



MassHealth
Transmittal Letter COH-8
January 2014

TO: Chronic Disease and Rehabilitation Outpatient Hospitals Participating in MassHealth

FROM: Kristin L. Thorn, Medicaid Director 

RE: *Chronic Disease and Rehabilitation Outpatient Hospital Manual* (New Subchapter 6)

This letter transmits the addition of Subchapter 6 to the *Chronic Disease and Rehabilitation Outpatient Hospital Manual*. Subchapter 6 contains a list of service codes and allowable modifiers.

MassHealth has also expanded the list of allowable modifiers for use with MassHealth-covered service codes, as described in [All Provider Bulletin 227](#) (June 2012). These updates are effective for dates of service on or after July 1, 2012.

Because MassHealth pays for most of the Healthcare Common Procedures Coding System (HCPCS) codes from the Centers for Medicare & Medicaid Services (CMS), Subchapter 6 of the *Chronic Disease and Rehabilitation Outpatient Hospital Manual* lists only those codes that

- are *not* payable under MassHealth; or
- are categorized as Level II HCPCS codes that *are* payable under the MassHealth chronic disease and rehabilitation (CDR) outpatient hospital program.

For outpatient CDR hospital services that are not reimbursed according to the CDR outpatient methodology or the clinical laboratory fee schedule, CDR outpatient hospitals must refer to the applicable MassHealth provider manual to determine which services are payable and which are not payable (e.g., adult day health, adult foster care, ambulance services, dental, home health, physician services, psychiatric day treatment, vision care, etc.).

MassHealth providers must refer to the official list of HCPCS codes and descriptions as posted on the CMS website at www.cms.gov/medicare/hcpcs when billing for services provided to MassHealth members. The services codes in this Subchapter 6 are effective for dates of service on or after July 1, 2013.

This letter also transmits a list of allowable modifiers for use when billing with MassHealth-covered service codes. The list of modifiers is divided into the following service groups.

- general outpatient use
- therapy services
- behavioral health screening
- National Drug Code (NDC)
- Provider Preventable Conditions (PPCs)

MassHealth Website

This transmittal letter and attached pages are available on the MassHealth website at www.mass.gov/masshealth.

Questions

If you have any questions about 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.)

Chronic Disease and Rehabilitation Outpatient Manual

Pages 6-1 through 6-12

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-1
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

601 Introduction and Explanation of Abbreviations

MassHealth providers must refer to the American Medical Association's Current Procedural Terminology (CPT) code book for the service codes and service descriptions when billing for services provided to MassHealth members. MassHealth pays for all medicine, radiology, laboratory, surgery, and anesthesia CPT codes in effect at the time of service, except for those codes listed in Section 602 of this Subchapter, including Category II codes ending in F and Category III codes ending in T as noted, subject to all conditions and limitations described in MassHealth regulations at 130 CMR 410.000 and 450.000.

A chronic disease and rehabilitation 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. s 1396d(a) and 42 U.S.C. s 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 *Chronic Disease and Rehabilitation Outpatient Hospital Manual*.

- Section 602 lists CPT service codes that are *not payable* under MassHealth.
- Section 603 lists Level II HCPCS codes that *are payable* under MassHealth.
- Section 604 lists service code Modifiers allowed under MassHealth.

602 Nonpayable Evaluation and Management (E/M) Service Codes

99217	99285	99343	99411	99487
99218	99288	99344	99412	99488
99219	99291	99345	99420	99489
99220	99292	99347	99429	99495
99221	99304	99348	99441	99496
99222	99305	99349	99442	99499
99223	99306	99350	99443	
99224	99307	99354	99444	
99225	99308	99355	99450	
99226	99309	99356	99455	
99231	99310	99357	99456	
99232	99315	99358	99464	
99233	99316	99359	99465	
99234	99318	99360	99466	
99235	99324	99374	99467	
99236	99325	99375	99468	
99238	99326	99377	99469	
99239	99327	99378	99471	
99251	99328	99379	99472	
99252	99334	99380	99475	
99253	99335	99401	99476	
99254	99336	99402	99477	
99255	99337	99403	99478	
99281	99339	99404	99479	
99282	99340	99406	99480	
99283	99341	99408	99485	
99284	99342	99409	99486	

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-2
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

603 Nonpayable Anesthesia Service Codes

Codes 00100 through 01999 are not payable under the outpatient hospital program. These codes may be billed as medical claims in accordance with the physician regulations at 130 CMR 433.454.

