601 Introduction

MassHealth pays for the services for codes listed in Section 602 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 428.000 and 450.000. In addition, a provider may request prior authorization (PA) for any medically necessary prosthetic devices. Providers should consult *Transmittal Letter PRT-27* for the specific effective dates of service for the service codes.

Providers should refer to the [MassHealth Orthotics and Prosthetics Payment and Coverage Guidelines Tool](http://www.mass.gov/eohhs/docs/masshealth/mh-paymnt-coverage-guideline-tools/mhpgt-ort-prt.pdf) for service descriptions, applicable modifiers, place-of-service codes, PA requirements, service limits, and pricing and markup information. For certain services that are payable on an individual-consideration (I.C.) basis, the tool can calculate the payable amount, based on information entered into certain fields on the tool.

To get to the MassHealth Orthotic and Prosthetic Payment and Coverage Guidelines Tool, go to [www.mass.gov/masshealth](http://www.mass.gov/masshealth). Click on MassHealth Regulations and Other Publications, click on Provider Library, then on MassHealth Payment and Coverage Guideline Tools, and go to MassHealth Payment and Coverage Guideline Tools.

602 Service Codes

This section lists codes for services that are payable under MassHealth. Refer to the Centers for Medicare & Medicaid website at [www.cms.gov](http://www.cms.gov) for more detailed descriptions.

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L5301

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L7400

L7401

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L7520

L7600

L8000

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