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MASSHEALTH  
TRANSMITTAL LETTER POD-53  
June 2006

**TO:** Podiatrists Participating in MassHealth  
**FROM:** Beth Waldman, Medicaid Director *BW*  
**RE:** *Podiatrist Manual* (Coverage of Medically Necessary Orthotic Shoes for Members Aged 21 Years or Older)

Due to a new state law, effective July 1, 2006, MassHealth will cover medically necessary orthotic shoes for eligible members aged 21 years or older.

This letter transmits an amendment to the podiatrist regulations that reflects this change. All other conditions and limitations of 130 CMR 424.000 and 450.000 continue to apply.

These regulations were filed as emergency regulations, effective July 1, 2006.

This letter also transmits a revised Subchapter 6 of the *Podiatrist Manual*. Subchapter 6 lists the codes that are covered by MassHealth. The revisions reflect coverage of orthotic shoes for adult members, effective July 1, 2006.

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](mailto:providersupport@mahealth.net), or fax your inquiry to 617-988-8974.

This transmittal letter, including the attached pages, and other publications issued by MassHealth are available on the MassHealth Web site at [www.mass.gov/masshealth](http://www.mass.gov/masshealth). Click on MassHealth Regulations and Other Publications, then on Provider Library.

**NEW MATERIAL**

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

**Podiatrist Manual**

Pages iv, vii, 4-3, 4-4, and 6-1 through 6-6

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Podiatrist Manual

Page iv — transmitted by Transmittal Letter POD-49

Page viii — transmitted by Transmittal Letter POD-39

Pages 4-3 and 4-4 — transmitted by Transmittal Letter POD-45

Pages 6-1 through 6-6 — transmitted by Transmittal Letter POD-46

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The regulations and instructions governing provider participation in MassHealth are published in the Provider Manual Series. MassHealth publishes a separate manual for each provider type.

Manuals in the series contain administrative regulations, billing regulations, program regulations, service codes, administrative and billing instructions, and general information. MassHealth regulations are incorporated into the Code of Massachusetts Regulations (CMR), a collection of regulations promulgated by state agencies within the Commonwealth and by the Secretary of State. MassHealth regulations are assigned Title 130 of the Code. The regulations governing provider participation in MassHealth are assigned Chapters 400 through 499 within Title 130. Pages that contain regulatory material have a CMR chapter number in the banner beneath the subchapter number and title.

Administrative regulations and billing regulations apply to all providers and are contained in 130 CMR Chapter 450.000. These regulations are reproduced as Subchapters 1, 2, and 3 in this and all other manuals.

Program regulations cover matters that apply specifically to the type of provider for which the manual was prepared. For podiatrists, those matters are covered in 130 CMR Chapter 424.000, reproduced as Subchapter 4 in the *Podiatrist Manual*.

Revisions and additions to the manual are made as needed by means of transmittal letters, which furnish instructions for making changes by hand ("pen-and-ink" revisions), and by substituting, adding, or removing pages. Some transmittal letters will be directed to all providers; others will be addressed to providers in specific provider types. In this way, a provider will receive all those transmittal letters that affect its manual, but no others.

The Provider Manual Series is intended for the convenience of providers. Neither this nor any other manual can or should contain every federal and state law and regulation that might affect a provider's participation in MassHealth. The provider manuals represent instead MassHealth's effort to give each provider a single convenient source for the essential information providers need in their routine interaction with MassHealth and its members.

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Unit-Dose Distribution System – a means of packaging or distributing drugs, or both, devised by the manufacturer, packager, wholesaler, or retail pharmacist. A unit dose contains an exact dosage of medication and may also indicate the total daily dosage or the times when the medication should be taken.

424.403: Eligible Members

(A) (1) MassHealth Members. The MassHealth agency covers podiatry services only when provided to eligible MassHealth members, subject to the restrictions and limitations described in MassHealth regulations. 130 CMR 450.105 specifically states, for each MassHealth coverage type, which services are covered and which members are eligible to receive those services.

(2) Recipients of the Emergency Aid to the Elderly, Disabled and Children Program. For information on covered services for recipients of the Emergency Aid to the Elderly, Disabled and Children Program, see 130 CMR 450.106.

