



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



MassHealth
Transmittal Letter FPA-48
May 2013

TO: Family Planning Agencies Participating in MassHealth
FROM: Julian J. Harris, M.D., Medicaid Director
RE: *Family Planning Agency Manual* (New Modifiers for National Correct Coding Initiatives)

This letter transmits updates to Subchapter 6 modifiers in the *Family Planning Agency Manual*. MassHealth has also expanded the list of allowable modifiers for use with MassHealth-covered service codes, as described in [All Provider Bulletin 227](#) (June 2012). Providers must refer to the American Medical Association's Current Procedural Terminology (CPT) 2012 for the service descriptions listed in Subchapter 6 of the *Family Planning Agency Manual*. Providers should refer to www.cms.hhs.gov for Level II code descriptions.

The revised Subchapter 6 is effective for dates of service on or after July 1, 2012.

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.)

Family Planning Agency Manual

Pages 6-13 and 6-14

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Family Planning Agency Manual

Pages 6-13 6-14 — transmitted by Transmittal Letter FPA-46

Commonwealth of Massachusetts MassHealth Provider Manual Series	Subchapter Number and Title 6. Service Codes and Descriptions	Page 6-13
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Family Planning Agency Manual		

605 Service Codes and Descriptions: Laboratory Services (cont.)

Service

Code Service Description

- 88147 Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision
- 88148 screening by automated system with manual rescreening under physician supervision
- 88150 Cytopathology, slides, cervical or vaginal; manual screening under physician supervision
- 88152 with manual screening and computer-assisted rescreening under physician supervision
- 88153 with manual screening and rescreening under physician supervision
- 88154 with manual screening and computer-assisted rescreening using cell selection and review under physician supervision
- 88155 Cytopathology, slides, cervical or vaginal, definitive hormonal evaluation (e.g., maturation index, karyopyknotic index, estrogenic index) (List separately in addition to code(s) for other technical and interpretation services.)
- 88160 Cytopathology, smears, any other source; screening and interpretation
- 88161 preparation, screening, and interpretation
- 88162 extended study involving over 5 slides and/or multiple stains (I.C.)
- 88164 Cytopathology, slides, cervical or vaginal (the Bethesda System); manual screening under physician supervision
- 88165 with manual screening and rescreening under physician supervision
- 88166 with manual screening and computer-assisted rescreening under physician supervision
- 86167 with manual screening and computer-assisted rescreening using cell selection and review under physician supervision
- 88199 Unlisted cytopathology procedure (I.C.)

CYTOGENETIC STUDIES

- 88261 Chromosome analysis; count five cells, one karyotype, with banding
- 88262 count 15 to 20 cells, two karyotypes, with banding
- 88267 Chromosome analysis, amniotic fluid or chorionic villus, count 15 cells, one karyotype, with banding
- 88280 Chromosome analysis; additional karyotypes, each study
- 88285 additional cells counted, each study

SURGICAL PATHOLOGY

Codes 88300 through 88309 are further clarified in the Current Procedural Terminology (CPT) code book.

- 88300 Level I - surgical pathology, gross examination only
- 88302 Level II - surgical pathology, gross and microscopic examination
- 88304 Level III - surgical pathology, gross and microscopic examination
- 88305 Level IV - surgical pathology, gross and microscopic examination
- 88307 Level V - surgical pathology, gross and microscopic examination
- 88309 Level VI - surgical pathology, gross and microscopic examination

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605 Service Codes and Descriptions: Laboratory Services (cont.)

Service

Code Service Description

OTHER PROCEDURES

89050 Cell count, miscellaneous body fluids (e.g., cerebrospinal fluid, joint fluid), except blood

606 Modifiers

The following service code modifiers are allowed for billing under MassHealth.

- 24 Unrelated evaluation and management service by the same physician or other qualified health care professional during a postoperative period
- 59 Distinct procedural service
- LT Left side (used to identify procedures performed on the left side of the body)
- RT Right side (used to identify procedures performed on the right side of the body)

The following modifiers are for Provider Preventable Conditions (PPCs) that are National Coverage Determinations.

- PA Surgical or other invasive procedure on wrong body part
- PB Surgical or other invasive procedure on wrong patient
- PC Wrong surgery or other invasive procedure on patient

For more information on the use of these modifiers, see Appendix V of your provider manual.

This publication contains codes that are copyrighted by the American Medical Association. Certain terms used in the service descriptions for HCPCS codes are defined in the Physician's Current Procedural Terminology (CPT) code book.