



MassHealth
Transmittal Letter PRT-22
July 2011

TO: Prosthetics Providers Participating in MassHealth
FROM: Terence G. Dougherty, Medicaid Director *TGD*
RE: *Prosthetics Manual (2011 HCPCS)*

This letter transmits revisions to the service codes in Subchapter 6 of the *Prosthetics Manual* to comply with federal coding mandates, incorporate coding and rate changes previously described in informational bulletins issued by the Division of Health Care Finance and Policy (DHCFP), and remind providers of certain existing prosthetic (PRT) policies and requirements. The Centers for Medicare & Medicaid Services (CMS) have revised the Healthcare Common Procedure Coding System (HCPCS) for 2011, and providers may consult the CMS Web site at www.cms.gov for a full description of the service codes. Prior-authorization (PA) requirements, service limits, and place-of-service codes now appear in an updated version of the interactive MassHealth Orthotics and Prosthetics Payment and Coverage Guidelines Tool that has been posted on the MassHealth Web site.

New Prosthetics Service Code Addition Effective for Dates of Service Beginning January 1, 2011

The addition to the MassHealth service codes and descriptions included in this section is effective for dates of service on or after January 1, 2011. The following code has been added to Subchapter 6 of the *Prosthetics Manual* and the MassHealth Orthotics and Prosthetics Payment and Coverage Guidelines Tool.

L5961

Diagnosis Codes

Providers are reminded that ICD-9-CM diagnosis codes are required on all claims. The ICD-9-CM diagnosis codes must be directly related to the service billed on the claim.

Claims with Multiple Modifiers

MMIS can now accept claims with multiple modifiers. Providers can now use one line instead of two. In MassHealth's previous system, providers were required to put HCPCS service codes with different modifiers on two different lines on a claim, as follows.

Claim Line 1— L5210 RT 1 unit
Claim Line 2— L5210 LT 1 unit

MMIS can now accept multiple modifiers, so claims would now be billed on one claim line as follows.

L5210 RT LT 2 units

Signatures

MassHealth has changed the requirements for who is required to sign the *MassHealth Orthotic and Prosthetic Prescription and Medical Necessity Review Form for Therapeutic Shoes, Inserts, and Modifications* (for diabetics) (*ORT-D (8/10)*). The form must be signed by a doctor of medicine (MD), nurse practitioner (NP), doctor of osteopathic medicine (DO), doctor of podiatric medicine (DPM), or a physician's assistant (PA). MassHealth's *Prescription and Medical Necessity Review Form for Foot Orthoses, Footwear, and Modifications* (for non-diabetics) (*ORT-ND)(08/10)* must be signed by a doctor of medicine (MD), doctor of osteopathic medicine (DO), nurse practitioner (NP), physician's assistant (PA), or podiatrist (DPM).

Invoices

Service codes priced at AAC+ (adjusted acquisition cost plus markup) require current invoices. MassHealth will not accept a Web-printed invoice or order form from a manufacturer's Web site. The invoice(s) must clearly identify which products are applicable to the HCPCS. Providers must circle the product on the invoice and annotate the applicable service code for the item to identify what is being billed. **For minor part replacements and repairs that do not have invoices, if the total cost of the repair is less than \$35.00, invoices are not required. However, the provider must include a work order with a summary of the description of parts repaired or replaced with a claim or a prior authorization (PA).**

Revised Rates

DHCFP has established new rates for the new prosthetics service codes effective for dates of service beginning January 1, 2011. The DHCFP fee schedule and informational bulletins can be viewed on the DHCFP Web site at www.mass.gov/dhcfp.

If you wish to obtain a fee schedule, you may download DHCFP regulations at no cost at www.mass.gov/dhcfp. If you wish to obtain a paper copy of the fee schedule, you may purchase DHCFP regulations from either the Massachusetts State Bookstore or from DHCFP (see addresses and telephone numbers that follow). You must contact them first to find out the price of the publication. The regulation title for Prostheses, Prosthetic Devices, and Orthotic Devices is 114.3 CMR 34.00.

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

MassHealth Web Site

This transmittal letter and attached pages are available on the MassHealth Web site at www.mass.gov/masshealth.

Questions

If you have any questions about this transmittal letter, please contact MassHealth Customer Service 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.)

Prosthetics Manual

Pages 6-1 and 6-2

OBSOLETE MATERIAL

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

Prosthetics Manual

Pages 6-1 and 6-2 — transmitted by Transmittal Letter PRT-21

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601 Introduction

MassHealth pays for the services represented by the 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. A prosthetics provider may request prior authorization 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 *Prosthetics Manual*.

Providers should refer to the MassHealth Orthotics and Prosthetics Payment and Coverage Guidelines Tool 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 will calculate the payable amount, based on information entered into certain fields on the tool. For service codes for which the Division of Health Care Finance and Policy (DHCFP) has established a rate, the provider can determine the payment by reviewing the DHCFP regulations at 114.3 CMR 34.00.

The MassHealth Orthotics and Prosthetics Payment and Coverage Guidelines Tool also contains links to [DHCFP regulations](#) and Part 6 of the administrative and billing instructions, which lists the [error codes and explanations](#) for claims that have been denied or suspended by MassHealth.

To get to the MassHealth Orthotic and Prosthetic Payment and Coverage Guidelines Tool, go to www.mass.gov/masshealth. Click on MassHealth Regulations and other Publications, click on Provider Library, and go to MassHealth Payment and Coverage Guideline Tools.

