



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)

## Transmittal Letter PRT-30

**DATE:** May 2025

**TO:** Prosthetic Providers Participating in MassHealth

**FROM:** Leslie Darcy, Director of Long-Term Services and Supports

**RE:** ***Prosthetics Manual: HCPCS Updates to Subchapter 6 and to the MassHealth Orthotics and Prosthetics Payment and Coverage Guideline Tool***

### Introduction

This letter transmits revisions to the service codes in the Subchapter 6 list of service codes in the *Prosthetics Manual*. The Centers for Medicare & Medicaid Services (CMS) has revised the Healthcare Common Procedure Coding System (HCPCS) codes for 2024. For dates of service on or after October 1, 2024, you must use the new codes to receive reimbursement. [Administrative Bulletin 25-05](#) includes a full description and established rates for the added codes.

The revised Subchapter 6 aligns with the list of service codes in the interactive [MassHealth Orthotics and Prosthetics Payment and Coverage Guideline Tool](#). For prior authorization requirements, service limits, modifiers, and allowable place-of-service codes, providers should refer to the interactive tool. The rate regulation for orthotic and prosthetic services is [101 CMR 334.00](#): *Rates for Prostheses, Prosthetic Devices, and Orthotic devices*.

### Added Codes

The following codes have been added to Subchapter 6, effective October 1, 2024:

L5783

### 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).

[Sign up](#) to receive email alerts when MassHealth issues new transmittal letters and provider bulletins.

### Questions?

- Call MassHealth at (800) 841-2900, TDD/TTY: 711
- Email us at [provider@masshealthquestions.com](mailto:provider@masshealthquestions.com)

## **New Material**

The pages listed here contain new or revised language.

### ***Prosthetics Manual***

Pages 6-1 through 6-2

## **Obsolete Material**

The pages listed here are no longer in effect.

### ***Prosthetics Manual***

Pages 6-1 through 6-2 — transmitted by Transmittal Letter PRT-29

 [MassHealth on Facebook](#)  [MassHealth on LinkedIn](#)  [MassHealth on X](#)  [MassHealth on YouTube](#)

|                                                                                                          |                                                         |                           |
|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------|
| <b>Commonwealth of Massachusetts<br/>MassHealth<br/>Provider Manual Series</b><br><br>Prosthetics Manual | <b>Subchapter Number and Title</b><br>Table of Contents | <b>Page</b><br>vi         |
|                                                                                                          | <b>Transmittal Letter</b><br>PRT-30                     | <b>Date</b><br>10/01/2024 |

## 6. Service Codes

|                                                                                                            |     |
|------------------------------------------------------------------------------------------------------------|-----|
| 601: Introduction .....                                                                                    | 6-1 |
| 602: Service Codes .....                                                                                   | 6-1 |
| Appendix A. Directory .....                                                                                | A-1 |
| Appendix C. Third-Party-Liability Codes .....                                                              | C-1 |
| Appendix T. CMSP Covered Codes .....                                                                       | T-1 |
| Appendix U. DPH-Designated Serious Reportable Events That Are Not Provider Preventable<br>Conditions ..... | U-1 |
| Appendix V. MassHealth Billing Instructions for Provider Preventable Conditions .....                      | V-1 |
| Appendix W. EPSDT Services Medical and Dental Protocols and Periodicity Schedules .....                    | W-1 |
| Appendix X. Family Assistance Copayments and Deductibles .....                                             | X-1 |
| Appendix Y. EVS Codes and Messages .....                                                                   | Y-1 |
| Appendix Z. EPSDT/PPHSD Screening Services Codes .....                                                     | Z-1 |

|                                                                                                          |                                                       |                           |
|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------|
| <b>Commonwealth of Massachusetts<br/>MassHealth<br/>Provider Manual Series</b><br><br>Prosthetics Manual | <b>Subchapter Number and Title</b><br>6 Service Codes | <b>Page</b><br>6-1        |
|                                                                                                          | <b>Transmittal Letter</b><br>PRT-30                   | <b>Date</b><br>10/01/2024 |

## 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 refer to the [MassHealth Orthotics and Prosthetics Payment and Coverage Guideline 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 (IC) basis, the tool can calculate the payable amount, based on information entered into certain fields on the tool.

