




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



MassHealth
Transmittal Letter FAS-25
June 2012

TO: Freestanding Ambulatory Surgery Centers Participating in MassHealth

FROM: Julian J. Harris, M.D., Medicaid Director 

RE: MassHealth Rules on Provider Preventable Conditions (PPCs) That Are Additional Other Provider Preventable Conditions (Additional OPPCs) and on Serious Reportable Events (SREs); and Updates (New Modifiers) to Subchapter 6 of the *Freestanding Ambulatory Surgery Center Manual*

This letter transmits updates to Subchapter 6 of the *Freestanding Ambulatory Surgery Center (FASC) Manual* to add modifiers for Provider Preventable Conditions (PPCs) that are National Coverage Determinations (NCDs).

This letter also describes

- MassHealth rules that apply to FASCs, governing reporting and payment reductions for PPCs that are “Additional Other Provider Preventable Conditions (Additional OPPCs)”; and
- MassHealth rules that apply to FASCs, governing nonpayment for those Serious Reportable Events (SREs) designated by the Massachusetts Department of Public Health (DPH) that are not PPCs under MassHealth.

All changes reflected in this transmittal letter are **effective for dates of service on or after July 1, 2012.**

I. Background on Provider Preventable Conditions (PPCs)

MassHealth refers FASC providers to *Transmittal Letter ALL-195* for more information on PPCs and related MassHealth billing instructions that providers, including FASCs, must follow for reporting and billing PPCs to MassHealth.

As described in *Transmittal Letter ALL-195*, MassHealth has issued Appendix V for all MassHealth provider manuals, which sets forth the MassHealth billing instructions that providers must follow for reporting and billing PPCs. Part 2 of new Appendix V of the *FASC Manual* identifies the lists of PPCs that apply to FASC providers, broken down by category of PPCs.

In *Transmittal Letter ALL-195*, there are also rules governing FASCs’ reporting of, and related MassHealth payment reductions to FASCs for, PPCs that are National Coverage Determinations (NCDs).

These claims submission requirements, billing instructions, and payment rules apply to all PPCs applicable to FASCs, including those PPCs that are also designated by DPH as Serious Reportable Events.

II. Updates to Subchapter 6 of the *FASC Manual*

The updated Subchapter 6 that is attached to this transmittal letter adds modifiers for PPCs that are NCDs.

III. MassHealth Rules Applicable to FASCs, Governing Reporting and Payment Reductions for PPCs That Are “Additional Other Provider Preventable Conditions (Additional OPPCs)”

Effective for dates of service on or after July 1, 2012, the following rules in this Section III will govern FASCs’ reporting of, and MassHealth payment reductions to, FASCs for PPCs that are Additional OPPCs.

For purposes of this Section III, the term “Additional Other Provider Preventable Condition (Additional OPPC)” shall mean any condition identified as such in Table (2) in Part 2 of Appendix V of all provider manuals, as it applies to FASCs (as Appendix V may be updated from time to time).

A. FASCs’ Reporting of Additional OPPCs to MassHealth

Effective for dates of service on or after July 1, 2012, FASCs must report, through claims submissions to MassHealth, the occurrence of an Additional OPPC that took place on its premises.

FASCs’ reporting of Additional OPPCs, and related claims submissions, must be in accordance with applicable MassHealth regulations, provider manuals, billing instructions, and other guidance, as set forth in Part 2 of Appendix V of the provider’s MassHealth provider manual.

B. Payment Reductions to FASCs for Additional OPPCs

1. MassHealth will not pay FASCs for Additional OPPC-related services that occur on the FASCs’ premises, or for any follow-up FASC services that are related to the initial Additional OPPC, that the provider reports through claims submissions.
2. The Additional OPPC reporting and nonpayment rules also apply to third-party-liability and crossover payments by MassHealth.
3. FASCs are prohibited from charging members for Additional OPPCs and Additional OPPC-related services that are deemed nonpayable by MassHealth, including, without limitation, copayments or deductibles.
4. If an FASC future-year payment rate is calculated using a data source that would otherwise include the Additional OPPC, all reported Additional OPPC-related costs/services will be excluded from the calculation.
5. If medically necessary services unrelated to the Additional OPPC were provided to the member, MassHealth will cover those services if they are otherwise payable.

