MassHealth

Transmittal Letter DME-35

February 2019

**TO:** Durable Medical Equipment Providers Participating in MassHealth



**FROM:** Daniel Tsai, Assistant Secretary for MassHealth

**RE:** *Durable Medical Equipment Manual* (2018 HCPCS updates)

This letter transmits revisions to the list of service codes described in Subchapter 6 of the *Durable Medical Equipment Manual*. The Centers for Medicare & Medicaid Services (CMS) has revised the Healthcare Common Procedure Coding System (HCPCS) codes for 2018. The revised Subchapter 6 is effective for dates of service on or after March 1, 2018.

Providers may consult the CMS website at [www.cms.gov](file:///\\ehs-clu-bos-081\file%20services\masshealthops\Publications\Dan%20Deleo\Active%20Jobs\DME%20Sub6%20and%20TL%20(Daniel%20Girard)\ESO%20DRAFTS\www.cms.gov%20) for a full description of the service codes.

For prior-authorization (PA) requirements, service limits, and place-of-service codes, providers should refer to the updated version of the interactive MassHealth DME and Oxygen Payment and Coverage Guideline Tool posted on the MassHealth website at:

[www.mass.gov/service-details/masshealth-payment-and-coverage-guideline-tools](file:///\\ehs-clu-bos-081\file%20services\masshealthops\Publications\Dan%20Deleo\Active%20Jobs\DME%20Sub6%20and%20TL%20(Daniel%20Girard)\ESO%20DRAFTS\www.mass.gov\service-details\masshealth-payment-and-coverage-guideline-tools).

**Added Codes:**

A4207; A4208; A4209; A4224; A4225; A7048; E0118; E0617; E2204; K0010; K0011; K0012; K0553; K0554; S5162.

**Deleted Codes:**

A4400; A4649; B9000; E0628; E0968; E0969; E0994; E1050; E1060; E1070; E1083; E1084; E1087; E1088; E1092; E1093; E1100; E1110; E1150; E1160; E1170; E1171; E1172; E1227; E1228; E1240; E1270; E1280; E1295; K0900; L8501.

**Updated Modifiers**

The modifier KE has been replaced with KU per CMS’s competitive bid program number 3 (refer to EOHHS administrative bulletin 18-09 for codes with the KU modifier at: [https://www.mass.gov/files/documents/2018/03/27/ab-18-09.pdf](file:///C:\Users\JPierce\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\2167BRZ9\www.mass.gov\files\documents\2018\03\27\ab-18-09.pdf)).

**Reminder: Complex Rehabilitative Power Wheelchairs and Accessories**

As indicated in Transmittal Letter DME-34 (October 2016), for the purchase of certain capped rental complex power wheelchairs and accessories, the MassHealth member must sign and date a purchase/rental option letter. The purchase/rental option letter must be submitted to MassHealth with the PA request and also must be maintained in the DME provider’s files. In the *DME and Oxygen Payment and Coverage Guideline Tool*, there is a message within the HCPCS that lists which capped rental equipment and accessories require the purchase/rental option letter

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**Fee Schedule**

If you wish to obtain a fee schedule, you may download the Executive Office of Health and Human Services regulations at no cost at [www.mass.gov/service-details/eohhs-regulations](https://www.mass.gov/service-details/eohhs-regulations). The regulation title for Durable Medical Equipment, Oxygen and Respiratory Therapy Equipment is 101 CMR 322.00.**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).

To sign up to receive email alerts when MassHealth issues new transmittal letters and provider bulletins, send a blank email to [join-masshealth-provider-pubs@listserv.state.ma.us](mailto:join-masshealth-provider-pubs@listserv.state.ma.us). No text in the body or subject line is needed.

**Questions**

LTSS providers should direct their questions about this transmittal letter or other questions to the MassHealth Long-Term Services & Supports (LTSS) Provider Service Center by phone at  
(844) 368-5184 (toll-free) or via email at [support@masshealthltss.com](mailto:support@masshealthltss.com).

NEW MATERIAL

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

Durable Medical Equipment Manual

Pages vi and 6-1 through 6-4

OBSOLETE MATERIAL

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

Durable Medical Equipment Manual

Page vi — transmitted by Transmittal Letter DME-32

Pages 6-1 through 6-4 — transmitted by Transmittal Letter DME-34

6. Services Codes

Introduction 6-1

Modifiers 6-1

Service Codes 6-1

Appendix A. Directory A-1

Appendix C. Third‑Party-Liability Codes C-1

Appendix T. CMSP Covered Codes T-1

Appendix U. DPH-Designated Serious Reportable Events That Are Not Provider Preventable

Conditions U-1

Appendix V. MassHealth Billing Instructions for Provider Preventable Conditions V-1

Appendix W. EPSDT Services Medical and Dental Protocols and Periodicity Schedules W-1

Appendix X. Family Assistance Copayments and Deductibles X-1

Appendix Y. EVS Codes and Messages Y-1

Appendix Z. EPSDT/PPHSD Screening Services Codes Z-1

MassHealth pays for the services for codes listed in Section 602 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 409.000 and 450.000. In addition, a provider may request prior authorization (PA) for any medically necessary durable medical equipment or supplies. Providers should consult *Transmittal Letter DME-35* for the specific effective dates of service for the service codes.

Providers should refer to the *MassHealth DME and Oxygen Payment and Coverage Guideline Tool* for service descriptions, applicable modifiers, place-of-service codes, PA requirements, service limits, and pricing and markup information. For certain services that are payable on an individual consideration (I.C.) basis, the tool can calculate the payable amount, based on information entered into certain fields on the tool.

To get to the *MassHealth DME and Oxygen Payment and Coverage Guideline Tool*, go to [www.mass.gov/service-details/masshealth-payment-and-coverage-guideline-tools](file:///\\ehs-clu-bos-081\file%20services\masshealthops\Publications\Dan%20Deleo\Active%20Jobs\DME%20Sub6%20and%20TL%20(Daniel%20Girard)\DISTRO%20DRAFTS\www.mass.gov\service-details\masshealth-payment-and-coverage-guideline-tools).

602 Service Codes

This section lists Level II HCPCS codes that are payable under MassHealth. Refer to the Centers for Medicare & Medicaid Services website at [www.cms.gov](file://C:\Users\mcrystal\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\1JM99HCQ\www.cms.gov) for more detailed descriptions when billing for Level II HCPCS codes provided to MassHealth members.

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