If you want a paper copy of the tool, you can print it from the Web site, or request a copy from MassHealth Customer Service. See Appendix A of your provider manual for applicable contact information.

602 Service Codes

This section lists codes for services that are payable under MassHealth. Refer to the Centers for Medicare & Medicaid Web site at www.cms.gov for more detailed descriptions.

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|-------|-------|-------|-------|-------|-------|
| L5000 | L5321 | L5580 | L5630 | L5651 | L5679 |
| L5010 | L5331 | L5585 | L5631 | L5652 | L5680 |
| L5020 | L5341 | L5590 | L5632 | L5653 | L5681 |
| L5050 | L5400 | L5595 | L5634 | L5654 | L5682 |
| L5060 | L5410 | L5600 | L5636 | L5655 | L5683 |
| L5100 | L5420 | L5610 | L5637 | L5656 | L5684 |
| L5105 | L5430 | L5611 | L5638 | L5658 | L5685 |
| L5150 | L5450 | L5613 | L5639 | L5661 | L5686 |
| L5160 | L5460 | L5614 | L5640 | L5665 | L5688 |
| L5200 | L5500 | L5616 | L5642 | L5666 | L5690 |
| L5210 | L5505 | L5617 | L5643 | L5668 | L5692 |
| L5220 | L5510 | L5618 | L5644 | L5670 | L5694 |
| L5230 | L5520 | L5620 | L5645 | L5671 | L5695 |
| L5250 | L5530 | L5622 | L5646 | L5672 | L5696 |
| L5270 | L5535 | L5624 | L5647 | L5673 | L5697 |
| L5280 | L5540 | L5626 | L5648 | L5676 | L5698 |
| L5301 | L5560 | L5628 | L5649 | L5677 | L5699 |
| L5311 | L5570 | L5629 | L5650 | L5678 | L5700 |

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602 Service Codes (cont.)

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|-------|-------|-------|-------|-------|-------|
| L5701 | L5960 | L6388 | L6684 | L7040 | L8417 |
| L5702 | L5961 | L6400 | L6686 | L7045 | L8420 |
| L5703 | L5962 | L6450 | L6687 | L7170 | L8430 |
| L5704 | L5964 | L6500 | L6688 | L7180 | L8435 |
| L5705 | L5966 | L6550 | L6689 | L7181 | L8440 |
| L5706 | L5968 | L6570 | L6690 | L7185 | L8460 |
| L5707 | L5970 | L6580 | L6691 | L7186 | L8465 |
| L5710 | L5971 | L6582 | L6692 | L7190 | L8470 |
| L5711 | L5972 | L6584 | L6693 | L7191 | L8480 |
| L5712 | L5973 | L6586 | L6694 | L7260 | L8485 |
| L5714 | L5974 | L6588 | L6695 | L7261 | L8499 |
| L5716 | L5975 | L6590 | L6696 | L7266 | S1040 |
| L5718 | L5976 | L6600 | L6697 | L7272 | |
| L5722 | L5978 | L6605 | L6698 | L7274 | |
| L5724 | L5979 | L6610 | L6703 | L7360 | |
| L5726 | L5980 | L6611 | L6704 | L7362 | |
| L5728 | L5981 | L6615 | L6706 | L7364 | |
| L5780 | L5982 | L6616 | L6707 | L7366 | |
| L5781 | L5984 | L6620 | L6708 | L7367 | |
| L5782 | L5985 | L6621 | L6709 | L7368 | |
| L5785 | L5986 | L6623 | L6805 | L7400 | |
| L5790 | L5987 | L6624 | L6810 | L7401 | |
| L5795 | L5988 | L6625 | L6881 | L7402 | |
| L5810 | L5990 | L6628 | L6882 | L7403 | |
| L5811 | L5999 | L6629 | L6883 | L7404 | |
| L5812 | L6000 | L6630 | L6884 | L7405 | |
| L5814 | L6010 | L6632 | L6885 | L7499 | |
| L5816 | L6020 | L6635 | L6890 | L7510 | |
| L5818 | L6025 | L6637 | L6895 | L7520 | |
| L5822 | L6050 | L6638 | L6900 | L7600 | |
| L5824 | L6055 | L6640 | L6905 | L8000 | |
| L5826 | L6100 | L6641 | L6910 | L8001 | |
| L5828 | L6110 | L6642 | L6915 | L8002 | |
| L5830 | L6120 | L6645 | L6920 | L8010 | |
| L5840 | L6130 | L6646 | L6925 | L8015 | |
| L5845 | L6200 | L6647 | L6930 | L8020 | |
| L5848 | L6205 | L6648 | L6935 | L8030 | |
| L5850 | L6250 | L6650 | L6940 | L8031 | |
| L5855 | L6300 | L6655 | L6945 | L8032 | |
| L5856 | L6310 | L6660 | L6950 | L8035 | |
| L5857 | L6320 | L6665 | L6955 | L8039 | |
| L5858 | L6350 | L6670 | L6960 | L8300 | |
| L5910 | L6360 | L6672 | L6965 | L8310 | |
| L5920 | L6370 | L6675 | L6970 | L8320 | |
| L5925 | L6380 | L6676 | L6975 | L8330 | |
| L5930 | L6382 | L6677 | L7007 | L8400 | |
| L5940 | L6384 | L6680 | L7008 | L8410 | |
| L5950 | L6386 | L6682 | L7009 | L8415 | |