

# Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid



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MassHealth Transmittal Letter CHC-95 June 2012

TO: Community Health Centers Participating in MassHealth

FROM: Julian J. Harris, M.D., Medicaid Director

RE: Community Health Center Manual (New Modifiers for Provider Preventable

Conditions That Are National Coverage Determinations)

This letter transmits updates to Subchapter 6 of the *Community Health Center Manual* to add modifiers for Provider Preventable Conditions (PPCs) that are National Coverage Determinations. For more information about PPCs and related billing instructions, see Transmittal Letter ALL-195.

**Please Note:** Two modifiers that are currently allowed by MassHealth, technical component (TC) and professional component (26), have also been added to Subchapter 6.

These updates are effective for dates of service on or after on or after July 1, 2012.

# **MassHealth Website**

This transmittal letter and attached pages are available on the MassHealth website at <a href="https://www.mass.gov/masshealth">www.mass.gov/masshealth</a>.

#### Questions

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.)

## Community Health Center Manual

Pages vi, 6-15, and 6-16

# **OBSOLETE MATERIAL**

(The pages listed here are no longer in effect.)

#### Community Health Center Manual

Pages vi, 6-15, and 6-16 — transmitted by Transmittal Letter CHC-94

# Commonwealth of Massachusetts MassHealth Provider Manual Series

6. Service Codes and Descriptions

**Subchapter Number and Title** 

**Page** vi

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# 6. Service Codes and Descriptions

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# 613 Payable Behavioral Health Screening Tool Service Codes (cont.)

# Service

Code	<u>Modifier</u>	Special Requirement or Limitation
96110	U6	Covered for members birth to 21 for the administration and scoring of a standardized behavioral health screening tool from the approved menu of tools found in Appendix W of your MassHealth provider manual; and behavioral health need identified* (Eligible providers are nurse practitioners employed by community health centers.)
96110	U7	Covered for members birth to 21 for the administration and scoring of a standardized behavioral health screening tool from the approved menu of tools found in Appendix W of your MassHealth provider manual; with no behavioral health need identified* (Eligible providers are physician assistants employed by community health centers.)
96110	U8	Covered for members birth to 21 for the administration and scoring of a standardized behavioral health screening tool from the approved menu of tools found in Appendix W of your MassHealth provider manual; and behavioral health need identified* (Eligible providers are physician assistants employed by community health centers.)

<sup>\* &</sup>quot;Behavioral health need identified" means the provider administering the screening tool, in his or her professional judgment, identifies a child with a potential behavioral health services need.

# 614 Modifiers

The following service code modifiers are allowed for billing under MassHealth for CHCs.

<b>Modifier</b>	<u>Description</u>
26	Professional Component
50	Bilateral procedure
51	Multiple procedures
54	Surgical care only
62	Two surgeons
66	Surgical team
80	Assistant surgeon
82	Assistant surgeon (when qualified resident surgeon not available)
99	Multiple modifiers
TC	Technical Component

The following modifiers are 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.

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*) code book.

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