

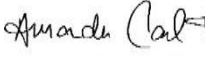


Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Office of Medicaid  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)



MassHealth  
Transmittal Letter AOH-53--Corrected  
October 2022

**TO:** Acute Outpatient Hospitals Participating in MassHealth

**FROM:** Amanda Cassel Kraft, Assistant Secretary for MassHealth 

**RE:** *Acute Outpatient Hospital Manual (2022 HCPCS Updates to Subchapter 6)*

This letter transmits revisions to Subchapter 6 of the *Acute Outpatient Hospital Manual*. The Centers for Medicare & Medicaid Services (CMS) has revised the Healthcare Common Procedures Coding System (HCPCS). MassHealth has consequently updated Subchapter 6 to (1) conform to the most recent publications of 2022 CPT and HCPCS; 2) add coverage code for Sonata™ transcervical fibroid ablation; 3) add coverage code for treatment of chronic venous disease; 4) add coverage code for smoking and tobacco use cessation; and 5) update development and behavioral screening service codes and modifiers to account for changes in coverage and payment policies.

#### 1. 2022 HCPCS/CPT Updates

These 2022 HCPCS/CPT coding updates are effective for dates of service on or after January 1, 2022.

#### 2. Sonata™ Transcervical Fibroid Ablation

Effective for dates of service on or after June 1, 2022, MassHealth is providing coverage for Sonata™ transcervical fibroid ablation for members with uterine fibroids who meet certain clinical criteria. The code is 0404T.

#### 3. Treatment of Chronic Venous Disease—Updates Related to the Treatment of Lower-Extremity Varicose Veins

Effective for dates of service on or after June 1, 2022, MassHealth is adding cyanoacrylate glue sclerotherapy to its current list of acceptable methods for treating varicose veins. MassHealth will cover this procedure through CPT codes 36482 and 36483.

#### 4. Smoking and Tobacco Use Cessation Visit Code

Effective for dates of service on or after June 1, 2022, MassHealth is providing coverage for service code 99406, “Smoking and tobacco use cessation counseling visit: intermediate, greater than 3 minutes up to 10 minutes.”

5. Changes to Developmental and Behavioral Health Screening Services

Effective for dates of service on or after June 1, 2022, the text of section 605 of the Subchapter 6 is replaced by the following:

The administration and scoring of standardized developmental or behavioral health-screening tools selected from the list referenced in Appendix W of your provider manual, is covered for members (except MassHealth Limited) from birth to 21 years of age. Service codes 96110 and 96127 must be accompanied by one of the modifiers listed below to indicate whether a developmental or behavioral health need was identified. “Developmental need identified” means the provider administering the screening tool, in their professional judgment, identified a child with a potential developmental health services need. “Behavioral health need identified” means that the provider administering the screening tool, in their professional judgment, identified a child with a potential behavioral health services need.

Beginning September 1, 2022, you may start using 96127 for tracking purposes.

<u>Service Code</u>	<u>Modifier</u>	<u>Description</u>
96110	U1	Covered for members birth through 3 years old for the administration and scoring of a standardized developmental health screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with no developmental health need identified.
96110	U2	Covered for members birth through 3 years old for the administration and scoring of a standardized developmental health screening selected from the list referenced in Appendix W of your MassHealth provider manual; with developmental health need identified
96110	U3	Covered for members 18- and 24 months for the administration and scoring of a standardized Autism screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with no further follow up needed
96110	U4	Covered for members 18- and 24 months for the administration and scoring of a standardized Autism screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with further follow up needed.
96127	U1	Covered for members 4 to 21 years old for the administration and scoring of a standardized behavioral health screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with no behavioral health need identified.
96127	U2	Covered for members 4 to 21 years old for the administration and scoring of a standardized behavioral health screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with behavioral health need identified.
96110	UD	Covered for members birth to 6 months for the administration and scoring of the Edinburgh Postnatal Depression Scale with member’s caregiver. UD must be used together with either U1 or U2

Service Code S3005 must be used by acute outpatient hospitals when billing MassHealth for the administration and scoring of a MassHealth-approved, standardized, perinatal depression screening tool. Code S3005 must be accompanied by one of the modifiers listed below.

<u>Modifier</u>	<u>Description</u>
U1	Perinatal care provider completed prenatal or postpartum depression screening and behavioral health need identified (positive screen)
U2	Perinatal care provider completed prenatal or postpartum depression screening with no behavioral health need identified (negative screen)

Please refer to the Massachusetts Department of Public Health's (DPH) postpartum depression (PPD) screening tool grid for any revisions to the list of MassHealth-approved screening tools: [www.mass.gov/service-details/postpartum-depression-resources-for-healthcare-providers](http://www.mass.gov/service-details/postpartum-depression-resources-for-healthcare-providers).

### **MassHealth Website**

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

[Sign up](#) to receive email alerts when MassHealth issues new transmittal letters and provider bulletins.

### **NEW MATERIAL**

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

#### Acute Outpatient Hospital Manual

Pages 6-1 through 6-32

### **OBSOLETE MATERIAL**

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

#### Acute Outpatient Hospital Manual

Pages 6-1 through 6-30 — transmitted by Transmittal Letter AOH-49

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>	<b>Subchapter Number and Title</b> 6. Service Codes and Descriptions	<b>Page</b> 6-1
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## 601 Introduction

MassHealth providers must refer to the official list of Healthcare Common Procedural Coding Systems (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 that may be used by acute outpatient hospitals (AOHs), please refer to Section 605 of this subchapter.

### 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, subject to all conditions and limitations described in MassHealth regulations at 130 CMR 410.000 and 450.000, and in the current *Acute Hospital Request for Applications*, **except** for those codes listed in Section 602 of this subchapter, CPT Category II codes ending in F, and CPT Category III codes ending in T.

### 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 Applications*.

### Early and Periodic Screening, Diagnostic 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.

00100	00164	00222	00500	00604
00102	00170	00300	00520	00620
00103	00172	00320	00522	00632
00104	00174	00322	00524	through
00120	00176	00326	00528	00902
00124	00190	00400	00529	00905
00126	00192	00402	00540	through
00140	00210	00404	00542	01212
00142	00211	00406	00546	01214
00144	00212	00410	00560	01215
00145	00214	00450	00561	01220
00147	00215	00454	00562	01230
00148	00216	00470	00567	01232
00160	00218	00472	00580	01234
00162	00220	00474	00600	01250

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602 Nonpayable CPT Codes (cont.)

