



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
*www.mass.gov/masshealth*



MassHealth  
Transmittal Letter AOH-35  
July 2015

**TO:** Acute Outpatient Hospitals Participating in MassHealth  
**FROM:** Daniel Tsai, Assistant Secretary for MassHealth  
**RE:** *Acute Outpatient Hospital Manual* (Revised Service Codes)

DT

This letter transmits revisions to the service codes in the *Acute Outpatient Hospital Manual*. The Centers for Medicare & Medicaid Services (CMS) have revised the Healthcare Common Procedures Coding System (HCPCS) for 2015. The revised Subchapter 6 is effective for dates of service on or after January 1, 2015.

This transmittal letter comprises the list of nonpayable Current Procedural Terminology (CPT) codes and payable Level II HCPCS codes.

The revised Subchapter 6 reflects a code change when billing for the application of fluoride varnish, as well as code changes for lower-gastrointestinal endoscopy and drug testing. Section 604 (Modifiers) also includes updates to clarify and define the distinct procedural services that are included under Modifier 59.

Providers must refer to the American Medical Association's *Current Procedural Terminology (CPT) 2015* codebook or the *HCPCS Level II* codebook for the service descriptions of the codes listed in Subchapter 6 of the *Acute Outpatient Hospital Manual*.

### **Fluoride Varnish Billing Code Change**

Effective for dates of service on or after January 1, 2015, MassHealth has adopted CPT Service Code 99188 (application of topical fluoride varnish by a physician or other qualified health-care professional) with ICD-9 Diagnosis Code V07.31 to replace *Current Dental Terminology (CDT)* Service Code D1206.

Acute outpatient hospitals who submit claims for the application of fluoride varnish by hospital-based physicians to eligible MassHealth members younger than age 21 must use CPT Service Code 99188 with ICD-9 Diagnosis Code V07.31, beginning with dates of service on or after January 1, 2015.

Effective July 1, 2015, Service Code D1206 no longer will be covered for fluoride varnish claims submitted by hospitals when performed by pediatricians and other qualified hospital-based physicians. All claims submitted with this service code for dates of service on or before June 30, 2015, will be paid. Any claim submitted with Service Code D1206 for dates of service after June 30, 2015, will be denied.

**Fluoride Varnish Billing Requirements for CPT Service Code 99188**

Providers must submit claims for fluoride varnish services in accordance with applicable program regulations. When billing MassHealth, providers should use Service Code 99188 with Diagnosis Code V07.31 transmitted through the 837 I format or the CMS 1450 claim form.

For MassHealth managed care organization (MCO) members, providers must contact the appropriate MCO customer service center listed below.

Boston Medical Center HealthNet Plan: 1-888-566-0010  
 Fallon Health: 1-800-868-5200  
 Tufts Health Plan–Network Health: 1-888-257-1985  
 Neighborhood Health Plan: 1-866-414-5533  
 Health New England: 1-800-310-2835  
 CeltiCare Health: 1-855-678-6975

**Code Changes for Lower Gastrointestinal Endoscopy**

In the 2015 Medicare Physician Fee Schedule Final Rule, released October 31, 2014, CMS decided not to fully implement newly revised CPT codes for lower-gastrointestinal endoscopy. Instead, CMS established HCPCS G codes for certain lower-gastrointestinal endoscopy services. In alignment with CMS’s rule, MassHealth will require use of the HCPCS G codes for those lower-gastrointestinal endoscopy services rendered on or after January 1, 2015.

<b>Lower Gastrointestinal Endoscopy HCPCS G Codes Replacing Deleted 2014 CPT Codes</b>		
<b>2014 CPT Code</b>	<b>2015 HCPCS Code</b>	<b>Descriptor</b>
44383	G6018	Ileoscopy, through stoma; with transendoscopic stent placement (includes predilation)
44393	G6019	Colonoscopy through stoma; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
44397	G6020	Colonoscopy through stoma; with transendoscopic stent placement (includes predilation)
44799	G6021	Unlisted procedure, intestine
45339	G6022	Sigmoidoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique
45345	G6023	Sigmoidoscopy, flexible; with transendoscopic stent placement (includes predilation)
45383	G6024	Colonoscopy, flexible, proximal to splenic flexure; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery, or snare technique
45387	G6025	Colonoscopy, flexible, proximal to splenic flexure; with transendoscopic stent placement (includes predilation)

**New 2015 CPT Codes Not Recognized in 2015**

CMS additionally determined that certain 2015 CPT lower-gastrointestinal codes are not valid for Medicare purposes. Physicians were instructed to continue to bill as they would have in 2014. Therefore, consistent with CMS, MassHealth considers the following 2015 CPT procedure codes nonpayable and recommends that these services be reported as they were in 2014.