(B) Member Eligibility and Coverage Type. For information on verifying member eligibility and coverage type, see 130 CMR 450.107.

424.404: Provider Eligibility

Payment for services described in 130 CMR 424.000 is made only to providers who are participating in MassHealth on the date the service was provided or who are otherwise eligible for such payment pursuant to 130 CMR 450.000 and who meet the following requirements.

(A) In State. A podiatrist practicing in Massachusetts must be licensed by the Massachusetts Board of Registration in Podiatry.

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(B) Out of State. An out-of-state podiatrist must be licensed by that state's board of registration for podiatrists. The MassHealth agency pays an out-of-state podiatrist only when services are provided to an eligible Massachusetts member under the following circumstances:

- (1) the podiatrist practices outside the border of Massachusetts and provides emergency services to a member;
- (2) the podiatrist practices in a community of Connecticut, Maine, New Hampshire, New York, Rhode Island, or Vermont that is within 50 miles of the Massachusetts border and provides services to a member who resides in a Massachusetts community near the border of that state; or
- (3) the podiatrist provides services to a member who is authorized to reside out of state by the Massachusetts Department of Social Services.

424.405: Service Limitations and Noncovered Services

(A) Services Limited to Life and Safety. The MassHealth agency pays only for podiatry services that are certified to be necessary for the life and safety of the member. The MassHealth agency pays for podiatry services as long as the podiatrist has a written certification on letterhead from the member's primary care physician that attests that such services are medically necessary for the life and safety of the member and that contains a substantiating medical explanation.

(B) Noncovered Services. The MassHealth agency does not pay for the following:

- (1) hygienic foot care as a separate procedure, except when the member's medical record documents that the member cannot perform the care or risks harming himself or herself by performing it. The preceding sentence notwithstanding, payment for hygienic foot care performed on a resident of a nursing facility is included in the nursing facility's per diem rate and is not reimbursable in any case as a separate procedure;
- (2) canceled or missed appointments;
- (3) services provided by a podiatrist whose contractual arrangements with a state institution, acute, chronic, or rehabilitation hospital, medical school, or other medical institution involve a salary, compensation in kind, teaching, research, or payment from any other sources, if such payment would result in dual compensation for professional, supervisory, or administrative services related to member care;
- (4) telephone consultations;
- (5) in-service education;
- (6) research or experimental treatment;
- (7) cosmetic services or devices;
- (8) sneakers or athletic shoes;
- (9) an additional charge for nonstandard size (width or length) in custom-molded shoes; or
- (10) shoes when there is no diagnosis of associated foot deformities.

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601 Introduction

MassHealth pays for the services for codes listed in Sections 602 through 604 in effect at the time of service, subject to all conditions and limitations in MassHealth 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. MassHealth 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 CPT service codes that are payable under MassHealth, some of which require individual consideration or prior authorization. Refer to the Centers for Medicare and Medicaid Web site at [www.cms.gov/medicare/hcpcs](http://www.cms.gov/medicare/hcpcs) for the descriptions of the service codes listed in Section 602.
- Sections 603 and 604 list Level II HCPCS codes that are payable under MassHealth. Refer to the Centers for Medicare and Medicaid Web site at [www.cms.gov/medicare/hcpcs](http://www.cms.gov/medicare/hcpcs) for the descriptions of the service codes listed in Section 603.
- Section 605 lists service code modifiers allowed under MassHealth.

Legend:

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

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

602 Payable CPT Codes

MassHealth pays for services billed using the following codes.

10060	11001	11057 (IC)	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

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602 Payable CPT 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 (IC)
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 (IC)	27681	28090	28261	28455



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602 Payable CPT Codes (cont.)