C. FASCs' Reporting Additional OPPCs to the Department of Public Health (DPH)

In addition to complying with the MassHealth billing instructions and payment rules governing Additional OPPCs, FASCs must continue to report the occurrence of the Additional OPPC as a "Serious Reportable Event" to DPH, and perform the documented review process as set forth in and in accordance with DPH regulations at 105 CMR 140.308(B) and (C). The FASC must also provide copies of such reports to MassHealth and any other responsible third-party payer and inform the patient, as required by, and in accordance with, DPH regulations at 105 CMR 140.308(B) and (C). The copies to MassHealth must be sent to the following address.

PPC/Serious Reportable Event Coordinator
MassHealth
Utilization Management Department
100 Hancock Street, 6th Floor
Quincy, MA 02171

Notwithstanding such reporting and documented review process as set forth in 105 CMR 140.308(B) and (C), effective for dates of service on or after July 1, 2012, FASC claims to MassHealth and related payment methods for Additional OPPCs are governed by this Section III.

D. MassHealth Requests for Additional Information

MassHealth may request additional information from FASCs that MassHealth deems necessary to facilitate its review and payment determinations of any Additional OPPC and the provider must comply with the request.

IV. MassHealth Rules Applicable to FASCs Governing Nonpayment for Those DPH-Designated Serious Reportable Events That Are Not PPCs under MassHealth

The MassHealth rules in this Section IV govern MassHealth nonpayment to FASCs for those DPH-designated Serious Reportable Events (SREs) that are *not* Provider Preventable Conditions (PPCs) under MassHealth, effective for dates of service on or after July 1, 2012. Appendix U of all provider manuals identifies those DPH-designated SREs that are not PPCs under MassHealth and that are subject to the rules in this Section IV.

FASCs must report to DPH the occurrence of an SRE listed in Appendix U, and perform the documented review process as set forth in, and in accordance with, DPH regulations at 105 CMR 140.308(B) and (C). The FASC must also provide copies of such reports to MassHealth and any other responsible third-party payer and inform the patient as required by, and in accordance with, DPH regulations at 105 CMR 140.308(B) and (C). The copies to MassHealth must be sent to the following address.

Serious Reportable Event (SRE) Coordinator
MassHealth
Utilization Management Department
100 Hancock Street, 6th Floor
Quincy, MA 02171

If upon completing a preventability determination following the occurrence of an SRE, in accordance with DPH regulations at 105 CMR 140.308(C), the FASC seeks payment from MassHealth for FASC services to a MassHealth member for an SRE that is listed in Appendix U of all provider manuals, MassHealth shall make a determination about payment based on its review and following the nonpayment rules set forth below.

Nonpayment for SREs

For purposes of this Section IV, “preventable” is defined by DPH in its regulations at 105 CMR 140.308, and means events that could have been avoided by proper adherence to applicable patient safety guidelines, best practices, and FASC policies and procedures.

1. Effective for dates of service on or after July 1, 2012, MassHealth will not pay FASCs for, and FASCs are prohibited from, charging or seeking reimbursement from MassHealth or the member for services that are made necessary by, or are provided as a result of, a serious reportable event (SRE) listed in Appendix U occurring on premises covered by the FASCs’ license, that is preventable, within the FASCs’ control, and unambiguously the result of a system failure as described in applicable DPH regulations in effect on the date of service. Such services include any of the following:
 - (a) the occurrence of the event;
 - (b) the correction or remediation of the event; or
 - (c) subsequent complications arising from the occurrence of the event.
2. All FASC services provided during follow-up care as a result of a nonbillable SRE are not payable if such services are provided:
 - (a) at the FASC at which the nonbillable SRE occurred; or
 - (b) as otherwise set forth in DPH regulations at 105 CMR 140.308(D).
3. An FASC may bill and receive payment for all medically necessary services provided by the FASC to new or transferred patients who previously incurred an SRE at a separately licensed institution.
4. Charges for services, including copayments or deductibles, deemed nonbillable by MassHealth are not billable to the member.