604 Nonpayable Surgery Service Codes

10040	14302	15620	21555	25922
11004	14350	15630	21556	25924
11005	15040	15650	21557	25927
11006	15050	15731	21600	25929
11008	15100	15732	21610	25931
11920	15101	15734	21615	26415
11921	15110	15736	21616	26416
11922	15111	15738	21620	26432
11950	15115	15740-16036	21627	26449-26596
11951	15116	17000-19499	21630	26820-26863
11952	15120	20100	21632	26910
11954	15121	20101	21685-21936	26951
11960	15130	20102	22010-22328	26952
11970	15131	20103	22526	26992
11971	15135	20150	22527	27000-27036
11976	15136	20200	22532-22905	27049
11980	15150	20205	23200	27054
11981	15151	20206	23210	27059
11982	15152	20220	23220	27066
11983	15155	20225	23332	27067
13100	15156	20240	23472	27070
13101	15200	20245	23900	27071
13102	15201	20250	23920	27075
13120	15220	20251	23921	27076
13121	15221	20252	24065-24155	27077
13122	15240	20552	24201	27078
13131	15241	20553	24900	27080
13132	15260	20660	24920	27090
13133	15261	20661	24930	27091
13150	15271	20662	24931	27098
13151	15272	20663	24940	27100
13152	15273	20664	25800	27105
13153	15274	20690	25805	27110
13160	15275	20692	25810	27111
14000	15276	20693	25820	27120
14001	15277	20694	25825	27122
14020	15278	20802-20838	25830	27125
14021	15570	20900-20999	25900	27130-27187
14040	15572	21010	25905	27202
14041	15574	21045	25907	27215
14060	15576	21120-21299	25909	27217
14061	15600	21310-21499	25915	27218
14301	15610	21510	25920	27222

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-3
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

604 Nonpayable Surgery Service Codes (cont.)

27226	27397	27784	28505	32225
27227	27400-27495	27792	28525	32310
27228	27506	27814	28531	32320
27232	27507	27822	28555	32440-32540
27235	27509	27823	28585	32650
27236	27511	27826	28615	32651
27244	27513	27827	28645	32652
27245	27514	27828	28675	32653
27248	27519	27829	28705-28825	32654
27253	27524	27832	31225	32655
27254	27535	27846	31230	32656
27258	27536	27848	31290	32658
27259	27540	27870	31291	32659
27269	27556	27871	31360	32661
27280	27557	27880	31365	32662
27282	27558	27881	31367	32663
27284	27566	27882	31368	32664
27286	27580	27884	31370	32665
27290	27590	27886	31375	32800
27295	27591	27888	31380	32810
27303	27592	27889	31382	32815
27305	27594	28010	31390	32820
27306	27596	28011	31395	32850
27307	27598	28022	31584	32851
27324	27599	28024	31587	32852
27325	27600	28035	31725	32853
27326	27601	28046	31760	32854
27330	27602	28047	31766	32855
27331	27605	28052	31770	32856
27332	27606	28054	31775	32900
27333	27614	28062	31780	32905
27334	27625	28070	31781	32906
27335	27616	28072	31785	32940
27350	27620	28080	31786	32997
27355	27625	28086	31800	33015
27356	27626	28088	31805	33020
27360	27634	28100-28175	32035	33025
27329	27635	28192	32036	33030
27364	27637	28193	32095	33031
27365	27638	28200-28280	32100	33050
27381	27645	28406	32110	33120
27386	27646	28200-28280	32120	33130
27390	27647	28406	32124	33140
27391	27650-27745	28415	32140	33141
27392	27756	28420	32141	33202
27393	27758	28445	32150	33203
27394	27759	28446	32151	33206
27395	27766	28465	32160	33207
27396	27769	28485	32200	33208

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-4
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

