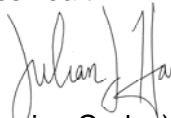




**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
*www.mass.gov/masshealth*



MassHealth  
Transmittal Letter REN-14  
December 2011

**TO:** Renal Dialysis Clinics Participating in MassHealth  
**FROM:** Julian J. Harris, M.D., Medicaid Director   
**RE:** *Renal Dialysis Clinic Manual* (Updated Service Codes)

This letter transmits revisions to the service codes and descriptions in the *Renal Dialysis Clinic Manual*. Effective December 1, 2011, MassHealth will pay a bundled rate for renal dialysis services performed in freestanding dialysis clinics, as set forth in the Division of Health Care Finance and Policy (DHCFP) regulations governing Chronic Maintenance Dialysis Treatments and Home Dialysis Supplies at 114.3 CMR 37.00. The bundled rate includes all services, supplies, drugs, and routine laboratory tests. Service Codes 90935, 90937, 90945, and 90947 have been replaced with Service Code 90999. Providers must continue to use the current service codes for dates of service before December 1, 2011.

### **Updated Fee Schedule**

The Division of Health Care Finance and Policy (DHCFP) has updated its regulations governing Chronic Maintenance Dialysis Treatments and Home Dialysis Supplies, effective for dates of service on or after December 1, 2011.

If you wish to obtain a fee schedule, you may download the Division of Health Care Finance and Policy regulations at no cost at [www.mass.gov/dhcfp](http://www.mass.gov/dhcfp). You may also purchase a paper copy of Division of Health Care Finance and Policy regulations from either the Massachusetts State Bookstore or from the Division of Health Care Finance and Policy (see addresses and telephone numbers below). You must contact them first to find out the price of the paper copy of the publication. The regulation title is 114.3 CMR 37.00: Chronic Maintenance Dialysis Treatments and Home Dialysis Supplies.

Massachusetts State Bookstore  
State House, Room 116  
Boston, MA 02133  
Telephone: 617-727-2834  
[www.mass.gov/sec/spr](http://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](http://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](http://www.mass.gov/masshealth).

## **Questions**

If you have any questions about the information in this transmittal letter, please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to 617-988-8974.

## **NEW MATERIAL**

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

### **Renal Dialysis Clinic Manual**

Pages vi, vii, 6-1, and 6-2

## **OBSOLETE MATERIAL**

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

### **Renal Dialysis Clinic Manual**

Pages vi — transmitted by Transmittal Letter REN-10

Page vii — transmitted by Transmittal Letter REN-9

Pages 6-1 and 6-2 — transmitted by Transmittal Letter REN-12

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6. Service Codes and Descriptions

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The regulations and instructions governing provider participation in MassHealth are published in the Provider Manual Series. MassHealth publishes a separate manual for each provider type.

Manuals in the series contain administrative regulations, billing regulations, program regulations, service codes, administrative and billing instructions, and general information. MassHealth regulations are incorporated into the Code of Massachusetts Regulations (CMR), a collection of regulations promulgated by state agencies within the Commonwealth and by the Secretary of State. MassHealth regulations are assigned Title 130 of the Code. Pages that contain regulatory material have a CMR chapter number in the banner beneath the subchapter number and title.

Administrative regulations and billing regulations apply to all providers and are contained in 130 CMR Chapter 450.000. These regulations are reproduced as Subchapters 1, 2, and 3 in this and all other manuals.

Program regulations cover matters that apply specifically to the type of provider for which the manual was prepared. For renal dialysis clinic services provider, those matters are covered in 130 CMR 412.000, reproduced as Subchapter 4 in the *Renal Dialysis Clinic Manual*.

Revisions and additions to the manual are made as needed by means of transmittal letters, which furnish instructions for substituting, adding, or removing pages. Some transmittal letters will be directed to all providers; others will be addressed to providers in specific provider types. In this way, a provider will receive all those transmittal letters that affect its manual, but no others.

The Provider Manual Series is intended for the convenience of providers. Neither this nor any other manual can or should contain every federal and state law and regulation that might affect a provider's participation in MassHealth. The provider manuals represent instead MassHealth's effort to give each provider a single convenient source for the essential information providers need in their routine interaction with MassHealth and its members.

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>  Renal Dialysis Clinic Manual	<b>Subchapter Number and Title</b> 6. Service Codes and Descriptions	<b>Page</b> 6-1
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601 Introduction

MassHealth pays for the services represented by the codes listed in Subchapter 6 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 412.000 and 450.000. A renal 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 *Renal Dialysis Clinic Manual*.

602 Service Codes and Descriptions: All-Inclusive Dialysis Treatment

Service

Code      Service Description

90999      Unlisted dialysis procedure, inpatient or outpatient (all-inclusive service per dialysis treatment per patient)

603 Service Codes and Descriptions: Training for Home Dialysis

Service

Code      Service Description

90989      Dialysis training, patient, including helper where applicable, any mode, completed course

90993      Dialysis training, patient, including helper where applicable, any mode, course not completed, per training session

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>  Renal Dialysis Clinic Manual	<b>Subchapter Number and Title</b> 6. Service Codes and Descriptions	<b>Page</b> 6-2
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