MassHealth Requests for Additional Information.

MassHealth may request additional information from FASCs that MassHealth deems necessary to facilitate its review and payment determinations of any Serious Reportable Event and the provider must comply with the request.

Correction to Modifier

Transmittal Letter FAS-24 incorrectly listed modifier “G” (Ambulatory Surgical Center (ASC) facility service). The modifier should have been listed as “SG.” This letter also transmits the correction to this modifier.

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 the information in 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.)

Freestanding Ambulatory Surgery Center Manual

Pages vi and 6-1 through 6-12

OBSOLETE MATERIAL

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

Freestanding Ambulatory Surgery Center Manual

Pages vi and 6-1 through 6-12 — transmitted by Transmittal Letter FAS-24

Commonwealth of Massachusetts MassHealth Provider Manual Series Freestanding Ambulatory Surgery Center Manual	Subchapter Number and Title Table of Contents	Page vi
	Transmittal Letter FAS-25	Date 07/01/12

6. Service Codes

Payable Surgery Services.....	6-1
Modifiers.....	6-12
Appendix A. Directory	A-1
Appendix B. Enrollment Centers.....	B-1
Appendix C. Third-Party-Liability Codes	C-1
Appendix D. (Reserved)	
Appendix E. Admission Guidelines	E-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/Messages	Y-1
Appendix Z. EPSDT/PPHSD Screening Services Codes	Z-1

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-1
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services

MassHealth pays for the services represented by the codes listed in Subchapter 6 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 423.000 and 450.000. A freestanding ambulatory surgery center may request prior authorization for any medically necessary service reimbursable under the federal Medicaid Act in accordance with 130 CMR 450.144, 42 U.S.C. 1396d(a), and 42 U.S.C. 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 *Freestanding Ambulatory Surgery Center Manual*.

Legend:

- CPA-2: A completed Certification for Payable Abortion form is required. See 130 CMR 423.419 for additional information.
- CS-18: A completed Sterilization Consent Form (for members aged 18 through 20) is required. See 130 CMR 423.417, and 423.418 for additional information.
- CS-21: A completed Sterilization Consent Form (for members aged 21 and older) is required. See 130 CMR 423.417, and 423.418 for additional information.
- IC: Claim requires individual consideration. See 130 CMR 423.402 and 450.271 for more information.
- PA: Service requires prior authorization. See 130 CMR 420.410, 423.406, 424.421, 433.408, and 450.303 in the *Dental Manual, Freestanding Ambulatory Surgery Center Manual, Podiatrist Manual, Physician Manual*, respectively, for more information.

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
10121	11646	12056	15040	15241
10180	11770	12057	15050	15260
11010	11771	13100	15100	15261
11011	11772	13101	15101	15271
11012	11960	13120	15110	15272
11042	11970	13121	15111	15273
11043	11971	13131	15115	15274
11044	12005	13132	15116	15275
11404	12006	13150	15120	15276
11406	12007	13151	15121	15277
11424	12016	13152	15130	15278
11426	12017	13160	15131	15570
11444	12018	14000	15135	15572
11446	12020	14001	15136	15574
11450	12021	14020	15150	15576
11451	12034	14021	15151	15600
11462	12035	14040	15152	15610
11463	12036	14041	15155	15620
11470	12037	14060	15156	15630
11471	12044	14061	15157	15650
11604	12045	14301	15200	15732
11606	12046	14302	15201	15734
11624	12047	14350	15220	15736
11626	12054	15002	15221	15650
11644	12055	15004	15240	15732

