



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Division of Medical Assistance
600 Washington Street
Boston, MA 02111
www.mass.gov/dma

MASSHEALTH
TRANSMITTAL LETTER POD-42
March 2003

TO: Podiatrists Participating in MassHealth
FROM: Douglas S. Brown, Acting Commissioner
RE: *Podiatrist Manual* (Revised List of Covered Services (2003 HCPCS))

Revised Subchapter 6 (Service Codes)

This letter transmits a revised Subchapter 6 of the *Podiatrist Manual*. Subchapter 6 of the *Podiatrist Manual* lists codes that:

- are payable under MassHealth;
- have special limitations or requirements, such as prior authorization, individual consideration, or attachments;
- are categorized as Level II HCPCS codes that are payable under MassHealth; or
- are locally assigned codes for use exclusively for MassHealth services.

Providers should use this revised Subchapter 6 in conjunction with the *American Medical Association Current Procedural Terminology (CPT) 2003* code book as the Division is no longer including the service descriptions of payable codes.

Effective Date

The revised Subchapter 6 is effective for dates of service on or after April 1, 2003. The new codes introduced under the CPT 2003 code book are effective for dates of service on or after April 1, 2003.

How to Obtain a Podiatry Fee Schedule

If you wish to obtain a fee schedule, you may purchase Division of Health Care Finance and Policy regulations from either the Massachusetts State Bookstore or from the Division of Health Care Finance and Policy. See addresses and telephone numbers below. You must contact them first to find out the price of the publication. The Division of Health Care Finance and Policy also has the regulations available on disk. The regulation title for surgery and anesthesia is 114.3 CMR 16.00: Surgery and Related Anesthesia Care. The regulation title for radiology is 114.3 CMR 18.00: Radiology.

Massachusetts State Bookstore
State House, Room 116
Boston, MA 02133
Telephone: 617-727-2834
www.mass.gov/sec/spr

Division of Health Care Finance and Policy
Two Boylston Street
Boston, MA 02116
Telephone: 617-988-3100
www.mass.gov/dhcfp

NEW MATERIAL

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

Podiatrist Manual

Pages 6-1 through 6-4

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Podiatrist Manual

Page 6-1 and 6-2 — transmitted by Transmittal Letter POD-40

Pages 6-3 and 6-4 — transmitted by Transmittal Letter POD-41

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series PODIATRIST MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES		PAGE 6-1
	TRANSMITTAL LETTER POD-42		DATE 04/01/03

601 Introduction

MassHealth providers must refer to the American Medical Association's *Current Procedural Terminology (CPT) 2003* code book for the service codes and descriptions when billing for services provided to MassHealth members.

The Division pays for all codes listed in Sections 602 and 603 in effect at the time of service, subject to all conditions and limitations in the Division's regulations at 130 CMR 424.000 and 450.000.

Podiatry services require a written referral from the member's primary-care provider before the delivery of services. The Division pays only for podiatry services that are certified to be necessary for the life and safety of the member. The referral must be on the primary-care provider's letterhead and must certify that such services are medically necessary for the life and safety of the member. A substantiating medical explanation must also be included in the written certification.

- Section 602 lists service codes that are payable under MassHealth, some of which require individual consideration or prior authorization.
- Section 603 lists locally assigned service codes and Level II HCPCS codes that are payable under MassHealth, some of which require individual consideration or prior authorization, or both. The local codes listed in Section 603 are intended only for services provided to MassHealth members.
- Section 604 lists service code modifiers allowed under MassHealth.

602 Payable Codes

The Division pays for services billed using the following codes. Some of these codes require individual consideration, as indicated below.

Legend:

I.C.: Claim requires individual consideration. See 130 CMR 424.407 for more information.

10060	11001	11057 (I.C.)	11308	11621
10061	11040	11100	11420	11622
10120	11041	11101	11421	11623
10121	11042	11200	11422	11624
10140	11043	11201	11423	11626
10160	11044	11305	11424	11719
10180	11055	11306	11426	11720
11000	11056	11307	11620	11721

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series PODIATRIST MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES		PAGE 6-2
	TRANSMITTAL LETTER POD-42		DATE 04/01/03