28456	28630	29425	73650	99231
28465	28635	29440	73660	99232
28470	28636	29445	76499 (IC)	99238
28475	28645	29450	81000	99239
28476	28660	29515	82947	99241
28485	28665	29540	84550	99242
28490	28666	29550	85007	99243
28495	28675	29580	85014	99251
28496	28705	29590	85018	99252
28505	28715	29705	85032	99253
28510	28725	29730	85041	99261
28515	28730	29750	85048	99262
28525	28735	29799 (IC)	87101	99281
28530	28737	29891	87102	99282
28531	28740	29892	87106	99283
28540	28750	29893	99070 (IC)	99311
28545	28755	29894	99202	99312
28546	28760	29895	99203	99321
28555	28800	29897	99204	99322
28570	28805	29898	99211	99331
28575	28810	29899	99212	99332
28576	28820	73590	99213	99341
28585	28825	73592	99214	99342
28600	28899 (IC)	73600	99218	99343
28605	29345	73610	99219	99347
28606	29355	73620	99221	99348
28615	29405	73630	99222	99349

603 Payable HCPCS Level II Service Codes for Injectable and Infusable Drugs Administered in the Office

MassHealth pays for the services for codes listed in Section 603 in effect at the time of service, subject to all conditions and limitations in Subchapter 6 and in MassHealth's regulations at 130 CMR 424.000 and 450.000. All services for codes listed in this section are paid on an individual-consideration (IC) basis. See 130 CMR 424.407 for more information.

J0170 (IC)	J1040 (IC)	J3301 (IC)
J0702 (IC)	J1200 (IC)	J3302 (IC)
J0704 (IC)	J1700 (IC)	J3303 (IC)
J1020 (IC)	J1710 (IC)	J3490 (IC) (PA)
J1030 (IC)	J2000 (IC)	S0020 (IC)

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604 Payable HCPCS Level II Service Codes for Diabetic Shoes and Orthotic Services

MassHealth pays for the services represented by the codes listed in Section 604 in effect at the time of service, subject to all the conditions and limitations in Subchapter 6 and in MassHealth regulations at 130 CMR 424.000 and 450.000.

The provider may request prior authorization (PA) for orthotic services to eligible members, if additional units are medically necessary. **Please Note:** Service codes that require PA only when the number of units exceeds the limitations for the code in Section 602 are listed as requiring PA “Sometimes.”

<b>Service Code</b>	<b>Age Limitation?</b>	<b>PA Required?</b>	<b>Limitations and Requirements</b>	<b>Required Modifiers</b>	<b>Shoe Prescription Form Required?</b>
A5500	No	Sometimes	2 per 12 months	RT LT	Yes
A5501	No	Sometimes	2 per 12 months	RT LT	Yes
A5503	No	Sometimes	2 per 12 months	RT LT	Yes
A5504	No	Sometimes	2 per 12 months	RT LT	Yes
A5506	No	Sometimes	2 per 12 months	RT LT	Yes
A5507	No	Sometimes	2 per 12 months	RT LT	Yes
A5508	No	Sometimes	2 per 12 months	RT LT	Yes
A5509	No	Sometimes	12 per 12 months	RT LT	Yes
A5511	No	Sometimes	2 per 12 months	RT LT	Yes
L3000	No	Sometimes	4 per 12 months	RT LT	No
L3001	No	Sometimes	4 per 12 months	RT LT	No
L3002	No	Sometimes	4 per 12 months	RT LT	No
L3003	No	Sometimes	4 per 12 months	RT LT	No
L3010	No	Sometimes	4 per 12 months	RT LT	No
L3020	No	Sometimes	4 per 12 months	RT LT	No
L3030	No	Sometimes	4 per 12 months	RT LT	No
L3040	No	Sometimes	4 per 12 months	RT LT	No
L3050	No	Sometimes	4 per 12 months	RT LT	No
L3060	No	Sometimes	4 per 12 months	RT LT	No
L3070	No	Sometimes	4 per 12 months	RT LT	No
L3080	No	Sometimes	4 per 12 months	RT LT	No
L3090	No	Sometimes	4 per 12 months	RT LT	No
L3100	No	Sometimes	2 per 12 months	RT LT	No
L3140	Yes	Sometimes	2 per 12 months	RT LT	No
L3150	Yes	Sometimes	2 per 12 months	RT LT	No
L3160	Yes	Sometimes	2 per 12 months	RT LT	No
L3170	No	Sometimes	2 per 12 months	RT LT	No
L3201	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3202	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3203	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3204	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3206	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3207	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3208	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3209	Yes	Sometimes	4 per 12 months	RT LT	Yes
L3211	Yes	Sometimes	4 per 12 months	RT LT	Yes

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604 Payable HCPCS Level II Service Codes for Diabetic Shoes and Orthotic Services (cont.)