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-2
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
15734	19112	21012	21340	22902
15736	19120	21013	21345	22903
15738	19125	21014	21355	22904
15740	19126	21015	21400	22905
15750	19290	21016	21401	23000
15760	19291	21025	21421	23020
15770	19300 (PA)	21026	21440	23030
15820 (PA)	19301	21029	21445	23031
15821 (PA)	19302	21031	21450	23035
15822 (PA)	19303	21034	21451	23040
15823 (PA)	19304	21040	21452	23044
15830 (PA)	19318 (PA)	21044	21453	23066
15832 (PA)	19328 (PA)	21046	21454	23071
15833 (PA)	19330 (PA)	21047	21461	23073
15834 (PA)	19340 (PA)	21050	21462	23075
15835	19342 (PA)	21060	21465	23076
15840	19350 (PA)	21070	21480	23077
15841	19357 (PA)	21100	21485	23078
15845	19366 (PA)	21181	21490	23100
15847	19370 (PA)	21206 (PA)	21497	23101
15920	19371 (PA)	21208 (PA)	21501	23105
15922	19380 (PA)	21209 (PA)	21502	23106
15931	20005	21210 (PA)	21552	23107
15933	20200	21215 (PA)	21554	23120
15934	20205	21230 (PA)	21555	23125
15935	20206	21235 (PA)	21556	23130
15936	20220	21240 (PA)	21600	23140
15937	20225	21242 (PA)	21610	23145
15940	20240	21243 (PA)	21700	23146
15941	20245	21244 (PA)	21720	23150
15944	20250	21267 (PA)	21725	23155
15945	20251	21270 (PA)	21800	23156
15946	20525	21275 (PA)	21805	23170
15950	20650	21280 (PA)	21820	23172
15951	20670	21282 (PA)	21925	23174
15952	20680	21295 (PA)	21930	23180
15953	20690	21296 (PA)	21931	23182
15956	20692	21310	21932	23184
15958	20693	21315	21933	23190
16025	20694	21320	21935	23195
16030	20900	21325	21936	23330
19020	20902	21330	22305	23331
19100	20924	21335	22310	23395
19101	20926	21336	22315	23397
19102	20975	21337	22505	23400
19103	21010	21338	22900	23405
19110	21011	21339	22901	23406

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-3
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
23410	23921	24400	25031	25290
23412	23930	24410	25035	25295
23415	23931	24420	25040	25300
23420	23935	24430	25066	25301
23430	24000	24435	25071	25310
23440	24006	24470	25073	25312
23450	24066	24495	25075	25315
23455	24075	24498	25076	25316
23460	24076	24500	25077	25320
23462	24077	24505	25078	25332
23465	24100	24515	25085	25335
23466	24101	24516	25100	25337
23480	24102	24530	25101	25350
23485	24105	24535	25105	25355
23490	24110	24538	25107	25360
23491	24115	24545	25109	25365
23500	24116	24546	25110	25370
23505	24120	24560	25111	25375
23515	24125	24565	25112	25390
23520	24126	24566	25115	25391
23525	24130	24575	25116	25392
23530	24134	24576	25118	25393
23532	24136	24577	25119	25400
23540	24138	24579	25120	25405
23545	24140	24582	25125	25415
23550	24145	24586	25126	25420
23552	24147	24587	25130	25425
23570	24155	24600	25135	25426
23575	24160	24605	25136	25440
23585	24164	24615	25145	25441
23600	24201	24620	25150	25442
23605	24301	24635	25151	25443
23615	24305	24655	25210	25444
23616	24310	24665	25215	25445
23620	24320	24666	25230	25446
23625	24330	24670	25240	25447
23630	24331	24675	25248	25449
23650	24340	24685	25250	25450
23655	24341	24800	25251	25455
23660	24342	24802	25260	25490
23665	24345	24925	25263	25491
23670	24360	25000	25265	25492
23675	24361	25020	25270	25505
23680	24362	25023	25272	25515
23700	24363	25024	25274	25520
23800	24365	25025	25275	25525
23802	24366	25028	25280	25526