<b>2015 CPT Code</b>	<b>Descriptor</b>	<b>Per CMS 2015 Crosswalk, Codes to Bill</b>
44381	Small bowel endoscopy w/dilation	44380 or 44799
44403	Colonoscopy through stoma w/EMR	44388 or 44799
44404	C-stoma w/submucosal injection	44388 or 44799
44405	C-stoma w/dilation	44388 or 44799
44406	C-stoma w/ultrasound	44388 or 44799
44407	C-stoma w/US-guided FNA	44388 or 44799
44408	C-stoma w/decompression	44388 or 44799
45349	Flexible sigmoidoscopy w/EMR	45330 or 44799
45350	Flexible sigmoidoscopy w/band ligation (e.g., hemorrhoids)	45330 or 44799
45390	Colonoscopy w/EMR	45378 or 44799
45393	Colonoscopy w/decompression	45378 or 44799
45398	Colonoscopy w/band ligation (e.g., hemorrhoids)	45378 or 44799

**Code Changes for Drug Testing**

The American Medical Association adopted new code sections for Presumptive Drug Class Screening (CPT 80300–80304) and Definitive Drug Testing (CPT 80320-80377). MassHealth is following the CMS coverage determination for these code sections and has determined that these codes initially would not be included as covered service codes.

Providers should continue to bill for drug screening using HCPCS codes G0431 (Drug screen, qualitative; multiple drug classes by high complexity test method (e.g., immunoassay, enzyme assay), per patient encounter) and G0434 (Drug screen, other than chromatographic; any number of drug classes, by CLIA waived test or moderate complexity test, per patient encounter). Codes for quantitative and confirmatory testing that were deleted have been mapped to the codes listed in the following table.

<b>Deleted Code</b>	<b>2015 Replacement Code</b>	<b>Replacement Code Service Description</b>
80102	G6058	Drug confirmation, each procedure
80152	G6030	Assay of amitriptyline
80154	G6031	Assay of benzodiazepines
80160	G6032	Assay of desipramine
80166	G6034	Assay of doxepin
80172	G6035	Assay of gold
80174	G6036	Assay of imipramine
80182	G6037	Assay of nortriptyline
80196	G6038	Assay of salicylate
82003	G6039	Assay of acetaminophen
82055	G6040	Assay of alcohol (ethanol); any specimen except for breath
82101	G6041	Alkaloids, urine, quantitative
82145	G6042	Assay of amphetamine or methamphetamine
82205	G6043	Assay of barbiturates, not elsewhere specified
82520	G6044	Assay of cocaine or metabolite
82646	G6045	Assay of dihydrocodeinone
82649	G6046	Assay of dihydromorphinone
82651	G6047	Assay of dihydrotestosterone

Deleted Code	2015 Replacement Code	Replacement Code Service Description
82654	G6048	Assay of dimethadione
82666	G6049	Assay of epiandrosterone
82690	G6050	Assay of ethchlorvynol
82742	G6051	Assay of flurazepam
83805	G6052	Assay of meprobamate
83840	G6053	Assay of methadone
83858	G6054	Assay of methsuximide
83887	G6055	Assay of nicotine
83925	G6056	Opiate(s), drug and metabolites, each procedure
84022	G6057	Assay of phenothiazine
84600	82441	Chlorinated hydrocarbons, screen

### Quantitative Drug Test Edit

In *Independent Clinical Laboratory Provider Bulletin 9*, MassHealth established claim edits that do not allow payment for quantitative drug test codes billed on the same date of service as drug screen service codes. Effective January 1, 2015, this edit has been updated to reflect the code changes made for quantitative drug test codes.

Primary Procedure Codes	Secondary Procedure Codes	EOB Code/Description
<b>G0431</b> – Drug screen, qualitative; multiple drug classes by high complexity test method (e.g., immunoassay, enzyme assay), per patient encounter  and/or	<b>80299</b> – Quantification of therapeutic drug, not elsewhere specified <b>82570</b> – Creatinine; other source <b>82575</b> – Creatinine; clearance <b>83986</b> – pH; body fluid, not otherwise specified	<b>8304</b> – Lab conflict w/ each other on the same day

Primary Procedure Codes	Secondary Procedure Codes	EOB Code/Description
<b>G0434</b> – Drug screen, other than chromatographic; any number of drug classes, by CLIA waived test or moderate complexity test, per patient encounter	<b>83992</b> – Phencyclidine <b>G6031</b> – Assay of benzodiazepines <b>G6040</b> – Assay of alcohol (ethanol); any specimen except for breath <b>G6042</b> – Assay of amphetamine or methamphetamine <b>G6043</b> – Assay of barbiturates, not elsewhere specified <b>G6044</b> – Assay of cocaine or metabolite <b>G6052</b> – Assay of meprobamate <b>G6053</b> – Assay of methadone <b>G6055</b> – Assay of nicotine <b>G6056</b> – Opiate(s), drug and metabolites, each procedure	

**MassHealth Website**

This transmittal letter and attached pages are available on the MassHealth website at [www.mass.gov/masshealth](http://www.mass.gov/masshealth).

