




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

MassHealth
Durable Medical Equipment Provider
Bulletin 28
Oxygen and Respiratory Therapy
Equipment Providers Bulletin 22
September 2021

TO: Durable Medical Equipment and Oxygen and Respiratory Therapy Equipment Providers Participating in MassHealth

FROM: Amanda Cassel Kraft, Acting Assistant Secretary for MassHealth 

RE: **Adoption of Premium Performance Specifications for Absorbent Products and Update for Absorbent Products Prior Authorization Process**

Introduction

This bulletin provides information about MassHealth's policy for absorbent products. MassHealth has a preferred supplier agreement with Geriatric Medical and Surgical Supply Inc., effective since January 1, 2018. MassHealth providers are not required to utilize the preferred supplier. However, MassHealth DME providers are required to furnish products to MassHealth members of equivalent or better quality than those offered by the preferred supplier. Under its publicly procured contract, MassHealth established quality requirements based on those of the National Association for Continenence (NAFC).

This bulletin reiterates the minimum quality requirements for Standard Performance products adopted in 2018; announces the implementation of minimum quality requirements for Premium Performance products for certain codes; and outlines process enhancements to reduce administrative burden and streamlines the Prior Authorization (PA) process. The Premium Performance products requirements are effective for dates of service on or after September 23, 2021.

EOHHS has also issued Administrative Bulletin 21-23 (AB) with the payment rates for three new Premium Performance Products code/modifier combinations and updated the MassHealth Durable Medical Equipment and Oxygen Payment and Coverage Guideline Tool (Tool). The links for the AB and Tool are within and at the end of this bulletin.

Product Specifications for Certain Absorbent Products

Standard Performance Product Specifications

DME Administrative Bulletin 18-15 for Standard Performance Covered Products includes the codes, code descriptions, and rates for Standard Performance Products, and can be found at www.mass.gov/regulations/101-CMR-32200-durable-medical-equipment-oxygen-and-respiratory-therapy-equipment.

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Since 2018, MassHealth has required DME providers to ensure certain absorbent products (briefs/diapers) — those corresponding to HCPCS codes T4521, T4522, T4523, T4524, T4533, T4543, and T4543 UD — comply with standards adopted by the NAFC and meet the minimum product specifications for Standard Performance Products. Effective for dates of service on or after September 23, 2021, the minimum product specifications below for Standard Performance Products will continue to apply to three products corresponding to codes T4522, T4523, and T4524:

- a. No plastic (non-breathable) backed products
- b. Rewet rate of <2.0 g
- c. Rate of Acquisition (ROA) of <60 seconds
- d. Retention capacity of >250 g
- e. Presence of breathable zones with a minimum value of >100 cubic feet per minute (cfm)
- f. Presence of a closure system which allows for multiple fastening and unfastening occurrences

Providers who choose a supplier other than MassHealth's preferred supplier must be able to demonstrate that their products meet the required minimum Standard Performance requirements for the specified codes.

Effective for dates of service on or after September 23, 2021, products for existing codes T4521, T4533, T4543, and T4543-UD must meet the Premium Performance quality requirements described in the next section.

Premium Performance Product Specifications

Effective for dates of service on or after September 23, 2021, for members for whom Standard Performance briefs/diapers have not met their medical needs, MassHealth is adopting Premium Performance standards for briefs/diapers. Premium Performance briefs/diapers are subject to prior authorization (PA), as discussed in the following section. Premium Performance products should be considered for members in circumstances including, but not limited to:

- members who have used a Standard Performance brief/diaper and reports frequent urine or fecal leakage; or
- members accessing the community frequently and who require a Premium Performance brief/diaper that allows for multiple wettings; or
- members at risk for or with a history of skin breakdown.

MassHealth DME providers must ensure that briefs/diapers for HCPCS codes T4521, T4522-U6, T4523-U6, T4524-U6, T4533, T4543, and T4543-UD comply with the quality standards and product specifications for Premium Performance products adopted and periodically updated by NAFC:

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- a. No plastic (non-breathable backed products)
- b. Rewet rate of < 1.0 g
- c. Rate of Acquisition (ROA) of <50 seconds
- d. Retention Capacity of > 400 g
- e. Presence of breathable zones with a minimum value of >100 cubic feet per minute (cfm)
- f. Presence of a closure system which allows for multiple fastening and unfastening occurrences

The MassHealth Preferred Supplier already provides products that meet the minimum quality requirements for Premium Performance products for HCPCS codes T4521, T4533, T4543, and T4543-UD. Pricing for these codes will remain as listed in Administrative Bulletin 18-15.

Providers who choose a supplier other than MassHealth’s preferred supplier must be able to demonstrate that their products corresponding to codes T4521, T4522-U6, T4523-U6, T4524-U6, T4533, T4543, and T4543-UD meet the required minimum Premium Performance requirements for the specified codes.

Table 1, below, summarizes these updates:

Products subject to Standard Performance Specifications prior to September 23, 2021	Products subject to Standard Performance Specifications effective September 23, 2021	Products subject to Premium Performance Specifications effective September 23, 2021
T4521 T4522 T4523 T4524 T4533 T4543 T4543-UD	T4522 T4523 T4524	T4521 T4522-U6 T4523-U6 T4524-U6 T4533 T4543 T4543-UD

Codes and Payment for Premium Performance Products

As noted above, payment rates for codes T4521, T4533, T4543, and T4543-UD remain as set forth in Administrative Bulletin 18-15.

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Effective for dates of service on or after September 23, 2021, the Premium Performance quality requirements apply to the following new code/modifier combinations:

T4522 - U6	Premium: Adult sized disposable incontinence product brief/diaper, medium, each,
T4523- U6	Premium: Adult sized disposable incontinence product, brief/diaper, large each
T4524- U6	Premium: Adult sized disposable incontinence product, brief/diaper, extra- large, each.