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-4
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
25535	26111	26433	26555	26951
25545	26113	26434	26560	26952
25565	26115	26437	26561	26990
25574	26116	26440	26562	26991
25575	26117	26442	26565	27000
25605	26118	26445	26567	27001
25606	26121	26449	26568	27003
25607	26123	26450	26580	27033
25608	26125	26455	26587	27035
25609	26130	26460	26590	27040
25624	26135	26471	26591	27041
25628	26140	26474	26593	27043
25635	26145	26476	26596	27045
25645	26160	26477	26605	27047
25660	26170	26478	26607	27048
25670	26180	26479	26608	27049
25671	26185	26480	26615	27050
25675	26200	26483	26645	27052
25676	26205	26485	26650	27059
25680	26210	26489	26665	27060
25685	26215	26490	26675	27062
25690	26230	26492	26676	27065
25695	26235	26494	26685	27066
25800	26236	26496	26686	27067
25805	26250	26497	26705	27080
25810	26260	26498	26706	27086
25820	26262	26499	26715	27087
25825	26320	26500	26727	27097
25830	26350	26502	26735	27098
25907	26352	26508	26742	27100
25922	26356	26510	26746	27105
25929	26357	26516	26756	27110
26011	26358	26517	26765	27111
26020	26370	26518	26776	27193
26025	26372	26520	26785	27194
26030	26373	26525	26820	27202
26034	26390	26530	26841	27230
26040	26392	26531	26842	27238
26045	26410	26535	26843	27246
26055	26412	26536	26844	27250
26060	26415	26540	26850	27252
26070	26416	26541	26852	27257
26075	26418	26542	26860	27265
26080	26420	26545	26861	27266
26100	26426	26546	26862	27275
26105	26428	26548	26863	27301
26110	26432	26550	26910	27305

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-5
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
27306	27420	27612	27740	28005
27307	27422	27614	27742	28008
27310	27424	27615	27745	28011
27323	27425	27616	27750	28020
27324	27427	27618	27752	28022
27325	27428	27619	27756	28024
27326	27429	27620	27758	28035
27327	27430	27625	27759	28039
27328	27435	27626	27760	28041
27329	27437	27630	27762	28043
27330	27438	27632	27766	28045
27331	27441	27634	27780	28046
27332	27442	27635	27781	28047
27333	27443	27637	27784	28050
27334	27496	27638	27786	28052
27335	27497	27640	27788	28054
27337	27498	27641	27792	28055
27339	27499	27647	27808	28060
27340	27500	27650	27810	28062
27345	27501	27652	27814	28070
27347	27502	27654	27816	28072
27350	27503	27656	27818	28080
27355	27508	27658	27822	28086
27356	27509	27659	27823	28088
27357	27510	27664	27824	28090
27358	27516	27665	27825	28092
27360	27517	27675	27826	28100
27364	27520	27676	27827	28102
27372	27530	27680	27828	28103
27380	27532	27681	27829	28104
27381	27538	27685	27830	28106
27385	27550	27686	27831	28107
27386	27552	27687	27832	28110
27390	27560	27690	27840	28111
27391	27562	27691	27842	28112
27392	27566	27692	27846	28113
27393	27570	27695	27848	28114
27394	27594	27696	27860	28116
27395	27600	27698	27870	28118
27396	27601	27700	27871	28119
27397	27602	27704	27884	28120
27400	27603	27705	27889	28122
27403	27604	27707	27892	28126
27405	27605	27709	27893	28130
27407	27606	27730	27894	28140
27409	27607	27732	28002	28150
27418	27610	27734	28003	28153