604 Nonpayable Surgery Service Codes (cont.)

33210	35002	35363	37197	43496
33211	35005	35371	37200	43500
33212	35011	35372	37202	43501
33213	35013	35390	37204	43502
33214	35021	35400	37210	43520
33215	35022	35450	37211	43605-43641
33216	35045	35452	37212	43644
33217	35081	35458	37213	43645
33218	35082	35460	37214	43752
33220	35091	35550-35587	37215	43770
33222	35092	35600-35697	37216	43771
33225	35102	35700	37616	43772
33226	35103	35701	37617	43773
33233	35111	35721	37618	43774
33234	35112	35741	37660	43775
33235	35121	35870	37765	43800-43888
33236	35122	35875	37766	44005-44160
33237	35131	35876	37788	44187
33238	35132	35879	38100	44188
33240	35141	35881	38101	44202
33241	35142	35883	38102	44203
33243	35151	35884	38115	44204
33250	35152	35901	38380	44205
33251	35182	35903	38381	44210
33254	35189	35905	38382	44211
33255	35211	35907	38562	44212
33256	35216	36415	38564	44227
33257	35221	36416	38700-38780	44300
33258	35231	36468	38900	44310
33259	35241	36469	39000-39599	44314
33261	35246	36591	41130	44316
33265	35251	36592	41135	44320
33266	35261	36598	41140	44322
33300-33335	35271	36660	41145	44345
33400-33496	35276	36822	41150	44346
33500-33572	35281	36823	41153	44602-44680
33600-33697	35301	37140	41155	44700
33702-33788	35302	37145	41870	44701
33800-33891	35303	37160	41872	44705
33910-33999	35304	37180	42426	44715
34001-34490	35305	37181	42845	44720
34501	35306	37182	42892	44721
34502	35311	37183	42894	44800
34510	35321	37184	42953	44820
34520	35331	37185	42961	44850
34530	35341	37186	42971	44899
34800-34834	35351	37187	43100-43135	44900
34900	35355	37188	43300-43425	44950
35001	35361	37195	43460	44955

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-5
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

604 Nonpayable Surgery Service Codes (cont.)

44960	48100	50120	51565	57105
45110	48105	50125	51570	57106
45111	48120	50130	51575	57107
45112	48140	50135	51580	57109
45113	48145	50205	51585	57110
45114	48146	50220	51590	57111
45116	48148	50225	51595	57112
45119	48150	50230	51596	57200-57335
45120	48152	50234	51597	57531
45121	48153	50236	51701	57540
45123	48154	50240	51702	57545
45126	48155	50250	51800-51980	57700
45130	48160	50280	53400-53520	57720
45135	48400	50290	54115	58140
45136	48500-48556	50300	54120	58145
45395	49000	50320	54125	58146
45397	49002	50323	54130	58150
45400	49010	50325	54135	58152
45402	49020	50327	54300-54440	58180
45540	49021	50328	54535	58200
45550	49040	50329	54600-54680	58210
45562	49041	50340	54900	58240
45563	49060	50360	54901	58260
45800	49061	50365	55060	58262
45805	49062	50370	55175	58263
45820	49203	50380	55180	58267
45825	49204	50400	55250	58270
46700-46947	49205	50405	55400	58275
47010	49215	50500	55450	58280
47015	49220	50520	55605	58285
47100-47147	49250	50526	55650	58290
47300	49255	50540	55801-55866	58291
47350	49425	50545	55970	58292
47360	49428	50546	55980	58293
47361	49605	50547	56620	58294
47362	49606	50548	56625	58400
47380	49610	50600	56630	58410
47381	49611	50605	56631	58520
47400	49900	50610	56632	58540
47420	49904	50620	56633	58541-58579
47425	49905	50630	56634	58600
47460	49906	50650	56637	58605
47480	50010	50660	56640	58611
47550	50040	50700-50940	56700	58615
47570	50045	51060	56740	58660-58679
47600-47900	50065	51525	56800	58700-52770
48000	50070	51530	56805	58822
48001	50075	51550	56810	58825
48020	50100	51555	57065	58925-58976

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-6
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