01260	11008	20827	21343	22326
01270	11922	20838	21344	22327
01272	15756	20930	21346	22328
01274	15757	20936	21347	22526
01320	15758	20955	21348	22527
01340	15776	20956	21366	22532
01360	15780	20957	21422	22533
01380	15781	20962	21423	22534
01382	15782	20969	21431	22548
01390	15783	20970	21432	22552
01392	15786	20985	21433	22554
01400	15787	21121	21435	22556
01402	15788	21122	21436	22558
01404	15789	21125	21510	22585
01420	15792	21127	21602	22586
01430	15793	21141	21603	22590
01440	15824	21142	21615	22595
01442	15825	21143	21616	22600
01444	15826	21145	21620	22610
01462	15828	21146	21627	22632
01464	15829	21147	21630	22633
01470	15847	21151	21632	22800
01472	16036	21154	21705	22802
01474	17340	21155	21740	22804
01480	17360	21159	21750	22808
01482	19271	21160	21825	22810
01484	19272	21172	22010	22812
01490	19305	21179	22112	22818
through	19306	21180	22114	22819
01630	19316	21182	22116	22830
01650	19355	21183	22206	22840
01652	19361	21184	22207	22841
01654	19364	21188	22208	22842
01656	19367	21193	22210	22843
01670	19368	21194	22212	22844
01680	19369	21196	22214	22845
through	19396	21245	22216	22846
01936	20661	21246	22220	22847
01943	20664	21247	22222	22848
01999	20802	21248	22224	22949
10040	20805	21249	22226	22850
11004	20808	21255	22318	22852
11005	20816	21256	22319	22855
11006	20824	21268	22325	22857

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22858	27134	27295	27724	32120
22861	27137	27303	27725	32124
22862	27138	27365	27727	32140
22864	27140	27445	27880	32141
22865	27146	27448	27881	32150
23200	27147	27450	27882	32151
23210	27151	27454	27886	32160
23220	27156	27455	27888	32200
23335	27158	27457	28800	32215
23474	27161	27465	28805	32220
23900	27165	27466	30468	32225
23920	27170	27468	31225	32310
23930	27175	27470	31230	32320
23931	27176	27472	31290	32440
24940	27177	27477	31291	32442
25900	27178	27479	31360	32445
25905	27179	27485	31365	32480
25909	27181	27486	31367	32482
25915	27185	27487	31368	32484
25920	27187	27488	31370	32486
25924	27215	27495	31375	32488
25927	27217	27506	31380	32491
26551	27218	27507	31382	32501
26553	27222	27511	31390	32503
26554	27226	27513	31395	32504
26556	27227	27514	31584	32505
26992	27228	27519	31587	32506
27005	27232	27535	31725	32507
27025	27236	27536	31760	32540
27030	27240	27540	31766	32650
27036	27244	27556	31770	32651
27054	27245	27557	31775	32652
27070	27248	27558	31780	32653
27071	27253	27580	31781	32654
27075	27254	27590	31786	32655
27076	27258	27591	31800	32656
27077	27259	27592	31805	32658
27078	27268	27596	32035	32659
27090	27269	27598	32036	32661
27091	27280	27645	32096	32662
27120	27282	27646	32097	32663
27122	27284	27703	32098	32664
27125	27286	27712	32100	32665
27132	27290	27715	32110	32666

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32667	33251	33416	33533	33735
32668	33254	33417	33534	33736
32669	33255	33418	33535	33737
32670	33256	33420	33536	33741
32671	33257	33422	33542	33745
32672	33258	33425	33545	33746
32673	33259	33426	33548	33750
32674	33261	33427	33572	33755
32800	33265	33430	33600	33762
32810	33266	33430	33602	33764
32815	33267	33440	33606	33766
32820	33268	33460	33608	33767
32850	33269	33463	33610	33768
32851	33274	33464	33611	33770
32852	33300	33465	33612	33771
32853	33305	33468	33615	33774
32854	33310	33471	33617	33775
32855	33315	33474	33619	33776
32856	33320	33475	33620	33777
32900	33321	33476	33621	33778
32905	33322	33478	33622	33779
32906	33330	33496	33641	33780
32940	33335	33500	33645	33781
32997	33340	33501	33647	33782
33015	33361	33502	33660	33783
33017	33362	33503	33665	33786
33018	33363	33504	33670	33788
33019	33364	33505	33675	33800
33020	33365	33506	33676	33802
33025	33366	33507	33677	33803
33030	33367	33509	33681	33813
33031	33368	33510	33684	33814
33050	33369	33511	33688	33820
33120	33390	33512	33690	33822
33130	33391	33513	33692	33824
33140	33404	33514	33694	33840
33141	33405	33516	33697	33845
33202	33406	33517	33702	33851
33203	33410	33518	33710	33852
33236	33411	33519	33720	33853
33237	33412	33521	33724	33858
33238	33413	33522	33726	33859
33243	33414	33523	33730	33860
33250	33415	33530	33732	33863

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33864	33958	34704	35122	35521
33870	33959	34705	35131	35522
33871	33962	34706	35132	35523
33875	33963	34707	35141	35525
33877	33964	34708	35142	35526
33880	33965	34709	35151	35531
33881	33966	34710	35152	35533
33883	33967	34711	35182	35535
33884	33968	34712	35189	35536
33886	33969	34717	35211	35537
33889	33970	34718	35216	35538
33891	33971	34808	35221	35539
33894	33973	34812	35241	35540
33895	33974	34813	35246	35556
33897	33975	34820	35251	35558
33910	33976	34830	35271	35560
33915	33977	34831	35276	35563
33916	33978	34832	35281	35565
33917	33979	34833	35301	35566
33920	33980	34834	35302	35570
33922	33981	34841	35303	35571
33924	33982	34842	35304	35583
33925	33983	34843	35305	35585
33926	33984	34844	35306	35587
33927	33985	34845	35311	35600
33928	33986	34846	35331	35601
33929	33987	34847	35341	35606
33930	33988	34848	35351	35612
33933	33989	35001	35355	35616
33935	33990	35002	35361	35621
33940	33991	35005	35363	35623
33944	33992	35013	35371	35626
33945	33993	35021	35390	35631
33946	33995	35022	35400	35632
33947	33997	35045	35501	35633
33948	34001	35081	35506	35634
33949	34051	35082	35508	35636
33951	34151	35091	35509	35637
33952	34401	35092	35510	35638
33953	34451	35102	35511	35642
33954	34502	35103	35512	35645
33955	34701	35111	35515	35646
33956	34702	35112	35516	35647
33957	34703	35121	35518	35650