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-6
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
28160	28320	28810	29882	30801
28171	28322	28820	29883	30802
28173	28340	28825	29884	30903
28175	28341	29800 (PA)	29885	30905
28192	28344	29804 (PA)	29886	30906
28193	28345	29805	29887	30915
28200	28400	29806	29888	30920
28202	28405	29807	29889	30930
28208	28406	29819	29891	31020
28210	28415	29820	29892	31030
28222	28420	29821	29893	31032
28225	28435	29822	29894	31050
28226	28436	29823	29895	31051
28234	28445	29824	29897	31070
28238	28456	29825	29898	31075
28240	28465	29826	29899	31080
28250	28476	29827	29900	31081
28260	28485	29830	29901	31084
28261	28496	29834	29902	31085
28262	28505	29835	30115	31086
28264	28525	29836	30117	31087
28270	28531	29837	30118	31090
28280	28545	29838	30120	31200
28285	28546	29840	30125	31201
28286	28555	29843	30130	31205
28288	28575	29844	30140	31233
28289	28576	29845	30150	31235
28290	28585	29846	30160	31237
28292	28605	29847	30310	31238
28293	28606	29848	30320	31239
28294	28615	29850	30400 (PA)	31240
28296	28635	29851	30410 (PA)	31254
28297	28636	29855	30420 (PA)	31255
28298	28645	29856	30430 (PA)	31256
28299	28665	29860	30435 (PA)	31267
28300	28666	29861	30450 (PA)	31276
28302	28675	29862	30460	31287
28304	28705	29863	30462	31288
28305	28715	29870	30465	31300
28306	28725	29871	30520	31320
28307	28730	29874	30540	31400
28308	28735	29875	30545	31420
28309	28737	29876	30560	31510
28310	28740	29877	30580	31511
28312	28750	29879	30600	31512
28313	28755	29880	30620	31513
28315	28760	29881	30630	31515

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-7
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
31525	31755	36819	40650	41874
31526	31820	36820	40652	41899
31527	31825	36821	40654	42000
31528	31830	36825	40700	42107
31529	32400	36830	40701	42120
31530	32405	36831	40720	42140 (PA)
31531	32420	36832	40761	42145
31535	32421	36833	40801	42180
31536	33010	36835	40806	42182
31540	33011	36860	40814	42200
31541	33222	36861	40816	42205
31560	33223	36870	40818	42210
31561	35188	37607	40819	42215
31570	35207	37609	40831	42220
31571	35875	37650	40840 (PA)	42226
31576	35876	37700	40842 (PA)	42235
31577	36260	37718	40843 (PA)	42260
31578	36261	37722	40844 (PA)	42300
31580	36262	37735	40845 (PA)	42305
31582	36555	37760	41005	42310
31588	36556	37780	41006	42320
31590	36557	37785	41007	42340
31595	36558	37790	41008	42405
31611	36560	38300	41009	42408
31612	36561	38305	41010	42409
31613	36563	38308	41015	42410
31614	36565	38500	41016	42415
31615	36566	38505	41017	42420
31622	36568	38510	41018	42425
31623	36569	38520	41112	42440
31624	36570	38525	41113	42450
31625	36571	38530	41114	42500
31628	36575	38542	41115	42505
31629	36576	38550	41116	42507
31630	36578	38555	41120	42508
31631	36580	38570	41250	42509
31635	36581	38571	41251	42510
31640	36582	38572	41252	42600
31641	36583	38740	41500	42700
31643	36584	38745	41510	42720
31645	36585	38760	41520	42725
31646	36589	40500	41800	42800
31656	36590	40510	41805	42802
31717	36640	40520	41820	42804
31720	36800	40525	41827	42806
31730	36810	40527	41828	42808
31750	36815	40530	41872	42810