**Questions**

If you have any questions about the information in this transmittal letter, please contact the MassHealth Customer Service Center at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto: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 6-1 through 6-16

**OBSOLETE MATERIAL**

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

Acute Outpatient Hospital Manual

Pages 6-1 through 6-16 — transmitted by Transmittal Letter AOH-33

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## 601 Introduction

MassHealth providers must refer to the official list of HCPCS codes and descriptions posted on the Centers for Medicare & Medicaid Services HCPCS website when billing for services provided to MassHealth members. For a list of billable revenue codes, please refer to Appendix F of the *Acute Outpatient Hospital Manual*.

### CPT Codes

MassHealth pays for services billed using all medicine, radiology, laboratory, surgery, and anesthesia Current Procedural Terminology (CPT) codes in effect at the time of service, except for those codes listed in Section 602 of this subchapter, subject to all conditions and limitations described in MassHealth regulations at 130 CMR 410.000 and 450.000, and in the most current *Acute Hospital Request for Application*.

### Level II HCPCS Codes

MassHealth pays for services billed using only those Level II HCPCS codes listed in Section 603 of this subchapter that are in effect at the time of service, subject to all conditions and limitations described in MassHealth regulations at 130 CMR 410.000 and 450.000, and in the most current *Acute Hospital Request for Application*.

### Early and Periodic Screening, Diagnosis and Treatment Services (EPSDT)

An acute outpatient hospital provider may request prior authorization (PA) for any medically necessary service reimbursable under the federal Medicaid Act in accordance with 130 CMR 450.144, 42 U.S.C. 1396d(a), and 42 U.S.C. 1396d(r)(5) for a MassHealth Standard or CommonHealth member younger than 21 years of age, even if it is not designated as covered or payable in Subchapter 6 of the *Acute Outpatient Hospital Manual*.

## 602 Nonpayable CPT Codes

MassHealth does not ordinarily pay for services billed under the following codes and code ranges.

0001F	0048T	0085T	0109T	0158T
0005F	0050T	0092T	0110T	0159T
0012F	0051T	0095T	0111T	0160T
0014F	0052T	0098T	0123T	0161T
0015F	0053T	0099T	0124T	0163T
4002F	0071T	0100T	0126T	0164T
4006F	0072T	0101T	0130T	0165T
4009F	0073T	0102T	0140T	0166T
4011F	0075T	0103T	0141T	0167T
0016T	0076T	0104T	0142T	0168T
0017T	0078T	0105T	0143T	0169T
0019T	0079T	0106T	0155T	0171T
0030T	0080T	0107T	0156T	0172T
0042T	0081T	0108T	0157T	0173T

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602 Nonpayable CPT Codes (cont.)

0174T	00100	19364	21180	22114
0175T	through	19367	21182	22116
0176T	01999	19368	21183	22206
0177T	10040	19369	21184	22207
0178T	11004	19396	21188	22208
0179T	11005	20660	21193	22210
0180T	11006	20661	21194	22212
0181T	11008	20664	21196	22214
0182T	11922	20802	21245	22216
0183T	11950	20805	21246	22220
0184T	11951	20808	21247	22222
0185T	11952	20816	21248	22224
0186T	11954	20824	21249	22226
0187T	15756	20827	21255	22318
0188T	15757	20838	21256	22319
0189T	15758	20930	21268	22325
0190T	15781	20931	21343	22326
0191T	15782	20936	21344	22327
0192T	15783	20937	21346	22328
0193T	15786	20938	21347	22526
0195T	15787	20955	21348	22527
0196T	15788	20956	21366	22532
0197T	15789	20957	21386	22533
0198T	15792	20962	21387	22534
0199T	15793	20969	21395	22548
0200T	15819	20970	21422	22552
0201T	15824	20985	21423	22554
0202T	15825	21045	21431	22556
0203T	15826	21120	21432	22558
0204T	15828	21121	21433	22585
0205T	15829	21122	21435	22586
0206T	15847	21123	21436	22590
0207T	15876	21125	21510	22595
0219T	15877	21127	21615	22600
0220T	15878	21141	21616	22610
0235T	15879	21142	21620	22630
0254T	16036	21143	21627	22633
0255T	17340	21145	21630	22634
0262T	17360	21146	21632	22632
0266T	17380	21147	21705	22800
0281T	19271	21151	21740	22802
0293T	19272	21154	21750	22804
0294T	19305	21155	21825	22808
0309T	19306	21159	22010	22810
0312T	19316	21160	22015	22812
0345T	19355	21172	22110	22818
0375T	19361	21179	22112	22819



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602 Nonpayable CPT Codes (cont.)