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35654	37218	41870	43333	43774
35656	37616	41872	43334	43775
35661	37618	42426	43335	43800
35663	37660	42845	43336	43810
35665	37788	42894	43337	43820
35666	38100	42953	43338	43825
35671	38101	42961	43340	43832
35681	38102	42971	43341	43840
35682	38115	42975	43351	43842
35683	38212	43045	43352	43843
35691	38213	43100	43360	43845
35693	38214	43101	43361	43846
35694	38215	43107	43400	43847
35695	38380	43108	43401	43848
35697	38381	43112	43405	43860
35700	38382	43113	43410	43865
35701	38562	43116	43415	43880
35702	38564	43117	43420	43881
35703	38724	43118	43425	43882
35721	38746	43121	43460	44005
35741	38747	43122	43496	44010
35800	38765	43123	43500	44015
35820	38770	43124	43501	44020
35840	38780	43135	43502	44021
35870	39000	43257	43520	44025
35901	39010	43279	43605	44050
35905	39200	43282	43610	44055
35907	39220	43283	43611	44110
36415	39499	43286	43620	44111
36416	39501	43287	43621	44120
36468	39503	43288	43622	44121
36591	39540	43300	43631	44125
36592	39541	43305	43632	44126
36598	39545	43310	43633	44127
36660	39560	43312	43634	44128
36823	39561	43313	43635	44130
37140	39599	43314	43640	44132
37145	41130	43320	43641	44133
37160	41135	43325	43644	44135
37180	41140	43327	43645	44136
37181	41145	43328	43752	44137
37182	41150	43330	43771	44139
37215	41153	43331	43772	44140
37217	41155	43332	43773	44141

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44143	44650	45800	47420	48400
44144	44660	45805	47425	48500
44145	44661	45820	47460	48510
44146	44680	45825	47480	48520
44147	44700	46705	47550	48540
44150	44705	46710	47570	48545
44151	44715	46712	47600	48547
44155	44720	46715	47605	48548
44156	44721	46716	47610	48550
44157	44800	46730	47612	48551
44158	44820	46735	47620	48552
44160	44850	46740	47700	48554
44187	44899	46742	47701	48556
44188	44900	46744	47711	49000
44202	44950	46746	47712	49002
44203	44955	46748	47715	49010
44204	44960	46751	47720	49013
44205	45110	46948	47721	49014
44206	45111	47010	47740	49020
44207	45112	47015	47741	49040
44208	45113	47100	47760	49060
44210	45114	47120	47765	49062
44211	45116	47122	47780	49203
44212	45119	47125	47785	49204
44213	45120	47130	47800	49205
44227	45121	47133	47801	49215
44300	45123	47135	47802	49255
44310	45126	47140	47900	49412
43314	45130	47141	48000	49425
44316	45135	47142	48001	49428
44320	45136	47143	48020	49605
44322	45349	47144	48100	49606
44345	45350	47145	48105	49610
44346	45390	47146	48120	49611
44381	45393	47147	48140	49900
44602	45395	47300	48145	49904
44603	45397	47350	48146	49905
44604	45398	47360	48148	49906
44605	45400	47361	48150	50010
44615	45402	47362	48152	50040
44620	45540	47380	48153	50045
44625	45550	47381	48154	50060
44626	45562	47383	48155	50065
44640	45563	47400	48160	50070

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50075	50650	51702	55865	58540
50100	50660	51800	55866	58548
50120	50700	51820	55870	58575
50125	50715	51841	55880	58605
50130	50722	51845	56630	58611
50135	50725	51860	56631	58700
50205	50727	51865	56632	58720
50220	50728	51900	56633	58740
50225	50740	51920	56634	58750
50230	50750	51925	56637	58752
50234	50760	51940	56640	58760
50236	50770	51960	57110	58822
50240	50780	51980	57111	58825
50250	50782	53415	57270	58940
50280	50783	53448	57280	58943
50290	50785	54125	57296	58950
50300	50800	54130	57305	58951
50320	50810	54135	57307	58952
50323	50815	54332	57308	58953
50325	50820	54336	57311	58954
50327	50825	54390	57465	58956
50328	50830	54411	57531	58957
50329	50840	54417	57540	58958
50340	50845	54430	57545	58960
50360	50860	54438	58140	58970
50365	50900	54535	58146	58974
50370	50920	54650	58150	58976
50380	50930	54900	58152	59070
50400	50940	54901	58180	59072
50405	51060	55200	58200	59120
50500	51525	55300	58210	59121
50520	51530	55400	58240	59130
50525	51550	55605	58267	59135
50526	51555	55650	58275	59136
50540	51565	55801	58280	59140
50545	51570	55810	58285	59325
50546	51575	55812	58321	59350
50547	51580	55815	58322	59412
50548	51585	55821	58323	59514
50600	51590	55831	58345	59525
50605	51595	55840	58350	59620
50610	51596	55842	58400	59830
50620	51597	55845	58410	59850
50630	51701	55862	58520	59851

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59852	61460	61576	61700	62223
59855	61500	61580	61702	62256
59856	61501	61581	61703	62258
59857	61510	61582	61705	62287
59897	61512	61583	61708	62328
60254	61514	61584	61710	62329
60270	61516	61585	61711	63043
60505	61517	61586	61735	63044
60521	61518	61590	61736	63050
60522	61519	61591	61737	63051
60540	61520	61592	61750	63076
60545	61521	61595	61751	63077
60600	61522	61596	61760	63078
60605	61524	61597	61850	63081
60650	61526	61598	61860	63082
61105	61530	61600	61863	63085
61107	61531	61601	61864	63086
61108	61533	61605	61867	63087
61120	61534	61606	61868	63088
61140	61535	61607	62005	63090
61150	61536	61608	62010	63091
61151	61537	61611	62100	63101
61154	61538	61613	62115	63102
61156	61539	61615	62117	63103
61210	61540	61616	62120	63170
61250	61541	61618	62121	63172
61253	61543	61619	62140	63173
61304	61544	61624	62141	63185
61305	61545	61630	62142	63190
61312	61546	61635	62143	63191
61313	61548	61640	62145	63197
61314	61550	61641	62146	63200
61315	61552	61642	62147	63250
61316	61556	61645	62148	63251
61320	61557	61650	62161	63252
61321	61558	61651	62162	63270
61322	61559	61680	62164	63271
61323	61563	61682	62165	63272
61333	61564	61684	62180	63273
61340	61566	61686	62190	63275
61343	61567	61690	62192	63276
61345	61570	61692	62200	63277
61450	61571	61697	62201	63278
61458	61575	61698	62220	63280

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602 Nonpayable CPT Codes (cont.)

