# Durable Medical Equipment Bulletin 40



Commonwealth of Massachusetts

Executive Office of Health and Human Services

Office of Medicaid

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

**DATE:** August 2025

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

**FROM:** Mike Levine, Assistant Secretary for MassHealth

RE: Reporting Requirements for All Providers Using Assistive Technology Professionals and Filing Claims for Corrective Mobility System Repairs

## Overview

The Executive Office of Health and Human Services (EOHHS) established a payment methodology for certain mobility system repair add-on payments. See [101 CMR 322.00](https://www.mass.gov/regulations/101-CMR-32200-rates-for-durable-medical-equipment-oxygen-and-respiratory-therapy-equipment): *Rates for Durable Medical Equipment, Oxygen and Respiratory Therapy Equipment*. EOHHS also issued [Durable Medical Equipment Bulletin 38](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-d-h" \l "durable-medical-equipment), which remains in effect.

[DME Bulletin 38](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-d-h" \l "durable-medical-equipment) required reporting by durable medical equipment (DME) providers who employ assistive technology professionals (ATP) and that file claims for add-on payments. Through this bulletin, MassHealth is expanding the reporting requirements to ***all*** corrective mobility system repair providers who employ ATP and file claims for any corrective mobility system repairs, **regardless of whether the provider files a claim for the add-on payment**.

## How MassHealth is Expanding the Reporting Requirements

For providers who submit claims for the add-on payment, see [DME-38.](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-d-h#durable-medical-equipment)

As of July 1, 2025, MassHealth is requiring all DME providers who employ an ATP and file claims for corrective mobility system repairs, to submit a Baseline Report of data for six months prior to July 1, 2025. This report is due **September 15, 2025**. The Baseline Report section below provides detailed information. See 130 CMR 409.404 (B)(7)(d).

### One-time Baseline Report

The Baseline Report (BR) and attestation form can be found in the [MassHealth Provider Library](https://www.mass.gov/lists/masshealth-provider-forms-by-provider-type-a-d" \l "durable-medical-equipment-), Form CMSR-APBR. Providers must report baseline data for the 6 months prior to July 1, 2025, and submit that data by September 15, 2025, to support@masshealthltss.com. The BR consists of, but is not limited to, the following:

* Employee information
* Massachusetts service locations and hours of operation
* Massachusetts corrective nobility system repair vehicles
* Stocked corrective mobility system repair parts
* Technologies designed to enhance corrective mobility system repair process and
* Performance metrics

### Quarterly Performance Metric Report

DME providers must submit the Performance Metric Report (PMR) quarterly. The PMR form can be found in the [MassHealth Provider Library](https://www.mass.gov/lists/masshealth-provider-forms-by-provider-type-a-d#durable-medical-equipment-), Form CMSR-APPMR. DME providers who are required to submit a BR by September 15, 2025, must submit their first PMR beginning with data for Quarter 2 of the 2026 State Fiscal Year (October 1 – December 31, 2026). The PMR must be submitted to MassHealth by February 1, 2026. Providers must continue to provide PMR reports quarterly as listed below:

* Quarter 1 data: July 1 – September 30 Submission Date: November 1st
* Quarter 2 data: October 1 – December 31 Submission Date: February 1st **(First PMR due)**
* Quarter 3 data: January 1 – March 31 Submission Date: May 1st
* Quarter 4 data: April 1 – June 31 Submission Date: August 1st

### Investment Impact Report

The Investment Impact Report is only applicable to providers who submit claims for the add-on payment. [See DME-38](https://www.mass.gov/doc/durable-medical-equipment-bulletin-38-corrective-mobility-system-repair-add-on-payment-and-supplemental-payment-for-certain-patient-lift-systems-0/download).

### More on How to Submit Documentation

Providers must provide all documentation MassHealth requests, in accordance with M.G.L. c. 118E, § 38; 130 CMR 450.000: *Administrative and Billing Regulations*; 130 CMR 409.405 (S) and 130 CMR 409.426. Providers must submit requested documentation within MassHealth specifications.

Completed forms must be submitted to MassHealth through the reporting email box at support@masshealthltss.com. The subject line must include “Corrective Mobility System Repair Reporting.”

Failure to comply with these reporting requirements may result in sanction, including financial sanction, pursuant to 130 CMR 450.238.

## 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?

If you have questions about the information in this bulletin, please contact:

### Long-Term Services and Supports

Phone: (844) 368-5184 (toll free)

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

Portal: [MassHealthLTSS.com](https://www.masshealthltss.com/s/?language=en_US)

Mail: MassHealth LTSS

PO Box 159108

Boston, MA 02215

Fax: (888) 832-3006

### All Other Provider Types

Phone: (800) 841-2900, TDD/TTY: 711

Email: [provider@masshealthquestions.com](mailto:provider@masshealthquestions.com)

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