# Durable Medical Equipment Bulletin 37



Commonwealth of Massachusetts

Executive Office of Health and Human Services

Office of Medicaid

[www.mass.gov/masshealth](https://www.mass.gov/orgs/masshealth)

**DATE:** July 2024

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

**FROM:** Mike Levine, Assistant Secretary for MassHealth [signature of Mike Levine]

RE: Personal Emergency Response System Policy Update

## Introduction

The Executive Office of Health and Human Services (EOHHS) is updating its Personal Emergency Response System (PERS) policy.

Effective July 1, 2024, notwithstanding 130 CMR 409.402: *Definitions* and 130 CMR 409.429: *Personal Emergency Response System* (*PERS)*, providers may bill for members who connect to a PERS through either a landline or a cellular network.

**Note:** Members are not required to obtain an individual cellular plan when using a cellular PERS.

## Informational Modifier and Billing Instructions

Providers must use the informational modifier U8 with HCPCS codes S5160, S5161 RR, S5162, and S5162TW, when a cellular network PERS is used. See [Administrative Bulletin 24-21](https://www.mass.gov/lists/2024-eohhs-administrative-bulletins).

To bill for cellular network PERS, providers must include the U8 modifier with the HCPCS codes S5160, S5161 RR, S5162, and S5162TW. The U8 code will identify cellular PERS; billing without a modifier will indicate a landline PERS.

The interactive [MassHealth Payment and Coverage Guideline Tools](https://www.mass.gov/info-details/masshealth-payment-and-coverage-guideline-tools#masshealth-durable-medical-equipment-and-oxygen-payment-and-coverage-guideline-tool-) page has been updated to include the U8 modifier for the PERS codes.

## Personal Emergency Response System General Prescription Form

The [Personal Emergency Response System (PERS) General Prescription Form](https://www.mass.gov/lists/masshealth-provider-forms-by-provider-type-a-d?_gl=1*4hi79d*_ga*MTMxMjY3MjY3Mi4xNzA2NzM2NjAx*_ga_MCLPEGW7WM*MTcxNzYxNDc2My4xMjEuMS4xNzE3NjE0ODA1LjAuMC4w#durable-medical-equipment-) has been updated. Providers must complete all sections of the form. Section 5 must be completed to identify which type of PERS unit will be installed.

## MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](http://www.mass.gov/masshealth-provider-bulletins) web page.

[Sign up](https://www.mass.gov/forms/email-notifications-for-provider-bulletins-and-transmittal-letters) to receive email alerts when MassHealth issues new bulletins and transmittal letters.

## Questions?

The MassHealth LTSS Provider Service Center is open from 8 am to 6 pm ET, Monday through Friday, excluding holidays. LTSS providers should direct questions about this transmittal letter or other MassHealth LTSS Provider questions to the LTSS Third Party Administrator (TPA) as follows:

**Phone:** Toll-free (844) 368-5184

**Email:**  [support@masshealthltss.com](mailto:support@masshealthltss.com)

**Portal:**  [www.MassHealthLTSS.com](http://www.masshealthltss.com/)

**Mail:** MassHealth LTSS

PO Box 159108

Boston, MA 02215

**FAX:** (888) 832-3006

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