63281	69090	80167	80358	81194
63282	69155	80181	80359	81204
63283	69535	80189	80360	81222
63285	69554	80193	80361	81223
63286	69705	80204	80362	81224
63287	69706	80210	80363	81225
63290	69950	80320	80364	81226
63295	71552	80321	80365	81227
63300	74241	80322	80366	81231
63301	74245	80323	80367	81232
63302	74247	80324	80368	81233
63303	74249	80325	80369	81234
63304	74260	80326	80370	81235
63305	75571	80327	80371	81236
63306	75956	80328	80372	81237
63307	75957	80329	80373	81239
63308	75958	80330	80374	81246
63700	75959	80331	80375	81247
63702	76140	80332	80376	81261
63704	76145	80333	80377	81262
63706	76496	80334	81105	81263
63707	76497	80335	81106	81264
63709	76498	80336	81168	81267
63710	77086	80337	81171	81270
63740	77089	80338	81172	81271
64451	77090	80339	81173	81274
64454	77091	80340	81174	81278
64624	77092	80341	81177	81279
64625	77790	80342	81178	81283
64628	78205	80343	81179	81284
64755	78206	80344	81180	81285
64760	78267	80345	81181	81286
64809	78268	80346	81182	81289
64818	78320	80347	81183	81290
64866	78351	80348	81184	81291
64868	78607	80349	81185	81305
65273	78647	80350	81186	81306
65760	78710	80351	81187	81312
65765	78805	80352	81188	81320
65767	78806	80353	81189	81327
65771	78807	80354	81190	81328
65782	80143	80355	81191	81333
66987	80151	80356	81192	81335
66988	80161	80357	81193	81336

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602 Nonpayable CPT Codes (cont.)

81337	81471	88005	89342	90885
81338	81500	88007	89343	90889
81339	81503	88012	89344	90901
81340	81506	88014	89346	90912
81341	81513	88016	89352	90913
81342	81514	88020	89353	90940
81343	81518	88025	89354	90989
81344	81521	88027	89356	90993
81345	81529	88028	89398	90997
81347	81539	88029	90377	90999
81348	81541	88036	90461	91112
81350	81546	88037	90586	91132
81351	81551	88040	90587	91133
81352	81554	88045	90619	92314
81353	81596	88099	90626	92315
81355	81599	88125	90627	92316
81357	82075	88333	90634	92317
81360	82077	88334	90644	92325
81370	82681	88738	90647	92352
81371	82962	88749	90648	92353
81372	83987	89250	90649	92354
81373	84145	89251	90650	92355
81374	84410	89253	90655	92358
81375	84431	89254	90657	92371
81376	84830	89255	90680	92517
81377	86079	89257	90681	92518
81378	86305	89258	90685	92519
81379	86364	89259	90687	92531
81380	86890	89260	90697	92532
81381	86891	89261	90698	92533
81382	86910	89264	90689	92534
81383	86911	89268	90700	92548
81413	86927	89272	90702	92549
81414	86930	89280	90723	92550
81416	86931	89281	90743	92562
81419	86945	89290	90744	92597
81422	86950	89291	90748	92605
81430	86960	89321	90758	92606
81431	86965	89322	90845	92613
81432	86985	89325	90863	92615
81439	87150	89329	90865	92617
81443	87153	89330	90875	92630
81450	87493	89331	90876	92633
81470	88000	89335	90880	92941

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602 Nonpayable CPT Codes (cont.)

92970	96040	97158	99152	99412
92971	96105	97170	99153	99421
92975	96112	97171	99155	99422
93241	96113	97172	99156	99424
93242	96116	97537	99157	99425
93243	96121	97545	99172	99426
93244	96125	97546	99184	99427
93245	96130	97755	99190	99422
93246	96131	98940	99191	99429
93247	96132	98941	99192	99437
93248	96133	98942	99241	99439
93356	96136	98943	99242	99446
93583	96137	98960	99243	99447
93660	96138	98961	99244	99448
93668	96139	98962	99245	99449
93702	96146	98970	99251	99450
93770	96156	98971	99252	99451
93786	96158	98972	99253	99452
93895	96159	98975	99254	99453
93985	96160	98976	99255	99454
93986	96161	98977	99288	99455
94005	96164	98980	99315	99456
94015	96165	98981	99316	99457
94619	96167	99000	99339	99458
94644	96168	99001	99340	99462
94645	96170	99002	99354	99468
95012	96171	99024	99355	99469
95052	96376	99026	99356	99471
95120	96567	99027	99357	99472
95125	96570	99053	99358	99473
95130	96571	99056	99359	99474
95131	96573	99058	99360	99475
95132	96574	99060	99366	99476
95133	96902	99071	99367	99477
95134	96904	99075	99368	99478
95700	97129	99078	99374	99479
95824	97130	99080	99375	99480
95965	97151	99082	99377	99485
95966	97152	99091	99378	99487
95967	97153	99100	99379	99489
95992	97154	99116	99380	99490
96000	97155	99135	99408	99491
96001	97156	99140	99409	99492
96004	97157	99151	99411	99493

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602 Nonpayable CPT Codes (cont.)

99494	99496	99510	99602	99606
99495	99497	99601	99605	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 hospital satellite clinics.

0094A	G0271	J0257	J0593	J0840
A4261	G0277	J0282	J0594	J0850
A4266	G0279	J0285	J0596	J0875
A4267	G0378	J0287	J0597	J0878
A4268	G0379	J0289	J0598	J0881
A4269	G0399	J0290	J0599	J0882
A4641	G0455	J0291	J0604	J0883
A4648	G0480	J0295	J0636	J0884
A9500	G0481	J0348	J0637	J0885
A9502	G0482	J0364	J0638	J0887
A9503	G0483	J0400	J0640	J0888
A9505	G2023	J0401	J0641	J0890
A9512	G2024	J0456	J0642	J0894
A9537	G2066	J0461	J0670	J0895
A9552	G2212	J0470	J0690	J0897
A9575	J0121	J0475	J0692	J1000
A9576	J0122	J0476	J0694	J1020
A9577	J0129	J0485	J0696	J1030
A9578	J0131	J0490	J0697	J1040
A9579	J0135	J0517	J0702	J1050
A9581	J0153	J0558	J0712	J1071
A9585	J0171	J0561	J0713	J1094
A9586	J0172	J0565	J0714	J1096
A9587	J0178	J0570	J0716	J1097
A9588	J0179	J0571	J0717	J1100
A9590	J0185	J0572	J0720	J1160
A9598	J0202	J0573	J0740	J1170
A9606	J0207	J0574	J0741	J1190
G0027	J0215	J0575	J0742	J1200
G0105	J0221	J0584	J0743	J1201
G0108	J0222	J0585	J0770	J1212
G0109	J0223	J0586	J0775	J1240
G0121	J0224	J0587	J0780	J1260
G0266	J0248	J0588	J0800	J1290
G0270	J0256	J0592	J0834	J1300



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603 Payable Level II HCPCS Codes (cont.)