22830	27025	27244	27580	32035
22840	27030	27245	27590	32036
22841	27036	27248	27591	32095
22842	27054	27253	27592	32096
22843	27070	27254	27596	32097
22844	27071	27258	27598	32098
22845	27075	27259	27645	32100
22846	27076	27268	27646	32110
22847	27077	27269	27702	32120
22848	27078	27280	27703	32124
22849	27079	27282	27712	32140
22850	27090	27284	27715	32141
22852	27091	27286	27724	32150
22855	27120	27290	27725	32151
22856	27122	27295	27727	32160
22857	27125	27303	27880	32200
22858	27130	27365	27881	32215
22861	27132	27445	27882	32220
22862	27134	27447	27886	32225
22864	27137	27448	27888	32310
22865	27138	27450	28800	32320
23200	27140	27454	28805	32402
23210	27146	27455	31225	32440
23220	27147	27457	31230	32442
23332	27151	27465	31290	32445
23335	27156	27466	31291	32480
23472	27158	27468	31360	32482
23474	27161	27470	31365	32484
23900	27165	27472	31367	32486
23920	27170	27477	31368	32488
24900	27175	27479	31370	32491
24920	27176	27485	31375	32500
24930	27177	27486	31380	32501
24931	27178	27487	31382	32503
24940	27179	27488	31390	32504
25900	27181	27495	31395	32505
25905	27185	27506	31584	32506
25909	27187	27507	31587	32507
25915	27215	27511	31725	32540
25920	27217	27513	31760	32650
25924	27218	27514	31766	32651
25927	27222	27519	31770	32652
26551	27226	27535	31775	32653
26553	27227	27536	31780	32654
26554	27228	27540	31781	32655
26556	27232	27556	31786	32656
26992	27236	27557	31800	32657
27005	27240	27558	31805	32658

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32659	33250	33427	33611	33778
32660	33251	33430	33612	33779
32661	33254	33460	33615	33780
32662	33255	33463	33617	33781
32663	33256	33464	33619	33782
32664	33257	33465	33620	33783
32665	33258	33468	33621	33786
32666	33259	33470	33622	33788
32667	33261	33471	33641	33800
32668	33265	33474	33645	33802
32669	33266	33475	33647	33803
32670	33300	33476	33660	33813
32671	33305	33478	33665	33814
32672	33310	33496	33670	33820
32673	33315	33500	33675	33822
32674	33320	33501	33676	33824
32800	33321	33502	33677	33840
32810	33322	33503	33681	33845
32815	33330	33504	33684	33851
32820	33361	33505	33688	33852
32850	33362	33506	33690	33853
32851	33363	33507	33692	33860
32852	33364	33510	33694	33861
32853	33365	33511	33697	33863
32854	33366	33512	33702	33864
32855	33367	33513	33710	33870
32856	33368	33514	33720	33875
32900	33369	33516	33722	33877
32905	33335	33517	33724	33880
32906	33400	33518	33726	33881
32940	33401	33519	33730	33883
32997	33403	33521	33732	33884
33015	33404	33522	33735	33886
33020	33405	33523	33736	33889
33025	33406	33530	33737	33891
33030	33410	33533	33750	33910
33031	33411	33534	33755	33915
33050	33412	33535	33762	33916
33120	33413	33536	33764	33917
33130	33414	33542	33766	33920
33140	33415	33545	33767	33922
33141	33416	33548	33768	33924
33202	33417	33572	33770	33925
33203	33418	33600	33771	33926
33236	33420	33602	33774	33930
33237	33422	33606	33775	33933
33238	33425	33608	33776	33935
33243	33426	33610	33777	33940

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33944	34451	35142	35518	35651
33945	34502	35151	35521	35654
33946	34800	35152	35522	35656
33947	34802	35182	35523	35661
33949	34803	35189	35525	35663
33951	34804	35211	35526	35665
33952	34805	35216	35531	35666
33953	34806	35221	35533	35671
33954	34808	35241	35535	35681
33955	34812	35246	35536	35682
33956	34813	35251	35537	35683
33957	34820	35271	35538	35691
33958	34825	35276	35539	35693
33959	34826	35281	35540	35694
33962	34830	35301	35548	35695
33963	34831	35302	35549	35697
33964	34832	35303	35551	35700
33965	34833	35304	35556	35701
33966	34834	35305	35558	35721
33967	34841	35306	35560	35741
33968	34842	35311	35563	35800
33969	34843	35331	35565	35820
33970	34844	35341	35566	35840
33971	34845	35351	35570	35870
33973	34846	35355	35571	35901
33974	34847	35361	35583	35905
33975	34878	35363	35585	35907
33976	34900	35371	35587	36415
33977	35001	35372	35600	36416
33978	35002	35390	35601	36468
33979	35005	35400	35606	36591
33980	35013	35450	35612	36592
33981	35021	35452	35616	36598
33982	35022	35454	35621	36660
33983	35045	35456	35623	36823
33984	35081	35480	35626	37127
33985	35082	35481	35631	37140
33986	35091	35482	35632	37145
33987	35092	35483	35633	37160
33989	35102	35501	35634	37180
33990	35103	35506	35636	37181
33991	35111	35508	35637	37182
33992	35112	35509	35638	37215
33993	35121	35510	35642	37217
34001	35122	35511	35645	37616
34051	35131	35512	35646	37617
34151	35132	35515	35647	37618
34401	35141	35516	35650	37660