604 Nonpayable Surgery Service Codes (cont.)

59030	60545	63082	66680	68371
59070	60600	63085	66682	68500
59072	60605	63086	66821	68505
59076	60650	63087	66825	68520
59100-59160	61105-61253	63088	66982	68540
59200	61304-61875	63090	66983	68550
59300	62005-62148	63091	66984	68700
59320	62161	63101-63308	66985	68705
59325	62162	63700	66986	68720
59350	62163	63702	67101-67121	68745
59400-59430	62164	63704	67250	68750
59510-59899	62165	63706	67255	68760
60200	62180	63707	67311-67345	68761
60210	62190	63709	67875	68770
60212	62192	63710	67880	68815
60220	62200	63740	67882	68816
60225	62201	63741	67900-67924	69090
60240	62220	64752	67871	69150
66252	62223	64755	67973	69155
60254	62256	64760	67974	69300
60260	62258	64809	67975	69310
60270	62287	64818	68320	69320
60271	63043	64866	68325	69501-69554
60280	63044	64868	68326	69601-69676
60281	63050	64885-64911	68328	69950
60505	63051	65091-65175	68330	69955
60520	63076	65273	68335	
60521	63077	65710-65782	68340	
60522	63078	66220	68360	
60540	63081	66225	68362	

605 Nonpayable Radiology Service Codes

71552	75571	75956	76496	78351
72159	75900	75957	76497	
72198	75952	75958	76498	
73225	75953	75959	78267	
74263	75954	76140	78268	

606 Nonpayable Pathology and Laboratory Service Codes

80100	81403	81506	82962	86825
80101	81404	81508	83987	86826
80104	81405	81509	84145	86890
80502	81406	81510	84431	86891
81200-81393	81407	81511	86079	86910
81400-81400	81408	81512	86305	86911
81401	81479	81599	86352	86927
81402	81500	82075	86780	86930

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-7
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

606 Nonpayable Pathology and Laboratory Service Codes (cont.)

86931	88016	88738	89272	89335
86932	88020	88749	89280	89342
86960	88025	89250	89281	89343
86985	88027	89251	89290	89344
87150	88028	89253	89291	89346
87153	88029	89254	89300	89352
87493	88036	89255	89310	89353
87903	88037	89257	89320	89354
87904	88040	89258	89321	89356
88000	88045	89259	89322	89398
88005	88099	89260	89325	
88007	88125	89261	89329	
88012	88333	89264	89330	
88014	88334	89268	89331	

607 Nonpayable Medicine Services Codes

90281	90832	92314	93786	96376
90283	90833	92315	94005	96567
90284	90834	92316	94011	96902
90287	90836	92317	94012	96904
90384	90837	92325	94013	97005
90386	90838	92352	94015	97006
90389	90839	92353	94774	97537
90396	90840	92354	94775	97545
90634	90845	92358	94776	97546
90644	90865	92371	94777	97597
90645	90875	92531	95052	97598
90646	90876	92532	95120	97602
90647	90880	92533	95125	97605
90648	90885	92534	95130	97606
90654	90889	92540	95131	97755
90669	90901	92548	95132	97810
90670	90911	92550	95134	97811
90696	90940	92559	95824	97813
90698	90989	92560	95965	97814
90700	90993	92561	95967	98940
90702	90997	92562	95992	98941
90708	90999	92564	96000	98942
90710	91132	92570	96001	98943
90712	91133	92630	96002	98960
90720	92265	92633	96003	98961
90721	92270	92970	96004	98962
90723	92275	92971	96150	98966
90743	92283	92975	96151	98967
90744	92284	92992	96152	98968
90748	92285	92993	96153	98969
90791	92286	93660	96154	99000
90792	92287	93770	96155	99001

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-8
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

607 Nonpayable Medicine Services Codes (cont.)

99002	99071	99140	99192	99509
99024	99075	99143	99199	99510
99026	99078	99144	99500	99511
99027	99080	99145	99501	99512
99050	99082	99148	99502	99600
99051	99090	99149	99503	99601
99053	99091	99150	99504	99602
99056	99100	99172	99505	99605
99058	99116	99190	99506	99606
99060	99135	99191	99507	99607

