




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



MassHealth  
Transmittal Letter IDTF-14  
July 2015

**TO:** Independent Diagnostic Testing Facilities Participating in MassHealth  
**FROM:** Daniel Tsai, Assistant Secretary for MassHealth   
**RE:** *Independent Diagnostic Testing Facility Manual* (Subchapter 6 Revisions)

This letter transmits revisions to the service codes in the *Independent Diagnostic Testing Facility Manual*. The Centers for Medicare & Medicaid Services (CMS) have revised the Healthcare Common Procedures Coding System (HCPCS) for 2015. MassHealth has updated Subchapter 6 to include new service codes effective for dates of service on or after January 1, 2015.

MassHealth providers must refer to the American Medical Association's *Current Procedural Terminology* (CPT) codebook or the HCPCS Level II codebook to get service descriptions of the codes listed in Subchapter 6 of the *Independent Diagnostic Testing Facility Manual*.

If you wish to obtain a fee schedule, you may download the Executive Office of Health and Human Services regulations at no cost at [www.mass.gov/eohhs](http://www.mass.gov/eohhs). The regulation title for Radiology Services is 114.3 CMR 18.00 and the regulation title for Medicine is 101 CMR 317.00.

### **MassHealth Website**

This transmittal letter and attached pages are available on the MassHealth website at [www.mass.gov/masshealth](http://www.mass.gov/masshealth).

### **Questions**

If you have any questions about the information in this transmittal letter, please contact the MassHealth Customer Service Center at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to 617-988-8974.

(cont.)

NEW MATERIAL

(The pages listed here contain new or revised language.)

Independent Diagnostic Testing Facility Manual

Pages 6-1 through 6-6

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Independent Diagnostic Testing Facility Manual

Pages 6-1 through 6-6 — transmitted by Transmittal Letter IDTF-12

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>	<b>Subchapter Number and Title</b> 6. Service Codes	<b>Page</b> 6-1
	<b>Transmittal Letter</b> IDTF-14	<b>Date</b> 01/01/15
Independent Diagnostic Testing Facility Manual		

601 Introduction

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 431.000 and 450.000. MassHealth providers must refer to the American Medical Association's *Current Procedural Terminology (CPT)* or the Health Care Procedure Code Set (HCPCS) Level II codebook for the service code and service descriptions when billing for services provided to MassHealth members.

An independent diagnostic testing facility (IDTF) 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 *Independent Diagnostic Testing Facility Manual*.

“IC” indicates that the claim requires individual consideration. See 130 CMR 431.406 for more information. “PA” indicates that the service requires prior authorization. See 130 CMR 450.303 for more information.

602 Portable X-Ray: Radiology Service Codes

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
70030	70380	72090	73090	73650
70100	70390	72100	73092	73660
70110	71010	72110	73100	74000
70120	71015	72114	73110	74010
70130	71020	72120	73115	74020
70134	71021	72170	73120	74022
70140	71022	72190	73130	74210
70150	71023	72200	73140	74220
70160	71030	72202	73500	74230
70190	71034	72220	73510	74235
70200	71035	72240	73520	74240
70210	71100	72255	73525	74241
70220	71101	72265	73530	74245
70240	71110	72270	73540	74246
70250	71111	72275	73550	74247
70260	71120	72285	73560	74249
70300	71130	72295	73562	74250
70310	72010	73000	73564	74251
70320	72020	73010	73565	74260
70328	72040	73020	73580	74270
70330	72050	73030	73590	74280
70332	72052	73040	73592	74290
70355	72069	73050	73600	74291
70360	72070	73060	73610	74300
70370	72072	73070	73615	74301
70371	72074	73080	73620	74305
70373	72080	73085	73630	74320

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>	<b>Subchapter Number and Title</b> 6. Service Codes	<b>Page</b> 6-2
	<b>Transmittal Letter</b> IDTF-14	<b>Date</b> 01/01/15
Independent Diagnostic Testing Facility Manual		