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37765	42961	43401	43860	44206
37766	42971	43405	43865	44207
37788	43045	43410	43880	44208
38100	43100	43415	43881	44210
38101	43101	43420	43882	44211
38102	43107	43425	44005	44212
38115	43108	43460	44010	44213
38380	43112	43496	44015	44227
38381	43113	43500	44020	44300
38382	43116	43501	44021	44310
38562	43117	43502	44025	44314
38564	43118	43520	44050	44316
38724	43121	43605	44055	44320
38746	43122	43610	44110	44322
38747	43123	43611	44111	44345
38765	43124	43620	44120	44346
38770	43135	43621	44121	44602
38780	43279	43622	44125	44603
39000	43282	43631	44126	44604
39010	43283	43632	44127	44605
39200	43300	43633	44128	44615
39220	43305	43634	44130	44620
39499	43310	43635	44132	44625
39501	43312	43640	44133	44626
39502	43313	43641	44135	44640
39503	43314	43644	44136	44650
39520	43320	43645	44137	44660
39530	43324	43752	44139	44661
39531	43325	43770	44140	44680
39540	43326	43771	44141	44700
39541	43327	43772	44143	44715
39545	43328	43773	44144	44720
39560	43330	43774	44145	44721
39561	43331	43775	44146	44800
39599	43332	43800	44147	44820
41130	43333	43810	44150	44850
41135	43334	43820	44151	44899
41140	43335	43825	44155	44900
41145	43336	43832	44156	44950
41150	43337	43840	44157	44955
41153	43338	43842	44158	44960
41155	43340	43843	44160	45110
41870	43341	43845	44187	45111
41872	43351	43846	44188	45112
42426	43352	43847	44202	45113
42845	43360	43848	44203	45114
42894	43361	43850	44204	45116
42953	43400	43855	44205	45119

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602 Nonpayable CPT Codes (cont.)

45120	47146	48150	50075	50722
45121	47147	48152	50100	50725
45123	47300	48153	50120	50727
45126	47350	48154	50125	50728
45130	47360	48155	50130	50740
45135	47361	48160	50135	50750
45136	47362	48400	50205	50760
45395	47380	48500	50220	50770
45397	47381	48510	50225	50780
45400	47400	48520	50230	50782
45402	47420	48540	50234	50783
45540	47425	48545	50236	50785
45550	47460	48547	50240	50800
45562	47480	48548	50250	50810
45563	47550	48551	50280	50815
45800	47570	48552	50290	50820
45805	47600	48554	50300	50825
45820	47605	48556	50320	50830
45825	47610	49000	50323	50840
46705	47612	49002	50325	50845
46710	47620	49010	50327	50860
46712	47700	49020	50328	50900
46715	47701	49040	50329	50920
46716	47711	49060	50340	50930
46730	47712	49062	50360	50940
46735	47715	49203	50365	51060
46740	47720	49204	50370	51525
46742	47721	49205	50380	51530
46744	47740	49215	50400	51550
46746	47741	49220	50405	51555
46748	47760	49255	50500	51565
46751	47765	49412	50520	51570
47010	47780	49425	50525	51575
47015	47785	49428	50526	51580
47100	47800	49605	50540	51585
47120	47801	49606	50545	51590
47122	47802	49610	50546	51595
47125	47900	49611	50547	51596
47130	48000	49900	50548	51597
47133	48001	49904	50600	51701
47135	48020	49905	50605	51702
47136	48100	49906	50610	51800
47140	48105	50010	50620	51820
47141	48120	50040	50630	51840
47142	48140	50045	50650	51841
47143	48145	50060	50660	51845
47144	48146	50065	50700	51860
47145	48148	50070	50715	51865

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602 Nonpayable CPT Codes (cont.)

51900	57308	59072	61315	61557
51920	57311	59120	61316	61558
51925	57531	59121	61320	61559
51940	57540	59130	61321	61563
51960	57545	59135	61322	61564
51980	58140	59136	61323	61566
53415	58146	59140	61332	61567
53448	58150	59325	61333	61570
54125	58152	59350	61340	61571
54130	58180	59412	61343	61575
54135	58200	59514	61345	61576
54332	58210	59525	61450	61580
54336	58240	59620	61458	61581
54390	58267	59830	61460	61582
54411	58275	59850	61480	61583
54417	58280	59851	61500	61584
54430	58285	59852	61501	61585
54535	58293	59855	61510	61586
54650	58400	59856	61512	61590
55605	58410	59857	61514	61591
55650	58520	59897	61516	61592
55801	58540	60254	61517	61595
55810	58548	60270	61518	61596
55812	58605	60505	61519	61597
55815	58611	60521	61520	61598
55821	58700	60522	61521	61600
55831	58720	60540	61522	61601
55840	58740	60545	61524	61605
55842	58750	60600	61526	61606
55845	58752	60605	61530	61607
55862	58760	60650	61531	61608
55865	58822	61105	61533	61610
55866	58825	61107	61534	61611
56630	58940	61108	61535	61612
56631	58943	61120	61536	61613
56632	58950	61140	61537	61615
56633	58951	61150	61538	61616
56634	58952	61151	61539	61618
56637	58953	61154	61540	61619
56640	58954	61156	61541	61624
57110	58956	61210	61543	61630
57111	58957	61250	61544	61635
57112	58958	61253	61545	61640
57270	58960	61304	61546	61641
57280	58970	61305	61548	61642
57296	58974	61312	61550	61680
57305	58976	61313	61552	61682
57307	59070	61314	61556	61684

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602 Nonpayable CPT Codes (cont.)