J1301	J1628	J2175	J2700	J3262
J1303	J1630	J2182	J2704	J3285
J1305	J1642	J2212	J2760	J3300
J1320	J1644	J2248	J2770	J3301
J1322	J1645	J2250	J2778	J3302
J1426	J1650	J2265	J2785	J3303
J1427	J1652	J2270	J2786	J3304
J1428	J1655	J2274	J2788	J3315
J1429	J1670	J2278	J2790	J3357
J1437	J1700	J2300	J2791	J3358
J1438	J1710	J2310	J2792	J3360
J1439	J1720	J2315	J2793	J3370
J1442	J1726	J2323	J2794	J3380
J1444	J1729	J2326	J2795	J3385
J1445	J1740	J2350	J2796	J3396
J1447	J1743	J2353	J2797	J3397
J1448	J1744	J2354	J2798	J3398
J1453	J1745	J2355	J2820	J3410
J1454	J1746	J2357	J2840	J3411
J1455	J1750	J2358	J2910	J3430
J1458	J1756	J2400	J2916	J3465
J1459	J1786	J2405	J2920	J3471
J1460	J1790	J2406	J2930	J3472
J1554	J1800	J2407	J2940	J3473
J1555	J1815	J2426	J2941	J3475
J1556	J1823	J2430	J2997	J3486
J1557	J1826	J2440	J3000	J3489
J1559	J1830	J2460	J3010	J3490
J1560	J1840	J2469	J3030	J3590
J1561	J1850	J2502	J3031	J3591
J1562	J1885	J2503	J3032	J7030
J1566	J1890	J2504	J3060	J7040
J1568	J1930	J2506	J3090	J7050
J1569	J1931	J2507	J3095	J7060
J1571	J1943	J2510	J3110	J7070
J1572	J1944	J2515	J3111	J7120
J1573	J1950	J2540	J3121	J7131
J1575	J1951	J2543	J3145	J7168
J1580	J1952	J2545	J3230	J7170
J1599	J1956	J2550	J3240	J7177
J1602	J1990	J2560	J3241	J7181
J1610	J2060	J2562	J3243	J7182
J1626	J2150	J2675	J3245	J7192
J1627	J2170	J2680	J3250	J7200

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603 Payable Level II HCPCS Codes (cont.)

J7201	J7508	J9030	J9202	J9306
J7203	J7509	J9032	J9204	J9307
J7205	J7510	J9033	J9205	J9308
J7212	J7511	J9034	J9206	J9309
J7294	J7512	J9035	J9207	J9311
J7295	J7513	J9036	J9208	J9312
J7296	J7515	J9037	J9209	J9313
J7297	J7517	J9039	J9210	J9316
J7298	J7518	J9040	J9211	J9317
J7300	J7520	J9041	J9212	J9318
J7301	J7351	J9042	J9213	J9319
J7304	J7352	J9043	J9214	J9320
J7307	J7527	J9044	J9216	J9325
J7309	J7599	J9045	J9217	J9328
J7310	J7608	J9047	J9218	J9330
J7311	J7614	J9050	J9219	J9340
J7312	J7620	J9055	J9223	J9348
J7313	J7626	J9057	J9225	J9349
J7314	J7633	J9060	J9226	J9351
J7315	J7639	J9061	J9228	J9352
J7316	J7644	J9065	J9229	J9353
J7318	J7665	J9070	J9230	J9354
J7320	J7669	J9098	J9247	J9355
J7321	J7676	J9100	J9250	J9356
J7322	J7677	J9118	J9260	J9357
J7323	J7682	J9119	J9261	J9360
J7324	J7686	J9120	J9262	J9370
J7325	J7699	J9130	J9263	J9371
J7326	J7799	J9144	J9264	J9390
J7327	J7999	J9145	J9266	J9395
J7328	J8499	J9153	J9267	J9400
J7329	J8562	J9155	J9268	J9999
J7331	J8655	J9160	J9269	L8614
J7332	J8670	J9171	J9271	L8615
J7336	J8999	J9173	J9272	L8616
J7340	J9000	J9176	J9280	L8617
J7342	J9015	J9178	J9281	L8618
J7345	J9017	J9179	J9293	L8619
J7402	J9019	J9181	J9295	L8621
J7500	J9020	J9185	J9299	L8622
J7502	J9021	J9190	J9301	L8623
J7503	J9022	J9199	J9302	L8624
J7504	J9023	J9200	J9303	L8690
J7507	J9025	J9201	J9305	L8691

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603 Payable Level II HCPCS Codes (cont.)

M0220	Q0240	Q4102	Q4199	Q9991
M0221	Q0243 SL	Q4103	Q4251	Q9992
M0222	Q0244	Q4104	Q4252	S0020
M0223	Q0245 SL	Q4105	Q4253	S0021
M0240	Q0247	Q4106	Q5101	S0023
M0241	Q0249	Q4107	Q5103	S0028
M0243	Q2009	Q4108	Q5104	S0077
M0244	Q2017	Q4110	Q5105	S0190
M0245	Q2028	Q4111	Q5106	S0191
M0246	Q2035	Q4112	Q5107	S0199
M0247	Q2036	Q4113	Q5108	S0302
M0248	Q2037	Q4114	Q5110	S2083
M0249	Q2038	Q4115	Q5111	S2260
M0250	Q2043	Q4121	Q5112	S3005
0404T	Q2049	Q4132	Q5113	S4989
Q0081	Q2050	Q4133	Q5114	S4993
Q0083	Q2053	Q4161	Q5115	S9485
Q0084	Q2054	Q4162	Q5116	T1023
Q0138	Q2055	Q4163	Q5118	U0002
Q0139	Q4074	Q4164	Q5119	U0003
Q0162	Q4081	Q4165	Q5122	U0004
Q0220	Q4100	Q4186	Q5123	U0005
Q0222	Q4101	Q4187	Q9950	

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#### 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 or other qualified health care professional 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
52	Reduced services
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
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
90	Reference (outside) laboratory
91	Repeat clinical diagnostic laboratory test
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

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604 Modifiers (cont.)