603 Freestanding Magnetic Resonance Imaging (FMRI): Radiology Service Codes

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
70336 (PA)	70558	72195	73723	77021
70540	70559	72196	73725	77022
70542	71550	72197	74181	77058 (PA)
70543	71551	73218	74182	77059 (PA)
70544	71555	73219	74183	A4641
70545	72141	73220	74185	A9500 (IC)
70546	72142	73221	74301	A9502 (IC)
70547	72146	73222	74305	A9503 (IC)
70548	72147	73223	74320	A9505 (IC)
70549	72148	73718	75557	A9512 (IC)
70551	72149	73719	75559	A9537 (IC)
70552	72156	73720	75561	
70553	72157	73721	75563	
70557	72158	73722	75565	

604 Diagnostic Imaging Centers: Radiology Service Codes

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
59025	70360	70549	72040	72148
70030	70370	70551	72050	72149
70100	70371	70552	72052	72156
70110	70373	70553	72069	72157
70120	70380	70554	72070	72158
70130	70390	70555	72072	72170
70134	70450	71010	72074	72190
70140	70460	71015	72080	72192
70150	70470	71020	72090	72193
70160	70480	71021	72100	72194
70190	70481	71022	72110	72195
70200	70482	71023	72114	72196
70210	70486	71030	72120	72197
70220	70487	71034	72125	72200
70240	70488	71035	72126	72202
70250	70490	71100	72127	72220
70260	70491	71101	72128	72240
70300	70492	71110	72129	72255
70310	70540	71111	72130	72265
70320	70542	71120	72131	72270
70328	70543	71130	72132	72275
70330	70544	71550	72133	72285
70332	70545	71551	72141	72295
70336	70546	71555	72142	73000
70350	70547	72010	72146	73010
70355	70548	72020	72147	73020

<b>Commonwealth of Massachusetts</b> <b>MassHealth</b> <b>Provider Manual Series</b>  Independent Diagnostic Testing Facility Manual	<b>Subchapter Number and Title</b> 6. Service Codes	<b>Page</b> 6-3
	<b>Transmittal Letter</b> IDTF-14	<b>Date</b> 01/01/15

604 Diagnostic Imaging Centers: Radiology Service Codes (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
73030	73701	74305	75746	76506
73040	73702	74320	75756	76510
73050	73718	74327	75774	76511
73060	73719	74330	75791	76512
73070	73720	74340	75801	76513
73080	73721	74355	75803	76514
73085	73722	74400	75805	76516
73090	73723	74410	75807	76519
73092	73725	74415	75809	76529
73100	74000	74420	75810	76536
73110	74010	74425	75820	76604
73115	74020	74430	75822	76641
73120	74022	74440	75825	76642
73130	74150	74445	75827	76700
73140	74160	74450	75831	76705
73200	74170	74455	75833	76770
73201	74174	74470	75840	76775
73202	74176	74475	75842	76776
73218	74177	74480	75860	76800
73219	74178	74485	75870	76801
73220	74181	74710	75872	76802
73221	74182	74740	75880	76805
73222	74183	74742	75885	76810
73223	74185	74775	75887	76811
73500	74190	75557	75889	76812
73510	74210	75559	75891	76813
73520	74220	75561	75893	76814
73525	74230	75563	75898	76815
73530	74235	75565	75901	76816
73540	74240	75572	75902	76817
73550	74245	75573	75945	76818
73560	74246	75574	75946	76820
73562	74247	75600	76000	76821
73564	74249	75605	76001	76825
73565	74250	75625	76010	76826
73580	74251	75630	76080	76827
73590	74260	75658	76098	76828
73592	74261 (PA)	75705	76100	76830
73600	74262 (PA)	75710	76101	76831
73610	74270	75716	76102	76856
73615	74280	75726	76120	76857
73620	74283	75731	76125	76870
73630	74290	75733	76376	76872
73650	74291	75736	76377	76873
73660	74300	75741	76380	76881
73700	74301	75743	76499 (IC)	76882