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-8
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
42815	43249	44388	45900	47554
42820	43250	44389	45905	47555
42821	43251	44390	45910	47556
42825	43255	44391	45915	47560
42826	43256	44392	46020	47561
42830	43258	44393	46030	47630
42831	43259	44394	46040	48102
42835	43260	45000	46045	49082
42836	43261	45005	46050	49083
42860	43262	45020	46060	49084
42870	43263	45100	46080	49180
42890	43264	45108	46200	49250
42892	43265	45150	46220	49320
42900	43267	45160	46250	49321
42950	43268	45171	46255	49322
42955	43269	45172	46257	49402
42960	43271	45190	46258	49421
42962	43272	45305	46260	49422
42972	43450	45307	46261	49426
43200	43453	45308	46262	49495
43201	43456	45309	46270	49496
43202	43458	45315	46275	49500
43204	43653	45317	46280	49501
43205	43760	45320	46285	49505
43215	43870	45321	46288	49507
43216	44100	45331	46608	49520
43217	44312	45332	46610	49521
43219	44340	45333	46611	49525
43220	44360	45334	46612	49540
43226	44361	45335	46615	49550
43227	44363	45337	46700	49553
43228	44364	45338	46750	49555
43231	44365	45339	46753	49557
43232	44366	45340	46754	49560
43234	44369	45355	46760	49561
43235	44370	45378	46761	49565
43236	44372	45379	46762	49566
43239	44373	45380	46917	49568
43240	44376	45381	46922	49570
43241	44377	45382	46924	49572
43242	44378	45383	47000	49580
43243	44379	45384	47510	49582
43244	44380	45385	47511	49585
43245	44382	45386	47525	49587
43246	44383	45500	47530	49590
43247	44385	45505	47552	49600
43248	44386	45560	47553	49650

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-9
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
49651	52204	52648	54060	54505
50200	52214	52700	54065	54512
50390	52224	53000	54100	54520
50392	52234	53010	54105	54522
50393	52235	53020	54110	54530
50395	52240	53040	54111	54550
50396	52250	53080	54112	54600
50398	52260	53200	54115	54620
50551	52270	53210	54120	54640
50553	52275	53215	54150	54660
50555	52276	53220	54160	54670
50557	52277	53230	54161	54680
50561	52281	53235	54162	54690
50590	52282	53240	54163	54700
50688	52283	53250	54164	54800
50947	52285	53260	54205	54830
50948	52290	53265	54220	54840
50951	52300	53270	54300	54860
50953	52305	53275	54304	54861
50955	52310	53400	54308	54865
50957	52315	53405	54312	55040
50961	52317	53410	54316	55041
50970	52318	53420	54318	55060
50972	52320	53425	54322	55100
50974	52325	53430	54324	55110
50976	52327 (PA)	53431	54326	55120
50980	52330	53440	54328	55150
51020	52332	53442	54340	55175
51030	52334	53444	54344	55180
51040	52341	53445	54348	55250 (CS-18 or CS-21)
51045	52342	53446	54352	
51050	52343	53447	54360	55500
51065	52344	53449	54380	55520
51080	52345	53450	54385	55530
51102	52346	53460	54400 (PA)	55535
51500	52351	53502	54401 (PA)	55540
51520	52352	53505	54405 (PA)	55550
51710	52353	53510	54406	55680
51715 (PA)	52354	53515	54408	55700
51726	52355	53520	54410	55705
51785	52400	53605	54415	55720
51880	52450	53665	54416	55725
52000	52500	53850 (PA)	54420	55875
52001	52601	54000	54435	56440
52005	52630	54001	54440	56441
52007	52640	54015	54450	56442
52010	52647	54057	54500	56515

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-10
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
56620	58555	61886	64490	64772
56625	58558	61888	64491	64774
56700	58559	62194	64492	64776
56740	58560 (CS-18	62225	64493	64778
56800	or CS-21)	62230	64494	64782
56810	58561 (CS-18	62263	64495	64783
57000	or CS-21)	62268	64510	64784
57010	58562	62269	64520	64786
57020	58563	62270	64530	64787
57023	58565 (CS-18	62272	64553	64788
57065	or CS-21)	62273	64575	64790
57105	58660	62280	64580	64792
57130	58661 (CS-18	62281	64585	64795
57135	or CS-21)	62282	64590	64802
57180	58662	62287	64595	64821
57200	58670 (CS-18	62294	64600	64831
57210	or CS-21)	62310	64605	64832
57220	58671 (CS-18	62311	64610	64834
57230	or CS-21)	62318	64620	64835
57240	58672	62319	64630	64836
57250	58673	62350	64633	64837
57260	58800	62355	64634	64840
57265	58820	62360	64635	64856
57268	58900	62361	64636	64857
57289	59160	62362	64680	64858
57291	59320	62365	64702	64859
57300	59812	63600	64704	64861
57400	59820	63610	64708	64862
57410	59821	63650	64712	64864
57415	59840 (CPA-2)	63661	64713	64865
57513	59841 (CPA-2)	63662	64714	64870
57520	(first trimester)	63663	64716	64872
57522	59870	63664	64718	64874
57530	59871	63685	64719	64876
57550	60000	63688	64721	64885
57555	60200	63744	64722	64886
57556	60280	63746	64726	64890
57558	60281	64410	64727	64891
57700	61020	64415	64732	64892
57720	61026	64417	64734	64893
58120	61050	64420	64736	64895
58145	61055	64421	64738	64896
58350	61070	64430	64740	64897
58353	61215	64479	64742	64898
58545	61790	64480	64744	64901
58546	61791	64483	64746	64902
58550	61885	64484	64771	64905