61686	62220	63273	69535	81226
61690	62223	63275	69554	81227
61692	62256	63276	69950	81228
61697	62258	63277	71552	81229
61698	62287	63278	72159	81240
61700	63043	63280	72198	81241
61702	63044	63281	73225	81242
61703	63050	63282	74263	81243
61705	63051	63283	75571	81244
61708	63076	63285	75900	81245
61710	63077	63286	75952	81250
61711	63078	63287	75953	81251
61735	63081	63290	75954	81255
61750	63082	63295	75956	81256
61751	63085	63300	75957	81257
61760	63086	63301	75958	81260
61850	63087	63302	75959	81261
61860	63088	63303	76140	81262
61863	63090	63304	76496	81263
61864	63091	63305	76497	81264
61867	63101	63306	76498	81265
61868	63102	63307	78267	81266
61870	63103	63308	78268	81267
62005	63170	63700	78351	81268
62010	63172	63702	80100	81270
62100	63173	63704	80101	81275
62115	63180	63706	80104	81280
62117	63182	63707	80502	81281
62120	63185	63709	81200	81282
62121	63190	63710	81205	81290
62140	63191	63740	81206	81291
62141	63194	63752	81207	81292
62142	63195	64755	81208	81293
62143	63196	64760	81209	81294
62145	63197	64809	81210	81295
62146	63198	64818	81211	81296
62147	63199	64866	81212	81297
62148	63200	64868	81213	81298
62161	63250	65273	81214	81299
62162	63251	65760	81215	81300
62163	63252	65765	81216	81301
62164	63265	65767	81217	81302
62165	63266	65771	81220	81303
62180	63267	65780	81221	81304
62190	63268	65781	81222	81310
62192	63270	65782	81223	81315
62200	63271	69090	81224	81316
62201	63272	69155	81225	81317

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602 Nonpayable CPT Codes (cont.)

81318	86891	89280	90701	92354
81319	86910	89281	90702	92355
81330	86911	89290	90708	92358
81331	86927	89291	90710	92371
81332	86930	89300	90712	92531
81340	86931	89310	90718	92532
81341	86932	89320	90720	92533
81342	86960	89321	90721	92534
81350	86985	89322	90723	92540
81355	87150	89325	90739	92548
81370	87153	89329	90743	92550
81371	87493	89330	90744	92559
81372	87903	89331	90748	92560
81373	87904	89335	90816	92561
81374	88000	89342	90817	92562
81375	88005	89343	90818	92564
81376	88007	89344	90819	92570
81377	88012	89346	90821	92630
81378	88014	89352	90822	92633
81379	88016	89353	90823	92970
81380	88020	89354	90824	92971
81381	88025	89356	90826	92975
81382	88027	89398	90827	92992
81383	88028	90281	90828	92993
81400	88029	90283	90829	93583
81401	88036	90284	90845	93660
81402	88037	90287	90865	93770
81403	88040	90379	90875	93786
81404	88045	90384	90876	94005
81405	88099	90386	90880	94011
81406	88125	90389	90885	94012
81407	88333	90396	90889	94013
81408	88334	90586	90901	94015
81508	88738	90633	90911	94774
81511	88749	90634	90940	94775
82075	89250	90644	90989	94776
82962	89251	90645	90993	94777
83987	89253	90646	90997	95052
84145	89254	90647	90999	95120
84431	89255	90648	91132	95125
84793	89257	90653	91133	95130
86079	89258	90654	92314	95131
86305	89259	90665	92315	95132
86352	89260	90669	92316	95133
86780	89261	90670	92317	95134
86825	89264	90696	92325	95824
86826	89268	90698	92352	95965
86890	89272	90700	92353	95966