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>	<b>Subchapter Number and Title</b> 6. Service Codes	<b>Page</b> 6-4
	<b>Transmittal Letter</b> IDTF-14	<b>Date</b> 01/01/15
Independent Diagnostic Testing Facility Manual		

604 Diagnostic Imaging Centers: Radiology Service Codes (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
76885	78014	78290	78630	93042
76886	78015	78291	78635	93224
76937	78016	78299 (IC)	78645	93225
76942	78018	78300	78647	93226
76945	78020	78305	78650	93227
76946	78070	78306	78660	93228 (IC)
76948	78071	78315	78699 (IC)	93229 (IC)
76965	78072	78320	78700	93268
76970	78075	78350	78701	93270
76977	78099 (IC)	78399 (IC)	78707	93271
76999 (IC)	78102	78414 (IC)	78708	93272
77001	78103	78428	78709	93278
77002	78104	78445	78710	93303
77003	78110	78451	78710	93304
77011	78111	78452	78725	93306
77012	78120	78453	78730	93307
77013	78121	78454	78740	93308
77014	78122	78456	78761	93312
77021	78130	78457	78799 (IC)	93313
77022	78135	78458	78800	93314
77051	78140	78459	78801	93315
77052	78185	78466	78802	93316
77053	78190	78468	78803	93317
77054	78191	78469	78804	93318
77055	78195	78472	78805	93320
77056	78199	78473	78806	93321
77057	78201	78481	78807	93325
77058 (PA)	78202	78483	78808	93350
77059 (PA)	78205	78491	78811	93351
77061	78206	78492	78812	93352
77062	78215	78494	78813	93724
77063	78216	78496	78814	93740
77071	78226	78499 (IC)	78815	93745 (IC)
77072	78227	78579	78816	93784
77073	78230	78580	78999 (IC)	93786
77074	78231	78582	93000	93788
77075	78232	78597	93005	93790
77076	78258	78598	93010	93797
77077	78261	78599 (IC)	93015	93798
77078	78262	78600	93016	93799 (IC)
77080	78264	78601	93017	93880
77081	78270	78605	93018	93882
77085	78271	78607	93024	93886
77086	78272	78608	93025	93888
78012	78278	78609	93040	93890
78013	78282 (IC)	78610	93041	93893

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>	<b>Subchapter Number and Title</b> 6. Service Codes	<b>Page</b> 6-5
	<b>Transmittal Letter</b> IDTF-14	<b>Date</b> 01/01/15

604 Diagnostic Imaging Centers: Radiology Service Codes (cont.)

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
93922	93965	93980	95956	A9537 (IC)
93923	93970	93981	A4641 (IC)	G0202
93924	93971	93990	A9500 (IC)	G0204
93925	93975	93998 (IC)	A9502 (IC)	G0206
93926	93976	95950	A9503 (IC)	
93930	93978	95951	A9505 (IC)	
93931	93979	95953	A9512 (IC)	

605 Mobile Mammography Van: Radiology Service Codes

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
76641	77052	77055	77061	G0202
76642	77053	77056	77062	G0204
77051	77054	77057	77063	G0206

606 Sleep Centers: Radiology Service Codes

<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>	<u>Service Code</u>
95782	95800	95805	95807	95810
95783	95801	95806	95808	95811

607 Modifiers

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

<u>Modifier</u>	<u>Description</u>
26	Professional Component
TC	Technical Component

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

<u>Modifier</u>	<u>Description</u>
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.

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<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>  Independent Diagnostic Testing Facility Manual	<b>Subchapter Number and Title</b> 6. Service Codes	<b>Page</b> 6-6
	<b>Transmittal Letter</b> IDTF-14	<b>Date</b> 01/01/15

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