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes	Page 6-11
	Transmittal Letter FAS-25	Date 07/01/12
Freestanding Ambulatory Surgery Center Manual		

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
64907	66020	67031	67900 (PA)	69140
65091	66030	67036	67901 (PA)	69145
65093	66130	67039	67902 (PA)	69150
65101	66150	67040	67903 (PA)	69205
65103	66155	67041	67904 (PA)	69300 (PA)
65105	66160	67042	67906 (PA)	69310
65110	66165	67043	67908 (PA)	69320
65112	66170	67107	67909 (PA)	69421
65114	66172	67108	67911 (PA)	69436
65130	66180	67112	67914	69440
65135	66185	67115	67916 (PA)	69450
65140	66220	67120	67917 (PA)	69501
65150	66225	67121	67921	69502
65155	66250	67141	67923 (PA)	69505
65175	66500	67218	67924 (PA)	69511
65235	66505	67227	67935	69530
65260	66600	67250	67950	69550
65265	66605	67255	67961 (PA)	69552
65270	66625	67311	67966 (PA)	69601
65272	66630	67312	67971 (PA)	69602
65275	66635	67314	67973 (PA)	69603
65280	66680	67316	67974 (PA)	69604
65285	66682	67318	67975 (PA)	69605
65290	66700	67320	68115	69620
65400	66710	67331	68130	69631
65410	66720	67332	68320	69632
65420	66740	67334	68330	69633
65426	66821	67335	68505	69635
65710	66825	67340	68325	69636
65730	66830	67346	68326	69637
65750	66840	67400	68328	69641
65755	66850	67405	68335	69642
65770	66852	67412	68510	69643
65772	66920	67413	68520	69644
65775	66930	67415	68525	69645
65800	66940	67420	68540	69646
65805	66982	67430	68550	69650
65810	66983	67440	68700	69660
65815	66984	67450	68720	69661
65850	66985	67550	68745	69662
65865	66986	67560	68750	69666
65870	67005	67715	68770	69667
65875	67010	67808	68810	69670
65880	67015	67830	68811	69676
65900	67025	67835	68815	69670
65920	67027	67880	69110	69676
65930	67030	67882	69120	69700

Commonwealth of Massachusetts MassHealth Provider Manual Series Freestanding Ambulatory Surgery Center Manual	Subchapter Number and Title 6. Service Codes	Page 6-12
	Transmittal Letter FAS-25	Date 07/01/12

601 Payable Surgery Services (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
69711	69720	68500	69806	69915
69714	69725	69740	69820	69930
69715	68340	69745	69840	
69717	68360	69801	69905	
69718	68362	69805	69910	

602 Modifiers

- 50 Bilateral procedure
- 51 Multiple procedures
- 73 Discontinued outpatient hospital/ambulatory surgery center (ASC) procedure before the administration of anesthesia
- 74 Discontinued outpatient hospital/ambulatory surgery center (ASC) procedure after administration of anesthesia
- SG Ambulatory surgical center (ASC) facility service