composite/other rate
0855	Support Services

Commonwealth of Massachusetts MassHealth Provider Manual Series Acute Outpatient Hospital Manual	Subchapter Number and Title Appendix F. Revenue Codes	Page F-6
	Transmittal Letter AOH-22	Date 05/26/09

Revenue Code	Description
090X Behavioral Health Treatments/Services	
0900	General
0901	Electroshock therapy
091X Behavioral Health Treatments/Services	
0914	Individual therapy
0918	Testing
092X Other Diagnostic Services	
0920	General
0921	Peripheral vascular lab
0922	Electromyelogram
0924	Allergy testing
0929	Other diagnostic service
094X Other Therapeutic Services	
0940	General
0942	Education/training
0943	Cardiac rehabilitation
0944	Drug rehabilitation
0945	Alcohol rehabilitation