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)
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
GN	Services delivered under an outpatient speech language pathology plan of care
GO	Services delivered under an outpatient occupational therapy plan of care
GP	Services delivered under an outpatient physical therapy plan of care
LC	Left circumflex, coronary artery
LD	Left anterior descending coronary artery
LM	Left main, coronary artery
LT	Left side (used to identify procedures performed on the left side of the body)
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
RI	Ramus intermedius coronary artery
RT	Right side (used to identify procedures performed on the right side of the body)
SL	State supplied vaccine
T1	Left foot, second digit
T2	Left foot, third digit
T3	Left foot, fourth digit
T4	Left foot, fifth digit
T5	Right foot, great toe
T6	Right foot, second digit
T7	Right foot, third digit
T8	Right foot, fourth digit
T9	Right foot, fifth digit
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

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605 Modifiers for Behavioral Health Screening, Including Postnatal Depression Screening

The administration and scoring of standardized developmental or behavioral health-screening tools selected from the list referenced in Appendix W of your provider manual, is covered for members (except MassHealth Limited) from birth to 21 years of age. Service Codes 96110 and 96127 must be accompanied by one of the following modifiers to indicate whether a developmental or behavioral health need was identified. “Developmental need identified” means the provider administering the screening tool, in their professional judgment, identified a child with a potential developmental health services need. “Behavioral health need identified” means the provider administering the screening tool, in their professional judgment, identified a child with a potential behavioral health services need.

Beginning 09/01/2022, you may start using 96127 for tracking purposes.

<u>Service Code</u>	<u>Modifier</u>	<u>Description</u>
96110	U1	Covered for members birth through 3 years old for the administration and scoring of a standardized developmental health screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with no developmental health need identified.
96110	U2	Covered for members birth through 3 years old for the administration and scoring of a standardized developmental health screening selected from the list referenced in Appendix W of your MassHealth provider manual; with developmental health need identified
96110	U3	Covered for members 18- and 24 months for the administration and scoring of a standardized Autism screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with no further follow up needed
96110	U4	Covered for members 18- and 24 months for the administration and scoring of a standardized Autism screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with further follow up needed.
96127	U1	Covered for members 4 to 21 years old for the administration and scoring of a standardized behavioral health screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with no behavioral health need identified.
96127	U2	Covered for members 4 to 21 years old for the administration and scoring of a standardized behavioral health screening tool selected from the list referenced in Appendix W of your MassHealth provider manual; with behavioral health need identified.
96110	UD	Covered for members birth to 6 months for the administration and scoring of the Edinburgh Postnatal Depression Scale with member’s caregiver. UD must be used together with either U1 or U2

<sup>1</sup>PA is required for dates of service on or after March 1, 2020. If a code comprises both a professional component and a technical component, PA is required for the technical component only, and the TC modifier must be included on the PA request.

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605 Modifiers for Behavioral Health Screening, Including Postnatal Depression Screening (cont.)

**Service Code S3005** must be used by acute outpatient hospitals when billing MassHealth for the administration and scoring of a MassHealth-approved, standardized, perinatal depression screening tool. Code S3005 must be accompanied by one of the modifiers listed below.

<u>Modifier</u>	<u>Description</u>
U1	Perinatal care provider completed prenatal or postpartum depression screening and behavioral health need identified (positive screen)
U2	Perinatal care provider completed prenatal or postpartum depression screening with no behavioral health need identified (negative screen)

Please refer to the Massachusetts Department of Public Health’s (DPH) postpartum depression (PPD) screening tool grid for any revisions to the list of MassHealth-approved screening tools:  
[www.mass.gov/service-details/postpartum-depression-resources-for-healthcare-providers](http://www.mass.gov/service-details/postpartum-depression-resources-for-healthcare-providers).

606 Modifiers for Tobacco Use Cessation

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

<u>Modifier</u>	<u>Description</u>
HQ	Group counseling, at least 60-90 minutes
TF	Intermediate level of care, at least 45 minutes

607 Modifier for Child and Adolescent Needs and Strengths (CANS)

<u>Modifier</u>	<u>Description</u>
HA	Service Code 90791 must be accompanied by this modifier to indicate that the Child and Adolescent Needs and Strengths is included in the assessment. This modifier may be billed only by psychiatrists.

608 Modifiers for Provider Preventable Conditions That Are National Coverage Determinations

<u>Modifier</u>	<u>Description</u>
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.

<sup>1</sup>PA is required for dates of service on or after March 1, 2020. If a code comprises both a professional component and a technical component, PA is required for the technical component only, and the TC modifier must be included on the PA request.

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609 Codes That Have Special Requirements or Limitations

