



Transmittal Letter REN-15

DATE: April 2024

TO: Renal Dialysis Clinics Participating in MassHealth

FROM: Monica Sawhney, Chief of Provider, Family, and Safety Net Programs

RE: *Renal Dialysis Clinic Manual: Updates to Subchapter 6*

Revisions to Service Codes and Descriptions

This letter transmits revisions to the service codes in the *Renal Dialysis Clinic Manual*. Effective for dates of service beginning April 1, 2024, MassHealth has added the service codes below to the list of covered services in Subchapter 6 of the *Renal Dialysis Manual*.

- G0491—Dialysis procedure at a Medicare certified end stage renal disease (ESRD) facility for acute kidney injury without ESRD
- J0604—Cinacalcet, oral, 1 mg (for ESRD on dialysis)

If you wish to obtain a fee schedule, you may download the Executive Office of Health and Human Services regulations at no cost at www.mass.gov/info-details/eohhs-regulations. The regulation title for renal dialysis services is 101 CMR 337.00: *Rates for Dialysis Treatments and Home Dialysis Supplies*.

MassHealth Website

This transmittal letter and attached pages are available on the MassHealth website at www.mass.gov/masshealth-transmittal-letters.

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Questions

If you have questions about the information in this transmittal letter, please

- Contact the MassHealth Customer Service Center at (800) 841-2900, TDD/TTY: 711, or
- Email your inquiry to provider@masshealthquestions.com.

New Material

The pages listed here contain new or revised language.

Renal Dialysis Clinic Manual




Pages vi, 6-1, and 6-2

Obsolete Material

The pages listed here are no longer in effect.

Renal Dialysis Clinic Manual

Pages vi, 6-1, and 6-2 — transmitted by Transmittal Letter REN-14

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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)
- G0491 Dialysis procedure at a Medicare certified end stage renal disease (ESRD) facility for acute kidney injury without ESRD

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

604 Service Codes and Descriptions: Drugs

Service

Code Service Description

- J0604 Cinacalcet, oral, 1 mg (for ESRD on dialysis)

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