602 Payable Codes (cont.)

11730	17000	27685	28092	28262
11732	17003	27686	28100	28264
11740	17004	27695	28102	28270
11750	17110	27696	28103	28272
11752	17111	27704	28104	28280
11755	17250	27760	28106	28285
11760	17270	27762	28107	28286
11762	17271	27766	28108	28288
11765	17272	27808	28110	28289
12001	17273	27810	28111	28290
12002	17274	27814	28112	28292
12004	17276	27816	28113	28293
12005	20000	27818	28114	28294
12006	20005	27822	28116	28296
12007	20200	27823	28118	28297
12041	20205	27840	28119	28298
12042	20206	27842	28120	28299
12044	20520	27846	28122	28300
12045	20525	27848	28124	28302
13131	20550	27860	28126	28304
13132	20600	27870	28130	28305
13133	20605	28001	28140	28306
14040	20612	28002	28150	28307
14041	20615	28003	28153	28308
14060	20650	28005	28160	28309
14061	20670	28008	28171	28310
14300	20680	28010	28173	28312
14350	27603	28011	28175	28313
15000	27604	28020	28190	28315
15001	27605	28022	28192	28320
15050	27606	28024	28193	28322
15100	27607	28030	28200	28340
15101	27610	28035	28202	28341
15120	27612	28043	28208	28344
15121	27613	28045	28210	28345
15240	27614	28046	28220	28360 (I.C.)
15241	27615	28050	28222	28400
15350	27618	28052	28225	28405
15351	27619	28054	28226	28406
15400	27620	28060	28230	28415
15401	27625	28062	28232	28420
15574	27626	28070	28234	28430
15620	27630	28072	28238	28435
15850	27647	28080	28240	28436
15851	27648	28086	28250	28445
15852	27680	28088	28260	28450
15999 (I.C.)	27681	28090	28261	28455

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series PODIATRIST MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES		PAGE 6-3
	TRANSMITTAL LETTER POD-42		DATE 04/01/03

602 Payable Codes (cont.)

28456	28600	28805	29893	87101
28465	28605	28810	29894	87102
28470	28606	28820	29895	87106
28475	28615	28825	29897	99070 (I.C.)
28476	28630	28899 (I.C.)	29898	99202
28485	28635	29345	29899	99203
28490	28636	29355	73590	99204
28495	28645	29405	73592	99211
28496	28660	29425	73600	99212
28505	28665	29440	73610	99213
28510	28666	29445	73620	99214
28515	28675	29450	73630	99231
28525	28705	29515	73650	99311
28530	28715	29540	73660	99312
28531	28725	29550	81000	99321
28540	28730	29580	82947	99322
28545	28735	29590	84550	99331
28546	28737	29705	85007	99332
28555	28740	29730	85014	99341
28570	28750	29750	85018	99342
28575	28755	29799 (I.C.)	85032	99351
28576	28760	29891	85041	99352
28585	28800	29892	85048	

603 HCPCS Level II and Locally Assigned Service Codes

The locally assigned service codes and service descriptions are exclusive to MassHealth. These local codes describe services that are not recognized in the CPT. The local codes are intended only for services provided to MassHealth members.

Legend:

- I.C.: Claim requires individual consideration. See 130 CMR 424.407 for more information.
- P.A.: Service requires prior authorization. See 130 CMR 450.303 for more information.

HCPCS Level II Service Codes

A5500	A5509	L3020	L3201	L3211
A5501	A5510	L3030	L3202	L3212
A5503	A5511	L3040	L3203	L3213
A5504	L3000	L3050	L3204	L3214
A5505	L3001	L3060	L3206	L3215
A5506	L3002	L3070	L3207	L3216
A5507	L3003	L3080	L3208	L3217
A5508	L3010	L3090	L3209	L3218

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series PODIATRIST MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES		PAGE 6-4
	TRANSMITTAL LETTER POD-42		DATE 04/01/03

603 HCPCS Level II and Locally Assigned Service Codes (cont.)

L3219	L3255	L3340	L3440	L3520
L3221	L3257	L3350	L3450	L3530
L3222	L3260	L3360	L3455	L3540
L3223	L3265	L3370	L3460	L3550
L3230	L3300	L3380	L3465	L3560
L3250	L3310	L3390	L3470	L3570
L3251	L3320	L3400	L3480	L3580
L3252	L3330	L3410	L3485	L3590
L3253	L3332	L3420	L3500	L3595
L3254	L3334	L3430	L3510	L4210 (I.C.)

Locally Assigned Service Codes

- X1705 Examination and treatment of the feet in a licensed hospital, successive members, same day
- X1707 Examination and treatment of the feet in the member's residence, successive members, same day
- X1709 Examination and treatment of the feet in a licensed nursing facility, convalescent home, charitable home for the aged, or rest home, successive members, same day
- X1711 Visit to member living more than 10 miles away from podiatrist's place of business, and no podiatrist is practicing in the community in which the member lives
- X1720 Other X ray (I.C.)
- X3333 Injectable and infusible drugs and devices supplied in a physician's office that require prior authorization (I.C., P.A.)

604 Modifiers

The following service code modifiers are allowed for billing under MassHealth. See Subchapter 5 of the *Podiatrist Manual* for billing instructions related to the use of modifiers.

- 26 Professional component
- 50 Bilateral procedure
- 51 Multiple procedures
- 54 Surgical care only
- 99 Multiple modifiers
- W8 Emergency treatment in a nursing facility. To identify a visit to a nursing facility for emergency treatment, add the modifier W8 to the end of the nursing facility visit service code.