To get to the MassHealth Orthotics and Prosthetics Payment and Coverage Guideline Tool, visit [www.mass.gov/service-details/masshealth-payment-and-coverage-guideline-tools](http://www.mass.gov/service-details/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 | L5500 | L5629 | L5665 | L5700 | L5812 |
| L5010 | L5505 | L5630 | L5666 | L5701 | L5814 |
| L5020 | L5510 | L5631 | L5668 | L5702 | L5816 |
| L5050 | L5520 | L5632 | L5670 | L5703 | L5818 |
| L5060 | L5530 | L5634 | L5671 | L5704 | L5822 |
| L5100 | L5535 | L5636 | L5672 | L5705 | L5824 |
| L5105 | L5540 | L5637 | L5673 | L5706 | L5826 |
| L5150 | L5560 | L5638 | L5676 | L5707 | L5828 |
| L5160 | L5570 | L5639 | L5677 | L5710 | L5830 |
| L5200 | L5580 | L5640 | L5678 | L5711 | L5840 |
| L5210 | L5585 | L5642 | L5679 | L5712 | L5845 |
| L5220 | L5590 | L5643 | L5680 | L5714 | L5848 |
| L5230 | L5595 | L5644 | L5681 | L5716 | L5850 |
| L5250 | L5600 | L5645 | L5682 | L5718 | L5855 |
| L5270 | L5610 | L5646 | L5683 | L5722 | L5856 |
| L5280 | L5611 | L5647 | L5684 | L5724 | L5857 |
| L5301 | L5613 | L5648 | L5685 | L5726 | L5858 |
| L5312 | L5614 | L5649 | L5686 | L5728 | L5910 |
| L5321 | L5615 | L5650 | L5688 | L5780 | L5920 |
| L5331 | L5616 | L5651 | L5690 | L5781 | L5925 |
| L5341 | L5617 | L5652 | L5692 | L5782 | L5926 |
| L5400 | L5618 | L5653 | L5694 | L5783 | L5930 |
| L5410 | L5620 | L5654 | L5695 | L5785 | L5940 |
| L5420 | L5622 | L5655 | L5696 | L5790 | L5950 |
| L5430 | L5624 | L5656 | L5697 | L5795 | L5960 |
| L5450 | L5626 | L5658 | L5698 | L5810 | L5961 |
| L5460 | L5628 | L5661 | L5699 | L5811 | L5962 |

|                                                                                                                      |                                                       |                           |
|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------|
| <b>Commonwealth of Massachusetts</b><br><b>MassHealth</b><br><b>Provider Manual Series</b><br><br>Prosthetics Manual | <b>Subchapter Number and Title</b><br>6 Service Codes | <b>Page</b><br>6-2        |
|                                                                                                                      | <b>Transmittal Letter</b><br>PRT-30                   | <b>Date</b><br>10/01/2024 |
|                                                                                                                      |                                                       |                           |

602 Service Codes (cont.)

|       |       |       |       |       |       |
|-------|-------|-------|-------|-------|-------|
| L5964 | L6205 | L6625 | L6693 | L6955 | L8000 |
| L5966 | L6250 | L6628 | L6694 | L6960 | L8001 |
| L5968 | L6300 | L6629 | L6695 | L6965 | L8002 |
| L5969 | L6310 | L6630 | L6696 | L6970 | L8010 |
| L5970 | L6320 | L6632 | L6697 | L6975 | L8015 |
| L5971 | L6350 | L6635 | L6698 | L7007 | L8020 |
| L5972 | L6360 | L6637 | L6703 | L7008 | L8030 |
| L5973 | L6370 | L6638 | L6704 | L7009 | L8031 |
| L5974 | L6380 | L6640 | L6706 | L7040 | L8032 |
| L5975 | L6382 | L6641 | L6707 | L7045 | L8035 |
| L5976 | L6384 | L6642 | L6708 | L7170 | L8039 |
| L5978 | L6386 | L6645 | L6709 | L7180 | L8300 |
| L5979 | L6388 | L6646 | L6715 | L7181 | L8310 |
| L5980 | L6400 | L6647 | L6805 | L7185 | L8320 |
| L5981 | L6450 | L6648 | L6810 | L7186 | L8330 |
| L5982 | L6500 | L6650 | L6880 | L7190 | L8400 |
| L5984 | L6550 | L6655 | L6881 | L7191 | L8410 |
| L5985 | L6570 | L6660 | L6882 | L7259 | L8415 |
| L5986 | L6580 | L6665 | L6883 | L7360 | L8417 |
| L5987 | L6582 | L6670 | L6884 | L7362 | L8420 |
| L5988 | L6584 | L6672 | L6885 | L7364 | L8430 |
| L5990 | L6586 | L6675 | L6890 | L7366 | L8435 |
| L5999 | L6588 | L6676 | L6895 | L7367 | L8440 |
| L6000 | L6590 | L6677 | L6900 | L7368 | L8460 |
| L6010 | L6600 | L6680 | L6905 | L7400 | L8465 |
| L6020 | L6605 | L6682 | L6910 | L7401 | L8470 |
| L6026 | L6610 | L6684 | L6915 | L7402 | L8480 |
| L6050 | L6611 | L6686 | L6920 | L7403 | L8485 |
| L6055 | L6615 | L6687 | L6925 | L7404 | L8499 |
| L6100 | L6616 | L6688 | L6930 | L7405 | S1040 |
| L6110 | L6620 | L6689 | L6935 | L7499 |       |
| L6120 | L6621 | L6690 | L6940 | L7510 |       |
| L6130 | L6623 | L6691 | L6945 | L7520 |       |
| L6200 | L6624 | L6692 | L6950 | L7600 |       |