



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



MassHealth  
Transmittal Letter STR-20  
July 2018

**TO:** Sterilization Clinics (STR) Participating in MassHealth  
**FROM:** Daniel Tsai, Assistant Secretary for MassHealth  
**RE:** *Sterilization Clinic Manual* (2018 HCPCS Code Updates)

This letter transmits revisions, as further described below, to the service codes in Subchapter 6 of the *Sterilization Clinic Manual*. The Centers for Medicare & Medicaid Services (CMS) has revised the Healthcare Common Procedure Coding System (HCPCS) codes for 2018. The revised Subchapter 6 is effective for dates of service on or after January 1, 2018.

### **Changes to Subchapter 6**

CPT code 55450 has been deleted and is replaced by existing code 55250.

### **Fee Schedule**

If you wish to obtain a fee schedule, you may download the Executive Office of Health and Human Services regulations at no cost at <https://www.mass.gov/lists/provider-payment-rates-community-health-care-providers-ambulatory-care>. The regulation title for Sterilization Clinics is 101 CMR 313.00: *Rates for Freestanding Clinics Providing Abortion and Sterilization Services*.

### **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.

### **Questions**

If you have any questions about the information in this transmittal letter, please contact the MassHealth Customer Service Center at 1-800-841-2900, email 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.)

Sterilization Clinic Manual

Pages 6-1 and 6-2

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Sterilization Clinic Manual

Pages 6-1 and 6-2 — transmitted by Transmittal Letter TL STR-17

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

(A) The maximum allowable fee for a sterilization service payable to licensed ambulatory sterilization clinics is the fee listed in the applicable Executive Office of Health and Human Services fee schedule or the provider's usual fee or charge, whichever is less.

(B) Sterilization services include at least the following: preoperative evaluation and counseling, laboratory services, anesthesia, and postoperative care.

(C) All claims for sterilization services must have a completed Consent for Sterilization (CS-18 or CS-21) form attached to the claim (see 130 CMR 485.409).

## 602 Service Codes and Descriptions

The following services include local anesthesia or intravenous sedation and all physician and clinic services.

### Service

<u>Code</u>	<u>Service Description</u>
55250	Vasectomy, unilateral or bilateral (separate procedure), including postoperative semen examination(s) (S.P.)
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants
58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral
58670	Laparoscopy, surgical; with fulguration of oviducts (with or without transection)
58671	with occlusion of oviducts by device (e.g., band, clip, or Falope ring)

## 603 Modifiers for Provider Preventable Conditions That Are National Coverage Determinations

- PA Surgical or other invasive procedure on wrong body part
- PB Surgical or other invasive procedure on wrong patient
- PC Wrong surgery or other invasive procedure on patient

For more information on the use of these modifiers, see Appendix V of your provider manual.

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terms used in the service descriptions for HCPCS codes are defined in the Current Procedural Terminology (CPT) code book.

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