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95967	98960	99184	99345	99449
95992	98961	99190	99347	99450
96000	98962	99191	99348	99455
96001	98966	99192	99349	99456
96002	98967	99199	99350	99462
96003	98968	99251	99354	99466
96004	98969	99252	99355	99467
96150	99000	99253	99356	99468
96151	99001	99254	99357	99469
96152	99002	99255	99358	99471
96153	99024	99288	99359	99472
96154	99026	99304	99360	99475
96155	99027	99305	99374	99476
96376	99050	99306	99375	99477
96567	99051	99307	99377	99478
96902	99053	99308	99378	99479
96904	99056	99309	99379	99480
97005	99058	99310	99380	99499
97006	99060	99315	99401	99500
97537	99071	99316	99402	99501
97545	99075	99318	99403	99502
97546	99078	99324	99404	99503
97597	99080	99325	99406	99504
97598	99082	99326	99408	99505
97602	99090	99327	99409	99506
97605	99091	99328	99411	99507
97606	99100	99334	99412	99509
97755	99116	99335	99420	99510
97810	99135	99336	99429	99511
97811	99140	99337	99441	99512
97813	99143	99339	99442	99600
97814	99144	99340	99443	99601
98940	99148	99341	99444	99602
98941	99149	99342	99446	99605
98942	99150	99343	99447	99606
98943	99172	99344	99448	99607

603 Payable Level II HCPCS Codes

The following Level II HCPCS codes represent services that are covered by MassHealth when provided by AOHs, including hospital-licensed health centers (HLHCs) and other satellite clinics.

A4641	A9537	G0204	G0379	G0115
A9500	G0105	G0206	G0424	G6018
A9502	G0108	G0270	G0431	G6019
A9503	G0109	G0271	G0434	G6020
A9505	G0121	G0279	G6001	G6021
A9512	G0202	G0378	through	G6022

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603 Payable Level II HCPCS Codes (cont.)

G6023	J0840	J1745	J2794	J7323
G6024	J0881	J1750	J2796	J7324
G6025	J0882	J1786	J2820	J7325
J0129	J0885	J1790	J2910	J7326
J0131	J0886	J1800	J2916	J7327
J0135	J0887	J1826	J2920	J7336
J0153	J0888	J1885	J2930	J7599
J0171	J0897	J1890	J2940	J7608
J0207	J1020	J1950	J2941	J7614
J0215	J1030	J1956	J3010	J7620
J0221	J1040	J1990	J3030	J7626
J0256	J1055	J2060	J3095	J7633
J0257	J1056	J2150	J3110	J7639
J0290	J1071	J2175	J3121	J7644
J0295	J1094	J2248	J3145	J7665
J0348	J1100	J2250	J3230	J7669
J0456	J1160	J2265	J3240	J7676
J0461	J1170	J2270	J3243	J7682
J0475	J1200	J2274	J3250	J7686
J0476	J1260	J2300	J3262	J7699
J0490	J1290	J2310	J3301	J7799
J0558	J1300	J2315	J3302	J8561
J0561	J1320	J2323	J3303	J8562
J0571	J1322	J2355	J3357	J9000
J0572	J1438	J2357	J3360	J9001
J0573	J1439	J2358	J3385	J9002
J0574	J1440	J2405	J3396	J9025
J0575	J1441	J2430	J3410	J9031
J0585	J1460	J2440	J3411	J9035
J0586	J1557	J2469	J3430	J9040
J0587	J1559	J2503	J3487	J9041
J0588	J1561	J2505	J3490	J9043
J0592	J1562	J2507	J3590	J9045
J0597	J1566	J2510	J7030	J9055
J0598	J1569	J2515	J7060	J9060
J0638	J1571	J2550	J7070	J9130
J0640	J1580	J2560	J7131	J9155
J0690	J1599	J2562	J7181	J9171
J0694	J1626	J2675	J7182	J9178
J0696	J1630	J2680	J7200	J9179
J0697	J1650	J2704	J7201	J9181
J0702	J1655	J2760	J7302	J9190
J0715	J1670	J2778	J7303	J9201
J0718	J1710	J2785	J7304	J9202
J0775	J1720	J2788	J7307	J9206
J0780	J1725	J2790	J7309	J9212
J0833	J1740	J2792	J7312	J9213
J0834	J1743	J2793	J7321	J9214

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603 Payable Level II HCPCS Codes (cont.)

J9215	J9267	J9360	L8691	Q4108
J9216	J9293	J9370	Q0081	Q4110
J9217	J9300	J9390	Q0083	Q4111
J9218	J9301	J9395	Q0084	Q4112
J9219	J9302	J9999	Q4100	Q4113
J9228	J9305	L8614	Q4101	Q4114
J9250	J9307	L8615	Q4102	Q4115
J9260	J9310	L8616	Q4103	S0023
J9261	J9315	L8617	Q4104	S0028
J9263	J9340	L8618	Q4105	S0077
J9264	J9351	L8619	Q4106	S0302
J9266	J9355	L8690	Q4107	S2083

604 Modifiers

The following service code modifiers are allowed for billing under the MassHealth *Acute Outpatient Hospital Manual* for payable services.