608 Nonpayable CPT Category I and III Codes

0001F	0518F	1052F	3021F	3317F
0005F	0519F	1060F	3022F	3318F
0012F	0520F	1061F	3023F	3321F
0014F	0521F	1065F	3025F	3322F
0015F	0525F	1066F	3027F	3323F
0500F	0526F	1070F	3073F	3325F
0501F	0528F	1071F	3100F	3328F
0502F	0529F	1110F	3110F	3340F
0503F	0535F	1111F	3111F	3341F
0505F	0540F	1116F	3112F	3343F
0507F	0550F	1118F	3125F	3344F
0509F	0551F	1119F	3150F	3345F
0513F	0556F	1121F	3155F	3350F
0514F	0557F	1125F	3160F	3370F
0516F	0575F	1126F	3250F	3372F
0517F	1000F	1127F	3260F	3374F
0518F	1002F	1128F	3265F	3376F
0519F	1003F	1150F	3266F	3378F
0520F	1004F	1151F	3267F	3380F
0521F	1005F	1153F	3268F	3382F
0001F	1006F	1157F	3269F	3384F
0005F	1007F	1159F	3270F	3386F
0012F	1008F	1160F	3271F	3388F
0014F	1010F	2019F	3272F	3390F
0015F	1011F	2020F	3273F	3450F
0500F	1012F	2021F	3274F	3451F
0501F	1015F	2022F	3278F	3452F
0502F	1018F	2024F	3279F	3455F
0503F	1019F	2026F	3280F	3490F
0505F	1022F	3014F	3281F	3491F
0507F	1026F	3015F	3284F	3492F
0509F	1030F	3016F	3285F	3493F
0513F	1034F	3017F	3292F	3494F
0514F	1035F	3018F	3294F	3496F
0516F	1036F	3019F	3315F	3497F
0517F	1050F	3020F	3316F	3498F

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-9
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

608 Nonpayable Category II and III Codes (cont.)

3500F	4131F	6045F	0164T	0221T
3502F	4132F	7020F	0165T	0222T
3503F	4148F	7025F	0166T	0223T
3511F	4149F	0019T	0167T	0224T
3512F	4150F	0030T	0168T	0225T
3513F	4151F	0042T	0169T	0226T
3514F	4153F	0048T	0171T	0227T
3515F	4155F	0050T	0172T	0228T
3550F	4157F	0051T	0173T	0229T
3551F	4159F	0052T	0174T	0230T
3552F	4163F	0053T	0175T	0231T
3555F	4164F	0071T	0178T	0232T
4000F	4165F	0072T	0179T	0233T
4001F	4167F	0073T	0180T	0234T
4003F	4168F	0075T	0181T	0235T
4004F	4169F	0076T	0182T	0236T
4005F	4171F	0078T	0183T	0237T
4006F	4172F	0079T	0184T	0238T
4009F	4175F	0080T	0185T	0239T
4011F	4178F	0081T	0186T	0240T
4012F	4179F	0085T	0188T	0241T
4014F	4181F	0092T	0189T	0242T
4017F	4182F	0095T	0190T	0243T
4041F	4191F	0098T	0191T	0244T
4042F	4192F	0099T	0192T	0245T
4043F	4193F	0100T	0195T	0246T
4044F	4194F	0101T	0196T	0247T
4046F	4200F	0102T	0197T	0248T
4047F	4201F	0103T	0198T	0249T
4048F	4250F	0104T	0199T	0250T
4049F	4255F	0105T	0200T	0251T
4051F	4256F	0106T	0201T	0252T
4052F	4260F	0107T	0202T	0253T
4053F	4261F	0108T	0205T	0254T
4054F	4275F	0109T	0206T	0255T
4055F	4276F	0110T	0207T	0256T
4056F	4279F	0111T	0208T	0257T
4066F	4280F	0123T	0209T	0258T
4070F	4290F	0124T	0210T	0259T
4073F	4293F	0126T	0211T	
4075F	4300F	0141T	0212T	
4077F	4301F	0142T	0213T	
4084F	4306F	0143T	0214T	
4090F	4320F	0155T	0215T	
4095F	4325F	0156T	0216T	
4100F	5005F	0157T	0217T	
4115F	5010F	0158T	0218T	
4120F	5060F	0159T	0219T	
4124F	6040F	0163T	0220T	

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-10
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

609 Payable HCPCS Level II Codes

This section lists Level II HCPCS codes that are payable under MassHealth when provided by CDR outpatient hospitals.

