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

MassHealth

Transmittal Letter LAB-55

April 2023

 **TO:** Independent Clinical Laboratories Participating in MassHealth

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

 **RE:** Removal of Individual Consideration Effective August 1, 2022; Updated Codes in Subchapter 6 for HCPCS 2023

This letter transmits revisions to the service codes in the *Independent Clinical Laboratory Manual*. The Centers for Medicare & Medicaid Services has revised the Healthcare Common Procedure Coding System (HCPCS) codes for 2023. MassHealth has updated Subchapter 6 to include new service codes effective for dates of service on or after January 1, 2023; delete certain codes effective at the end of the federal public health emergency on May 11, 2023; and remove individual consideration (IC) from certain codes effective August 1, 2022.

MassHealth providers must refer to the American Medical Association’s 2023 *Current Procedural Terminology* (CPT) codebook or the *Healthcare Common Procedure Coding System (HCPCS) Level II* codebook for service descriptions of the codes in Subchapter 6 of the *Independent Clinical Laboratory Manual.*

IC has been removed from the following codes.

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In addition, the following codes have been added or deleted.

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| Added codes | Effective date |
| 81445 (PA) | 1/1/2023 |
| 81450 (PA) | 1/1/2023 |
| 81455 (PA) | 1/1/2023 |
| 81513 | 1/1/2023 |
| 87593 | 7/26/2022 |

|  |  |
| --- | --- |
| Deleted codes | Effective date |
| G2023 | 5/11/2023 |
| G2024 | 5/11/2023 |

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/service-details/eohhs-regulations](https://www.mass.gov/service-details/eohhs-regulations). The regulation title for Clinical Laboratory Services is 101 CMR 320.00.

# **MassHealth Website**

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

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

# **Questions**

If you have any questions about this transmittal letter, please contact the MassHealth Customer Service Center at (800) 841-2900, TDD/TTY: 711; email your inquiry to provider@masshealthquestions.com; or fax your inquiry to (617) 988-8974.

## NEW MATERIAL

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

Independent Clinical Laboratory Manual

Pages vi and 6-1 through 6-8

## OBSOLETE MATERIAL

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

Independent Clinical Laboratory Manual

Pages vi and 6-1 through 6-6—transmitted by Transmittal Letter LAB-54

6. Service Codes

 Introduction ……………………………………………………………………………………... 6-1

 Payable Laboratory Services 6-1

 Modifiers 6-6

Appendix A. Directory A-1

Appendix C. Third-Party Liability Codes C-1

Appendix T. CMSP Covered Codes T-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 and Messages Y‑1

Appendix Z. EPSDT/PPHSD Screening Services Codes Z-1

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| --- | --- | --- |
| **Commonwealth of Massachusetts****MassHealth****Provider Manual Series** | **Subchapter Number and Title**6. Service Codes | **Page**6-1 |
| Independent Clinical Laboratory Manual | **Transmittal Letter**LAB-55 | **Date**08/01/2022 |

601 Introduction

MassHealth providers should refer to the American Medical Association’s *Current Procedural Terminology* (CPT) codebook or the *Healthcare Common Procedure Coding System (HCPCS) Level II* codebook for the service codes and service descriptions when billing for services provided to MassHealth members. 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 401.000 and 450.000. An independent clinical laboratory may request prior authorization (PA) 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 Clinical Laboratory Manual*.

The following abbreviations are used in Subchapter 6.

(A) IC: Claim requires individual consideration. See 130 CMR 401.419 and 450.271 for more information.

(B) PA: Service requires prior authorization. See 130 CMR 450.303 for more information.

602 Payable Laboratory Services

This section lists CPT codes and HCPCS Level II codes that are payable under MassHealth.

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G0027

G0480

G0481

G0482

G0483

P9604

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U0005

603 Modifiers

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

Modifier Description

91 Repeat clinical diagnostic laboratory test

QW CLIA waived test

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 are defined in the *Current Procedural Terminology* (CPT) code book.

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