<u>Modifier</u>	<u>Description</u>
22	Increased procedural services
24	Unrelated evaluation and management service by the same physician during a postoperative period
25	Significant, separately identifiable evaluation and management service by the same physician or other qualified health care professional on the same day of the procedure or other service
27	Multiple outpatient hospital E/M encounters on the same date
50	Bilateral procedure
51	Multiple procedures
52	Reduced services
53	Discontinued procedure
57	Decision for surgery
58	Staged or related procedure or service by the same physician or other qualified health care professional during the postoperative period
59	Distinct procedural service
63	Procedure performed on infants less than 4 kg
73	Discontinued outpatient procedure prior to anesthesia administration
74	Discontinued outpatient procedure after anesthesia administration
76	Repeat procedure or service by same physician or other qualified health care professional
77	Repeat procedure or service by another physician or other qualified health care professional
78	Unplanned return to the operating/procedure room by the same physician or other qualified health care professional following initial procedure for a related procedure during the postoperative period
79	Unrelated procedure or service by the same physician or other qualified health care professional during the postoperative period
80	Assistant surgeon
90	Reference (outside) laboratory
91	Repeat clinical diagnostic laboratory test

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604 Modifiers (cont.)

<u>Modifier</u>	<u>Description</u>
99	Multiple modifiers
BL	Special acquisition of blood and blood products
CA	Procedure payable only in the inpatient setting when performed emergently on an outpatient who expires prior to admission
CR	Catastrophe/disaster related
E1	Upper left, eyelid
E2	Lower left, eyelid
E3	Upper right, eyelid
E4	Lower right, eyelid
F1	Left hand, second digit
F2	Left hand, third digit
F3	Left hand, fourth digit
F4	Left hand, fifth digit
F5	Right hand, thumb
F6	Right hand, second digit
F7	Right hand, third digit
F8	Right hand, fourth digit
F9	Right hand, fifth digit
FA	Left hand, thumb
FB	Item provided without cost to provider, supplier or practitioner, or full credit received for replaced device (examples, but not limited to, covered under warranty, replaced due to defect, free samples)
GA	Waiver of liability statement issued as required by payer policy, individual case.
GG	Performance and payment of a screening mammogram and diagnostic mammogram on the same patient, same day
GH	Diagnostic mammogram converted from screening mammogram on the same day
LC	Left circumflex, coronary artery
LD	Left anterior descending coronary artery
LT	Left side (used to identify procedures performed on the left side of the body)
Q1	Routine clinical service provided in a clinical research study that is in an approved clinical research study
QM	Ambulance service provided under arrangement by a provider of services
QN	Ambulance service furnished directly by a provider of services
RC	Right coronary artery
RT	Right side (used to identify procedures performed on the right side of the body)
T1	Left foot, second digit
T2	Left foot, third digit
T3	Left foot, fourth digit
T4	Left foot, fifth digit
T5	Right foot, great digit
T6	Right foot, second digit
T7	Right foot, third digit
T8	Right foot, fourth digit
T9	Right foot, fifth digit

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604 Modifiers (cont.)

Modifier    Description

TA	Left foot, great toe
U5	Medicaid level of care 5, as defined by each state
U6	Medicaid level of care 6, as defined by each state
U7	Medicaid level of care 7, as defined by each state
U8	Medicaid level of care 8, as defined by each state
U9	Medicaid level of care 9, as defined by each state
XE	Separate Encounter: a service that is distinct because it occurred during a separate encounter
XP	Separate Practitioner: a service that is distinct because it was performed by a different practitioner
XS	Separate Structure: a service that is distinct because it was performed on a separate organ/structure
XU	Unusual Non-Overlapping Service: the use of a service that is distinct because it does not overlap usual components of the main service

Modifiers for Behavioral Health Screening

The administration and scoring of standardized behavioral health screening tools selected from the approved menu of tools found in Appendix W of your MassHealth provider manual is covered for members (except MassHealth Limited) from birth to 21 years of age. Service Code 96110 must be accompanied by one of the modifiers listed below to indicate whether a behavioral health need was identified. “Behavioral health need identified” means the provider administering the screening tool, in her or his professional judgment, identified a child with a potential behavioral health services need.

U1	Completed behavioral health screening using a standardized behavioral health screening tool selected from the approved menu of tools found in Appendix W of your MassHealth provider manual with no behavioral health need identified.
U2	Completed behavioral health screening using a standardized behavioral health screening tool selected from the approved menu of tools found in Appendix W of your MassHealth provider manual and behavioral health need identified.

Modifiers for Tobacco-Cessation Services

The following modifiers are used in combination with Service Code 99407 to report tobacco-cessation counseling. Service Code 99407 (Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes) may also be billed without a modifier to report an individual smoking and tobacco use cessation counseling visit of at least 30 minutes.

HQ	Group counseling, at least 60-90 minutes
TF	Intermediate level of care, at least 45 minutes

Modifier for Child and Adolescent Needs and Strengths (CANS)

HA	Service code 90801 must be accompanied by this modifier to indicate that the Child and Adolescent Needs and Strengths is included in the assessment.
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604 Modifiers (cont.)

Modifiers for Provider Preventable Conditions That Are National Coverage Determinations

- PA Surgical or other invasive procedure on wrong body part
- PB Surgical or other invasive procedure on wrong patient
- PC Wrong surgery or other invasive procedure on patient

For more information on the use of these modifiers, see Appendix V of your provider manual.

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