



MassHealth
Transmittal Letter POD-74
September 2016

TO: Podiatrists Participating in MassHealth
FROM: Daniel Tsai, Assistant Secretary for MassHealth
RE: *Podiatrist Manual* Revised Regulations (130 CMR 424.000)

This letter transmits revisions to the Podiatrist regulation at 130 CMR 424. The regulation was updated to remove pharmacy requirements covered in 130 CMR 406, replacing those requirements with a cross-reference to 130 CMR 406, and to clarify remaining prescribed drug requirements. Conforming changes were made elsewhere in the regulation, effective August 12, 2016.

- 130 CMR 424.417 was updated to replace requirements covered in 130 CMR 406 with a cross-reference to that regulation, and renamed as “Drugs Dispensed in Pharmacies.”
- 130 CMR 424.418 through 130 CMR 424.422, containing pharmacy requirements covered in 130 CMR 406, were deleted.
- 130 CMR 424.423 was renamed as “Drugs Administered in the Office (Physician-Administered Drugs),” and updated to include rules on payment and prior authorization relevant to such drugs.

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 the MassHealth Customer Service Center 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.)

Podiatrist Manual

Pages iv, 4-1 through 4-4, and 4-13 through 4-18

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Podiatrist Manual

Pages 4-1 and 4-2 — transmitted by Transmittal Letter POD-59

Pages 4-3 and 4-4 — transmitted by Transmittal Letter POD-60

Pages iv, 4-13, 4-14, 4-17, and 4-18 — transmitted by Transmittal Letter POD-65

Pages 4-15 through 4-16 — transmitted by Transmittal Letter POD-71

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424.401: Introduction

All podiatrists participating in MassHealth must comply with MassHealth regulations, including but not limited to regulations set forth in 130 CMR 424.000 and 450.000: *Administrative and Billing Regulations*.

424.402: Definitions

The following terms used in 130 CMR 424.000 have the meanings given in 130 CMR 424.402, unless the context clearly requires a different meaning. The reimbursability of services defined in 130 CMR 424.000 is not determined by these definitions, but by application of regulations elsewhere in 130 CMR 424.000 and in 130 CMR 450.000: *Administrative and Billing Regulations*.

Corrective Devices – orthotics, splints, inlays, appliances, and braces that support or accommodate part or all of the foot and serve to restore or improve functions of the foot.

Custom-Molded Shoe – an individually patterned shoe fabricated to meet the specific needs of an individual. A custom-molded shoe is not off-the-shelf, stock, or prefabricated. The shoe is individually constructed by a molded process over a modified positive model of the individual’s foot. It is made of leather or other suitable material of equal quality, has removable customized inserts that can be replaced if necessary according to the individual’s condition, and has some form of shoe closure.

Drug – a substance containing one or more active ingredients in a specified dosage form and strength. Each dosage form and strength is a separate drug.

Emergency – a sudden or unexpected illness or injury or traumatic injury or infection other than athlete's foot or chronic mycosis infecting the nail bed that must be treated promptly to prevent severe pain to the member.

Flexible Adhesive Casting – the application of adhesive tape to orthopedically support or stabilize the foot, or to exert beneficial stress for a structural instability.

Hygienic Foot Care – the trimming of nonpathogenic nails; the cleansing or soaking of the feet; the use of skin creams to maintain skin tone of both ambulatory and bedridden patients; or such other foot care that can be performed by the member or by the nursing facility staff if the member resides in a nursing facility.

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Last – a model that approximates the shape and size of the foot and over which a shoe is made. A last is usually made of wood, plastic, or plaster.

Moldable Shoes – off-the shelf, ready-made shoes formed from heat-activated materials. The shoes are molded by a thermo-forming process that first heats the material, then forms it over an individual’s foot or a positive model of the individual’s foot.

Nonstandard Size (Width or Length) – a shoe size made on a standard last pattern, but which is not part of a manufacturer’s regular inventory.

Orthopedic Shoes – shoes that are specially constructed to aid in the correction of a deformity of the musculoskeletal structure of the foot and to preserve or restore the function of the musculoskeletal system of the foot.

424.403: Eligible Members

(A) (1) MassHealth Members. The MassHealth agency pays for 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.

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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 meet the following requirements.

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

(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.

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424.405: 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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(D) The podiatrist must include the following information with any specimen submitted to a certified independent clinical laboratory or hospital-licensed clinical laboratory:

- (1) a signed request for the laboratory services to be performed;
- (2) the member's identification number, which appears on the member's MassHealth card; and
- (3) the podiatrist's name, address, and provider number.

424.417: Pharmacy Services: Drugs Dispensed in Pharmacies

Coverage of drugs and medical supplies dispensed to MassHealth members by MassHealth pharmacy providers and related prescription requirements for prescribing clinicians, are governed by 130 CMR 406.000: *Pharmacy Services*.

(130 CMR 424.418 through 422 Reserved.)

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424.423: Drugs Administered in the Office (Physician-Administered Drugs)

(A) Payment

- (1) Drugs and biologicals administered in the office are payable, subject to the exclusions and service limitations at 130 CMR 424.405, 424.407, and 130 CMR 406.413(B) and (C).
- (2) The MassHealth agency does not pay a podiatrist separately for drugs that are considered routine and integral to the delivery of a podiatrist's professional services in the course of diagnosis or treatment. Such drugs are commonly provided without charge or are included in the podiatrist fee for the service.
- (3) The MassHealth agency does not pay separately for any oral drugs administered in the office for which the podiatrist has not requested and received prior authorization from the MassHealth agency, with the exception of oral vaccines and oral radiopharmaceuticals, which do not require prior authorization.
- (4) Claims for drugs and biologicals that are listed in Subchapter 6 of the *Podiatrist Manual* must include the name of the drug or biological, strength, dosage, and number of HCPCS units dispensed, NDC code, NDC units and NDC unit of measurement.. In addition, for drugs and/or biologicals that are listed as requiring individual consideration in Subchapter 6 of the *Podiatrist Manual* a copy of the invoice showing the actual acquisition cost must be attached to the claim form, Claims without this information are denied.
- (5) The MassHealth agency pays only for prescription drugs that are approved by the U.S. Food and Drug Administration and manufactured by companies that have signed rebate agreements with the U.S. Secretary of Health and Human Services pursuant to 42 U.S.C. 1396r-8. Payment is calculated in accordance with EOHHS regulations at 101 CMR 331.00: *Medicine*.
- (6) Payment for drugs may be claimed in addition to an office visit.

(B) Prior Authorization

Prior authorization requirements for drugs are included in the MassHealth Drug List and the Subchapter 6 of the *Podiatrist Manual*. All prior authorization requests must be submitted in accordance with the instructions in Subchapter 5 of the *Podiatrist Manual*.

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424.424: Shoes and Corrective Devices

(A) The MassHealth agency pays for only those shoes listed in Subchapter 6 of the *Podiatrist Manual*.

(B) For shoes, providers must submit with their claim a copy of the applicable completed MassHealth Orthotic and Prosthetic Prescription and Medical Necessity Review Form.

(C) The MassHealth agency does not pay for casting materials used in the molding of orthotic shoes or corrective devices. The cost of these materials is included in the fee for prescribing and providing the shoe or corrective device.

424.425: Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services

The MassHealth agency pays for all medically necessary podiatry services for EPSDT-eligible members in accordance with 130 CMR 450.140 et seq., without regard to service limitations described in 130 CMR 424.000, and with prior authorization.

REGULATORY AUTHORITY

130 CMR 424.000: M.G.L. c. 118E, §§7 and 12.