<b>Service Code</b>	<b>Age Limitation?</b>	<b>PA Required?</b>	<b>Limitations and Requirements</b>	<b>Required Modifiers</b>	<b>Shoe Prescription Form Required?</b>
L3212	Yes	Sometimes	2 per 12 months	RT LT	Yes
L3213	Yes	Sometimes	2 per 12 months	RT LT	Yes
L3214	Yes	Sometimes	2 per 12 months	RT LT	Yes
L3215	No	Yes	2 per 12 months	RT LT	Yes
L3216	No	Yes	2 per 12 months	RT LT	Yes
L3217	No	Yes	2 per 12 months	RT LT	Yes
L3219	No	Yes	2 per 12 months	RT LT	Yes
L3221	No	Yes	2 per 12 months	RT LT	Yes
L3222	No	Yes	2 per 12 months	RT LT	Yes
L3224	No	Yes	4 per 12 months	RT LT	Yes
L3225	No	Yes	4 per 12 months	RT LT	Yes
L3230	No	Yes	4 per 12 months	RT LT	Yes
L3250	No	Yes	4 per 12 months	RT LT	Yes
L3251	No	Yes	4 per 12 months	RT LT	Yes
L3252	No	Yes	4 per 12 months	RT LT	Yes
L3253	No	Yes	4 per 12 months	RT LT	Yes
L3524	No	Yes	2 per 12 months	RT LT	Yes
L3255	No	Yes	2 per 12 months	RT LT	Yes
L3257	No	Yes	2 per 12 months	RT LT	Yes
L3260	No	Yes	4 per 12 months	RT LT	Yes
L3265	No	Yes	4 per 12 months	RT LT	Yes
L3300	No	Yes	4 per 12 months	RT LT	Yes
L3310	No	Yes	4 per 12 months	RT LT	Yes
L3320	No	Yes	4 per 12 months	RT LT	Yes
L3332	No	Yes	2 per 12 months	RT LT	Yes
L3334	No	Yes	4 per 12 months	RT LT	Yes
L3350	No	Yes	4 per 12 months	RT LT	Yes
L3360	No	Yes	4 per 12 months	RT LT	Yes
L3370	No	Yes	4 per 12 months	RT LT	Yes
L3390	No	Yes	4 per 12 months	RT LT	Yes
L3400	No	Yes	4 per 12 months	RT LT	Yes
L3420	No	Yes	4 per 12 months	RT LT	Yes
L3450	No	Yes	4 per 12 months	RT LT	No
L3455	No	Yes	4 per 12 months	RT LT	No
L3460	No	Sometimes	4 per 12 months	RT LT	No
L3465	No	Sometimes	4 per 12 months	RT LT	No
L3470	No	Sometimes	4 per 12 months	RT LT	No
L3480	No	Sometimes	4 per 12 months	RT LT	No
L3485	No	Sometimes	4 per 12 months	RT LT	No
L3500	No	Sometimes	4 per 12 months	RT LT	No
L3510	No	Sometimes	4 per 12 months	RT LT	No
L3530	No	Sometimes	4 per 12 months	RT LT	No
L3530	No	Sometimes	4 per 12 months	RT LT	No
L3540	No	Sometimes	4 per 12 months	RT LT	No
L3570	No	Sometimes	4 per 12 months	RT LT	Yes

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604 Payable HCPCS Level II Service Codes for Diabetic Shoes and Orthotic Services (cont.)

<b>Service Code</b>	<b>Age Limitation?</b>	<b>PA Required?</b>	<b>Limitations and Requirements</b>	<b>Required Modifiers</b>	<b>Shoe Prescription Form Required?</b>
L3580	No	Sometimes	4 per 12 months	RT LT	No
L3590	No	Sometimes	4 per 12 months	RT LT	No
L3595	No	Sometimes	4 per 12 months	RT LT	No
T2003	No	Sometimes	--	--	No

605 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
- 99 Multiple modifiers
- LT Left side (for orthotic shoes only)
- RT Right side (for orthotic shoes only)
- TC Technical component