A4641	J0780	J1720	J2778	J7309
A9500	J0833	J1725	J2785	J7312
A9502	J0834	J1740	J2788	J7321
A9503	J0840	J1743	J2790	J7323
A9505	J0881	J1745	J2792	J7324
A9512	J0882	J1750	J2793	J7325
A9537	J0885	J1786	J2794	J7326
G0105	J0886	J1790	J2796	J7335
G0108	J0897	J1800	J2820	J7599
G0109	J0900	J1826	J2910	J7608
G0121	J1020	J1885	J2916	J7614
G0202	J1030	J1890	J2920	J7620
G0206	J1040	J1950	J2930	J7626
G0270	J1055	J1956	J2940	J7633
G0271	J1056	J1990	J2941	J7639
J0129	J1060	J2060	J3010	J7644
J0135	J1070	J2150	J3030	J7665
J0171	J1080	J2175	J3095	J7669
J0207	J1094	J2248	J3110	J7676
J0215	J1100	J2250	J3120	J7682
J0256	J1160	J2270	J3130	J7686
J0290	J1170	J2271	J3230	J7699
J0295	J1200	J2275	J3240	J7799
J0348	J1260	J2300	J3243	J8561
J0456	J1290	J2310	J3250	J8562
J0461	J1300	J2315	J3262	J9000
J0475	J1320	J2323	J3301	J9001
J0476	J1438	J2355	J3302	J9025
J0558	J1440	J2357	J3303	J9031
J0561	J1441	J2358	J3357	J9035
J0585	J1460	J2405	J3360	J9040
J0586	J1557	J2426	J3385	J9041
J0587	J1559	J2430	J3396	J9043
J0592	J1561	J2440	J3410	J9045
J0597	J1562	J2469	J3411	J9055
J0598	J1566	J2503	J3430	J9060
J0638	J1569	J2505	J3487	J9070
J0640	J1571	J2507	J3490	J9130
J0690	J1580	J2510	J3590	J9155
J0694	J1599	J2515	J7030	J9171
J0696	J1626	J2550	J7060	J9178
J0697	J1630	J2560	J7070	J9179
J0702	J1650	J2562	J7302	J9181
J0715	J1655	J2675	J7303	J9190
J0718	J1670	J2680	J7304	J9201
J0775	J1710	J2760	J7307	J9202

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-11
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/13

609 Payable HCPCS Level II Codes (cont.)

J9206	J9263	J9360	Q0081	Q4111
J9212	J9264	J9370	Q0083	Q4112
J9213	J9265	J9390	Q0084	Q4113
J9214	J9293	J9395	Q4100	Q4114
J9215	J9300	J9999	Q4101	Q4115
J9216	J9302	L8614	Q4102	S0023
J9217	J9305	L8615	Q4103	S0028
J9218	J9307	L8616	Q4104	S0077
J9219	J9310	L8617	Q4105	S0302
J9228	J9315	L8618	Q4106	S2083
J9250	J9340	L8619	Q4107	
J9260	J9351	L8690	Q4108	
J9261	J9355	L8691	Q4110	

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-12
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/12

610 Modifiers

The following service code modifiers are allowed for billing under MassHealth. See Subchapter 5 of the *Chronic Disease and Rehabilitation Outpatient Hospital Manual* for billing instructions related to the use of modifiers. Modifiers are required to be used with procedure codes in some circumstances and should be used only as applicable and when appropriate. The patient's records must support the use of a modifier.

Modifiers for General Outpatient Use

- 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 evaluation and management encounters on the same date
- 50 Bilateral procedure
- 57 Decision for surgery
- 58 Staged or related procedure or service by the same physician or other qualified health care professional during postoperative period
- 59 Distinct procedural service
- 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
- 91 Repeat clinical diagnostic laboratory test
- 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 digitF9 Right hand, fifth digit
- FA Left hand, thumb
- 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)
- 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

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-13
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/12

610 Modifiers (cont.)

- 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

Modifiers for Therapy Services

HCPCS codes for therapy services are required to be differentiated according to the type of therapist providing the service (occupational, physical, or speech/language therapy). The following modifiers should be used to differentiate between the therapy services.

- GN Speech/language therapy
- GO Occupational therapy
- GP Physical therapy

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 with behavioral health need identified.

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.

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-14
Chronic Disease and Rehabilitation Outpatient Hospital Manual	Transmittal Letter COH-8	Date 07/01/12

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