70336	PA <sup>1</sup>	72141	PA <sup>1</sup>	74181	PA <sup>1</sup>
70450	PA <sup>1</sup>	72142	PA <sup>1</sup>	74182	PA <sup>1</sup>
70460	PA <sup>1</sup>	72146	PA <sup>1</sup>	74183	PA <sup>1</sup>
70470	PA <sup>1</sup>	72147	PA <sup>1</sup>	74185	PA <sup>1</sup>
70480	PA <sup>1</sup>	72148	PA <sup>1</sup>	74261	PA <sup>1</sup>
70481	PA <sup>1</sup>	72149	PA <sup>1</sup>	74262	PA <sup>1</sup>
70482	PA <sup>1</sup>	72156	PA <sup>1</sup>	74712	PA <sup>1</sup>
70486	PA <sup>1</sup>	72157	PA <sup>1</sup>	74713	PA <sup>1</sup>
70487	PA <sup>1</sup>	72158	PA <sup>1</sup>	75557	PA <sup>1</sup>
70488	PA <sup>1</sup>	72191	PA <sup>1</sup>	75559	PA <sup>1</sup>
70490	PA <sup>1</sup>	72192	PA <sup>1</sup>	75561	PA <sup>1</sup>
70491	PA <sup>1</sup>	72193	PA <sup>1</sup>	75563	PA <sup>1</sup>
70492	PA <sup>1</sup>	72194	PA <sup>1</sup>	75565	PA <sup>1</sup>
70496	PA <sup>1</sup>	72195	PA <sup>1</sup>	75572	PA <sup>1</sup>
70498	PA <sup>1</sup>	72196	PA <sup>1</sup>	75573	PA <sup>1</sup>
70540	PA <sup>1</sup>	72197	PA <sup>1</sup>	75574	PA <sup>1</sup>
70542	PA <sup>1</sup>	73200	PA <sup>1</sup>	75635	PA <sup>1</sup>
70543	PA <sup>1</sup>	73201	PA <sup>1</sup>	76376	PA <sup>1</sup>
70544	PA <sup>1</sup>	73202	PA <sup>1</sup>	76377	PA <sup>1</sup>
70545	PA <sup>1</sup>	73206	PA <sup>1</sup>	76380	PA <sup>1</sup>
70546	PA <sup>1</sup>	73218	PA <sup>1</sup>	76391	PA <sup>1</sup>
70547	PA <sup>1</sup>	73219	PA <sup>1</sup>	77021	PA <sup>1</sup>
70548	PA <sup>1</sup>	73220	PA <sup>1</sup>	77022	PA <sup>1</sup>
70549	PA <sup>1</sup>	73221	PA <sup>1</sup>	77046	PA <sup>1</sup>
70551	PA <sup>1</sup>	73222	PA <sup>1</sup>	77047	PA <sup>1</sup>
70552	PA <sup>1</sup>	73223	PA <sup>1</sup>	77048	PA <sup>1</sup>
70553	PA <sup>1</sup>	73700	PA <sup>1</sup>	77049	PA <sup>1</sup>
70554	PA <sup>1</sup>	73701	PA <sup>1</sup>	77078	PA <sup>1</sup>
70555	PA <sup>1</sup>	73702	PA <sup>1</sup>	77084	PA <sup>1</sup>
71250	PA <sup>1</sup>	73706	PA <sup>1</sup>	78451	PA <sup>1</sup>
71260	PA <sup>1</sup>	73718	PA <sup>1</sup>	78452	PA <sup>1</sup>
71270	PA <sup>1</sup>	73719	PA <sup>1</sup>	78453	PA <sup>1</sup>
71275	PA <sup>1</sup>	73720	PA <sup>1</sup>	78454	PA <sup>1</sup>
71550	PA <sup>1</sup>	73721	PA <sup>1</sup>	78459	PA <sup>1</sup>
71551	PA <sup>1</sup>	73722	PA <sup>1</sup>	78466	PA <sup>1</sup>
71555	PA <sup>1</sup>	73723	PA <sup>1</sup>	78469	PA <sup>1</sup>
72125	PA <sup>1</sup>	73725	PA <sup>1</sup>	78472	PA <sup>1</sup>
72126	PA <sup>1</sup>	74150	PA <sup>1</sup>	78473	PA <sup>1</sup>
72127	PA <sup>1</sup>	74160	PA <sup>1</sup>	78481	PA <sup>1</sup>
72128	PA <sup>1</sup>	74170	PA <sup>1</sup>	78483	PA <sup>1</sup>
72129	PA <sup>1</sup>	74174	PA <sup>1</sup>	78491	PA <sup>1</sup>
72130	PA <sup>1</sup>	74175	PA <sup>1</sup>	78492	PA <sup>1</sup>
72131	PA <sup>1</sup>	74176	PA <sup>1</sup>	78494	PA <sup>1</sup>
72132	PA <sup>1</sup>	74177	PA <sup>1</sup>	78496	PA <sup>1</sup>
72133	PA <sup>1</sup>	74178	PA <sup>1</sup>	78608	PA <sup>1</sup>

<sup>1</sup>PA is required for dates of service on or after March 1, 2020. If a code comprises both a professional component and a technical component, PA is required for the technical component only, and the TC modifier must be included on the PA request.



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609 Codes That Have Special Requirements or Limitations (cont.)

78609 PA<sup>1</sup>  
78811 PA<sup>1</sup>  
78812 PA<sup>1</sup>  
78813 PA<sup>1</sup>  
78814 PA<sup>1</sup>  
78815 PA<sup>1</sup>  
78816 PA<sup>1</sup>  
93350 PA<sup>1</sup>  
93351 PA<sup>1</sup>  
95782 PA<sup>1</sup>  
95783 PA<sup>1</sup>  
95800 PA<sup>1</sup>  
95805 PA<sup>1</sup>  
95806 PA<sup>1</sup>  
95807 PA<sup>1</sup>  
95808 PA<sup>1</sup>  
95810 PA<sup>1</sup>  
95811 PA<sup>1</sup>

<sup>1</sup>PA is required for dates of service on or after March 1, 2020. If a code comprises both a professional component and a technical component, PA is required for the technical component only, and the TC modifier must be included on the PA request.

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## 610 Revenue Codes

The following table lists the revenue codes that acute outpatient hospitals (AOHs), including hospital-licensed health centers and other provider-based satellites, use when billing for MassHealth-covered services. Please refer to the current edition of the Ingenix Uniform Billing

Editor as a guide to determine the most common revenue HCPCS code mappings. To purchase the application, go to <https://www.optum360coding.com>.

<b>Revenue Code</b>	<b>Description</b>
<b>025X Pharmacy</b>	
0250	General
0251	Generic drugs
0252	Nongeneric drugs
0254	Drugs incident to other diagnostic services
0255	Drugs incident to radiology
0257	Nonprescription drugs
0258	IV solutions
0259	Other pharmacy
<b>026X IV Therapy</b>	
0260	General
0269	Other IV therapy
<b>027X Medical/Surgical Supplies and Devices – General</b>	
0270	General
0271	Nonsterile supply
0272	Sterile supply
0274	Prosthetic/orthotic devices
0276	Intraocular lens
0278	Other implants
0279	Other supplies/devices
<b>028X Oncology</b>	
0280	General
0289	Other

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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
<b>029X DME</b>	
0290	General
0291	Rental
0292	Purchase of new DME
0293	Purchase of used DME
0294	Supplies/drugs for DME
0299	Other equipment
<b>030X Laboratory</b>	
0300	General
0301	Chemistry
0302	Immunology
0304	Nonroutine dialysis
0305	Hematology
0306	Bacteriology and microbiology
0307	Urology
0309	Other
<b>031X Laboratory Pathological – General</b>	
0310	Laboratory pathological – general
0311	Cytology
0312	Histology
0314	Biopsy
0319	Other
<b>032X Radiology – Diagnostic</b>	
0320	General
0321	Angiocardiology
0322	Arthrography
0323	Arteriography
0324	Chest X ray
0329	Other

