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MassHealth

Transmittal Letter PRT-27

July 2019

**TO:** Prosthetics Providers Participating in MassHealth

**FROM:** Daniel Tsai, Assistant Secretary for MassHealth [Signature of Daniel Tsai]

**RE:** *Prosthetics Manual* Update (Revised Subchapter 6*)*

This letter transmits updates to the list of Service Codes described in Subchapter 6 of the *Prosthetics Manual* to align with Administrative Bulletin 15-04 and the Orthotics and Prosthetics Payment and Coverage Guidelines Tool. Providers may consult the Centers for Medicare & Medicaid Services (CMS) website at [www.cms.gov](http://www.cms.gov) for a full description of the service codes.

Prior-authorization (PA) requirements, service limits, and place-of-service codes appear in an updated version of the interactive MassHealth Orthotics and Prosthetics Payment and Coverage Guidelines Tool posted on the MassHealth website at: <https://www.mass.gov/service-details/masshealth-payment-and-coverage-guideline-tools>.

**Added Codes:**

L6026, L7259

**Deleted codes:**

L6025, L7260; L7261

**MassHealth Website**

This transmittal letter and attached pages are available on the MassHealth website at [www.mass.gov/masshealth-transmittal-letters](http://www.mass.gov/masshealth-transmittal-letters).

To sign up to receive email alerts when MassHealth issues new transmittal letters and provider bulletins, send a blank email to [join-masshealth-provider-pubs@listserv.state.ma.us](mailto:join-masshealth-provider-pubs@listserv.state.ma.us). No text in the body or subject line is needed.

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**Questions**

LTSS providers should direct their questions about this transmittal letter or other questions to MassHealth Long-Term Services & Supports (LTSS) Provider Service Center by phone at   
(844) 368-5184 (toll-free) or via email at [support@masshealthltss.com](mailto:support@masshealthltss.com).

NEW MATERIAL

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

Prosthetics Manual

Pages vi, 6-1, and 6-2

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Prosthetics Manual

Page vi — transmitted by Transmittal Letter 24

Pages 6-1 and 6-2 — transmitted by Transmittal Letter 25

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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.

L5000

L5010

L5020

L5050

L5060

L5100

L5105

L5150

L5160

L5200

L5210

L5220

L5230

L5250

L5270

L5280

L5301

L5312

L5321

L5331

L5341

L5400

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