Payment rates for these three new code/modifier combinations are set forth in Administrative Bulletin 21-23 at www.mass.gov/lists/2021-eohhs-administrative-bulletins.

Prior Authorization (PA) Process

All absorbent products require PA. PA requests for absorbent products must be accompanied by clinical documentation that supports the medical necessity for the absorbent product(s) being requested and must be submitted to MassHealth in accordance with 130 CMR 409.418: *Prior Authorization*. As part of the PA request, the DME provider must obtain a written prescription and letter of medical necessity signed by the member's prescribing provider. The prescription and letter of medical necessity must meet the requirements at 130 CMR 409. 416: *Prescription and Letter of Medical Necessity Requirements*.

Providers are strongly encouraged to submit PA requests electronically, using the MassHealth Long Term Services and Supports (LTSS) Provider Portal at www.masshealthltss.com. MassHealth encourages providers to use the [MassHealth Prescription and Medical Necessity Review Form for Absorbent Products](#) for paper PA requests. Any additional clinical documentation supporting medical necessity must be submitted with the PA request.

Process Change: Initial PA Requests for Quantities Higher than Otherwise Applicable Limit

MassHealth currently issues two PAs: one for units up to the applicable limit, and a second for the number of units above the otherwise applicable limit. To reduce administrative burden and cost, effective for new absorbent product PA requests submitted on or after September 23, 2021, MassHealth will no longer issue two PAs. On or after September 23, 2021, providers may file one initial PA request and supporting documentation for the entire number of units being requested, including any units in excess of the otherwise applicable limit set forth on the online MassHealth Durable Medical Equipment and Oxygen Payment and Coverage Guideline Tool (Tool), which can be found at www.mass.gov/info-details/masshealth-payment-and-coverage-guideline-tools#masshealth-durable-medical-equipment-and-oxygen-payment-and-coverage-guideline-tool. MassHealth will issue only one PA for the entire number of units approved.

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Requesting an Increase in Units for Approved Product or Change of Product during an Existing PA Period

The provider must submit a new PA request with updated documents that support the medical necessity of an increase in units for approved products or change of product during the time period covered by an existing PA.

MassHealth reviews requests for PA, including requests for an increase in products or a change in products, based on medical necessity. The member's PA requests will be adjusted accordingly to ensure that the same HCPCS code is not active on multiple PAs.

Process Change: Requesting a Size Change during an Existing PA Period

To decrease administrative burden, MassHealth is streamlining the process for requesting approval of a change in size for a previously approved absorbent product. Effective for dates of service on or after September 23, 2021, providers must submit a new PA request for the requested size change. Where medical necessity has been established for absorbents on the existing PA, additional documents will not be required for a change in size within the same product category.

To request a change in size, providers should file a new PA request and provide the following information in the external text message or Provider comment section of the PA.

- A statement that the member requires a change in size;
- The active PA number;
- The size being requested; and
- The corresponding HCPCS code.

The existing PA will be modified to reflect any approved change in size. Notices to the DME provider and MassHealth member will reflect the MassHealth decision regarding the size change.

Requesting PA Extensions for up to 90 Days

To avoid disruption of services for members, effective for dates of service on or after September 23, 2021, providers may request an extension of a PA for up to 90 days, to ensure continued service for a member. Extension requests may be used if providers have not been able to obtain the documentation needed for a new PA from a member's medical provider.

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To request a PA extension, providers should file a new PA request and provide the following information in the external text message or Provider comment section of the PA.

- Reason for the extension;
- Length of extension being requested; and
- PA number requiring extension.

Providers are expected to make diligent efforts to obtain the appropriate documentation in a timely manner and to maintain records for outreach to members and their prescribers. All documentation, recordkeeping, and other applicable provisions of 130 CMR 450.000 and 130 CMR 409.000 apply.

Prior Authorization Submission Process

Providers must submit all information related to a PA request through the Long-Term Services and Supports Management System (LTSS). If submitting a non-electronic request, the provider should complete and mail the PA-1 form, and any supporting documentation, to the address on the back of the PA-1 form. Providers may contact the MassHealth LTSS Provider Service Center at (844) 368-5184 with any questions about LTSS access. Providers can access the MassHealth LTSS Provider Portal at www.masshealthltss.com. The PA-1 form can be found at www.mass.gov/doc/prior-authorization-request-pa-1.

PA Requests for Community Case Management (CCM) Members

When submitting PA requests for Community Case Management (CCM) members, all information related to the request should be submitted using the Provider Online Service Center (POSC). If submitting a non-electronic request, the provider should complete and mail the PA-1 form, and any supporting documentation, to the address on the back of the PA-1 form. Providers may contact the MassHealth Customer Service Center at (800) 841-2900 with any questions about POSC access.

Helpful Links

The MassHealth Durable Medical Equipment and Oxygen Payment and Coverage Guideline Tool can be found at www.mass.gov/info-details/masshealth-payment-and-coverage-guideline-tools#masshealth-durable-medical-equipment-and-oxygen-payment-and-coverage-guideline-tool

DME Administrative Bulletin 18-15 can be found at <https://www.mass.gov/lists/2018-eohhs-administrative-bulletins>. DME Administrative Bulletin 21-23 can be found at <https://www.mass.gov/lists/2021-eohhs-administrative-bulletins>.

101 CMR 322.00: Durable Medical Equipment, Oxygen and Respiratory Therapy Equipment can be found at www.mass.gov/regulations/101-CMR-32200-durable-medical-equipment-oxygen-and-respiratory-therapy-equipment.

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MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](#) web page.

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

Questions

If you have any questions about the information in this bulletin, please contact the Long-Term Services and Supports (LTSS) Provider Service Center.

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