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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
<b>033X Radiology – Therapeutic and/or Chemotherapy Administration</b>	
0330	General
0331	Chemotherapy administration – injected
0332	Chemotherapy – oral
0333	Radiation therapy
0335	Chemotherapy administration – IV
0339	Therapeutic and/or chemo admin
<b>034X Nuclear Medicine</b>	
0340	General
0341	Diagnostic
0342	Therapeutic
0343	Diagnostic radiopharmaceuticals
0349	Other
<b>035X Computerized Tomographic (CT) Scans</b>	
0350	General
0351	Head scan
0352	Body scan
0359	Other
<b>036X Operating Room Services</b>	
0360	General
0361	Minor surgery
<b>037X Anesthesia</b>	
0370	General
0371	Anesthesia incident to radiology
0372	Anesthesia incident to other diagnostic services
0374	Acupuncture
0379	Other anesthesia
<b>039X Blood Storage and Processing</b>	
0390	General
0391	Administration

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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
0399	Other processing and storage
<b>040X Other Imaging Services</b>	
0400	General
0401	Diagnostic mammography
0402	Ultrasound
0403	Screening mammography
0404	Positron emission tomography (PET)
0409	Other imaging services
<b>041X Respiratory Services</b>	
0410	General
0412	Inhalation services
0413	Hyperbaric oxygen therapy
0419	Other
<b>042X Physical Therapy</b>	
0420	General
0421	Visit charge
0423	Group charge
0424	Evaluation or reevaluation
0429	Other physical therapy
<b>043X Occupational Therapy</b>	
0430	General
0431	Visit charge
0433	Group rate
0434	Evaluation or reevaluation
0439	Other occupational therapy
<b>044X Speech-Language Pathology</b>	
0440	General
0441	Visit charge
0443	Group rate
0444	Evaluation or reevaluation

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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
0449	Other speech therapy
<b>045X Emergency Room</b>	
0450	General
0451	EMTALA Emergency Medical Screening services
0452	ER beyond EMTALA screening
0456	Urgent care
0459	Other ER
<b>046X Pulmonary Function</b>	
0460	General
0469	Other
<b>047X Audiology</b>	
0470	General
0471	Diagnostic
0472	Treatment
0479	Other
<b>048X Cardiology</b>	
0480	General
0481	Cardiac catheterization lab
0482	Stress test
0483	Echocardiology
0489	Other
<b>049X Ambulatory Surgical Care</b>	
0490	General
0499	Other
<b>050X Outpatient</b>	
0500	General
0509	Other
<b>051X Clinic</b>	
0510	General
0512	Dental clinic

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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
0513	Psychiatric clinic
0514	OB/GYN
0515	Pediatric clinic
0516	Urgent care clinic
0517	Family practice clinic
0519	Other
<b>053X Osteopathic Services</b>	
0530	General
0531	Osteopathic therapy
0539	Other osteopathic services
<b>061X Magnetic Resonance Technology</b>	
0610	General
0611	MRI – brain
0612	MRI – spinal cord
0614	Other MRI
0615	MRA head and neck
0616	MRA lower extremities
0618	Other MRA
0619	Other MRT
<b>062X Medical/Surgical Supplies</b>	
0621	Supplies incident to radiology
0622	Supplies incident to other diagnostic services
0623	Surgical dressings
<b>063X Pharmacy</b>	
0631	Single source drug
0632	Multiple source drug
0633	Restrictive prescription
0634	EPO less than 10,000 units
0635	EPO, 10,000 or more units
0636	Drugs requiring detail coding

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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
0637	Self-administered drugs
<b>068X Trauma Response</b>	
0681	Level I
0682	Level II
0683	Level III
0684	Level IV
0689	Other trauma response
<b>070X Cast Room</b>	
0700	General
<b>071X Recovery Room</b>	
0710	General
<b>072X Labor Room/Delivery</b>	
0720	General
0721	Labor
0722	Delivery
0723	Circumcision
0724	Birthing center
0729	Other labor room/delivery
<b>073X EKG/ECG</b>	
0730	General
0731	Holter monitor
0732	Telemetry
0739	Other EKG/ECG
<b>074X EEG</b>	
0740	General
<b>075X Gastroenterology</b>	
0750	General
<b>760X Treatment/Observation Room</b>	
0760	General
0761	Treatment room



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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
0762	Observation hours
0769	Other specialty services
<b>077X Preventive Services</b>	
0770	General
0771	Vaccine administration
<b>079X Extra-Corporeal Shock Wave Therapy</b>	
0790	Extra-Corporeal Shock wave therapy-general
<b>082X Hemodialysis</b>	
0820	General
0821	Hemodialysis composite/other rate
0825	Support Services
0826	Shorter duration
0829	Other outpatient Hemodialysis
<b>083X Peritoneal Dialysis</b>	
0830	General
0831	Peritoneal composite/other rate
0835	Support Services
0839	Other outpatient peritoneal dialysis
<b>084X CAPD</b>	
0840	General
0841	CAPD composite/other rate
0845	Support Services
0849	Other
<b>085X CCPD</b>	
0850	General
0851	CCPD composite/other rate
0855	Support Services
0859	Other

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610 Revenue Codes (cont.)

<b>Revenue Code</b>	<b>Description</b>
<b>090X Behavioral Health Treatments/Services</b>	
0900	General
0901	Electroshock therapy
0905	Intensive outpatient psychiatric
<b>091X Behavioral Health Treatments/Services</b>	
0914	Individual therapy
0915	Group therapy
0916	Family therapy
0918	Testing
0919	Other
<b>092X Other Diagnostic Services</b>	
0920	General
0921	Peripheral vascular lab
0922	Electromyelogram
0923	Pap Smear
0924	Allergy testing
0925	Pregnancy test
0929	Other diagnostic service
<b>094X Other Therapeutic Services</b>	
0940	General
0942	Education/training
0943	Cardiac rehabilitation
0944	Drug rehabilitation
0945	Alcohol rehabilitation
0948	Pulmonary rehabilitation
0949	Other therapeutic services

This publication contains codes that are copyrighted by the American Medical Association. Certain terms used in the service descriptions for HCPCS codes are defined in the *Current Procedural Terminology (CPT) Professional* codebook.

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