

New MassHealth Provider Type: Independent Diagnostic Testing Facilities (IDTF)	2	Enhanced Recipient Eligibility Verification System (REVS) Capabilities	3
Increased Coverage of Certain Vision-Care Services	2	Provider FAQ: Health Care Reform	3
		MassHealth Reminders.	4

▮ New on mass.gov/masshealth: Avoiding the Paper Trail with the Online Prescription for Transportation Form (PT-1)

Avoid the paper trail and take advantage of the online PT-1! This tool will improve the business practices for providers that request transportation services for MassHealth members. Previously available only by submitting a written request to MassHealth publications, the PT-1 form is accessible through the secure MassHealth Web site at www.mass.gov/masshealth. You can now complete and submit your transportation request electronically. No paperwork necessary!

All you need to start using this great tool is a Customer Web Portal (CWP) account and the PT-1 user authorization. Request an account and PT-1 authorization by completing and submitting the Customer Web Portal Account Request Form online. This form is available in the Online Services link on the MassHealth homepage. Once MassHealth receives and processes the request, an account is set up and an individual username and password

is e-mailed to each user indicated on the form. Log in to the CWP account with the username and password to access your account and use the PT-1 tool.

You must have access to a provider's CWP account and PT-1 permissions to submit PT-1s online.

Although requests will continue to be processed and reviewed by MassHealth during normal business hours (Monday through Friday, 8 A.M. to 5 P.M.), you can make a transportation request anytime you are able to login to the CWP.

Along with increased accessibility, the electronic PT-1 has built-in checks to ensure that all required fields have an entry for submission. This is a huge advantage over the traditional paper

method, minimizing the possibility of incomplete forms being returned to you for correction.

The electronic PT-1 also eliminates the need to re-enter information for each additional PT-1 request submitted for the same member. With the online form, just enter the MassHealth member ID to retrieve their file contact information. Simply verify the accuracy of the information and continue updating the PT-1 request.

For more information about this new feature, see All Provider Bulletins 156 and 157. These bulletins are available online in the MassHealth Provider Library, under the MassHealth Regulations and Other Publications link on www.mass.gov/masshealth.

▮ Let MassHealth Know Your Preferred Communication Method

In the April 2006 issue of Update, MassHealth introduced and encouraged providers to use the Preferred Provider Communication Method. This option makes it easier and simpler for you to get the bulletins and transmittal letters that affect your practice.

Choose to be notified of new MassHealth publications from one of the three methods:

- e-mail notification (fastest);
- postcard notification (up to 10 days later than e-mail); or

- paper copy of actual publication (up to 10 days later than e-mail).

The response from the provider community has been positive, with many providers opting for the fast and paperless e-mail notification.

In May of 2005, MassHealth stopped mailing bulletins and transmittal letters directly to providers. Instead, postcards that described the subject of the bulletin or transmittal letter and referred providers to our Web site to download a copy were mailed to the provider's on-file address. For group-practice organizations other

than a physician or dental practice, the only notification was a message on the paper remittance advice. Well now you can avoid the extra paperwork and time delays of mail delivery and get instant notification when a new MassHealth

Go to www.mass.gov/masshealth to sign up for your preferred communication method.

(continued on page 4)

▮ New MassHealth Provider Type: Independent Diagnostic Testing Facilities (IDTF)

Effective July 1, 2006, MassHealth established a new provider type for IDTFs.

IDTFs are providers who perform portable X-ray services, freestanding magnetic resonance imaging (MRI) services, diagnostic imaging services, sleep-center services, and services performed by mammography vans. Providers who apply for enrollment as an IDTF must meet the MassHealth provider eligibility requirements as stated in 130 CMR 431.404 and comply with all MassHealth regulations and subregulatory instructions including, but not limited to, 130 CMR 431.000 and 450.000.

Providers currently enrolled with MassHealth as freestanding MRI centers or portable X-ray providers are required to re-enroll with MassHealth as an IDTF. Portable X-ray and freestanding MRI centers will become provider specialties under the IDTF provider type. Providers enrolled as a group practice but who meet IDTF provider-eligibility requirements may choose to re-enroll as an IDTF. Group practices who choose to enroll as an

IDTF will be assigned a new MassHealth provider identification number and will be required to terminate their group-practice provider number. Facilities not yet enrolled with MassHealth must complete an enrollment package if they wish to provide services as a MassHealth IDTF provider.

**MassHealth providers
eligible to enroll as an IDTF
should apply as soon as
possible.**

MassHealth recently sent communications to all potential IDTF applicants. Included in that communication package was an application and copies of the regulations and covered service codes. MassHealth urges all providers eligible to apply as an IDTF provider to do so as soon as possible. Failure to do so may lead to claim denials and may limit your access to the covered procedures as listed in Subchapter 6 of the provider manual.

Regulations and Fee Schedule

You can download regulations and fee schedules free of charge from the Division of Health Care Finance and Policy (DHCFP) Web site at www.mass.gov/dhcfp. For a fee, you can request a paper copy from the Massachusetts State Bookstore, or DHCFP.

Additional Information

Transmittal Letter IDTF-1 (June 2006) details the program regulations and additional information about the new IDTF provider type. IDTF-1 and the IDTF provider manual are available in the MassHealth Provider Library at www.mass.gov/masshealth under the MassHealth Regulations and Other Publications link.

▮ Increased Coverage of Certain Vision-Care Services

Due to a new state law, effective July 1, 2006, MassHealth covers the following vision-care services when provided to eligible MassHealth members of all ages: ophthalmic materials, including but not limited to, complete eyeglasses or eyeglass parts; the dispensing of ophthalmic materials; certain contact lenses; and other visual aids. These services and materials are no longer restricted to eligible MassHealth members under age 21. In addition, visual magnifying aids for eligible MassHealth members aged 21 years or older are no longer restricted to those members who are both diabetic and legally blind.

Adults who are enrolled in MassHealth Standard, Prenatal, CommonHealth, Basic, and Family Assistance for persons with HIV are eligible to receive these

vision-care services. Adults who are enrolled in MassHealth Essential are covered for eye exams, however they are not eligible for coverage of other MassHealth vision-care services. Please remember to check the MassHealth Recipient Eligibility Verification System (REVS) to verify eligibility and coverage type before providing services to a MassHealth member.

Also effective July 1, 2006, providers may use Service Code T2002 for a nursing-facility visit by an optometrist or optician for the pickup of a new prescription and fitting of eyeglasses, the delivery and adjustment of new eyeglasses, the pickup of broken eyeglasses, or the delivery of repaired eyeglasses. MassHealth pays for only the first member seen at the nursing facility during a single visit for the services described and billed using Service Code

T2002. MassHealth does not pay for additional members seen during that same visit.

MassHealth Transmittal Letter VIS-35 (June 2006) offers additional details about the coverage updates. Transmittal Letter VIS-35 is available in the MassHealth Provider Library on www.mass.gov/masshealth, under the MassHealth Regulations and Other Publications link.

**See the MassHealth
reminder to vision-care
providers about how to
submit orders for glasses on
page 4 of this newsletter.**

Enhanced Recipient Eligibility Verification System (REVS) Capabilities

As stated in All Provider Bulletin 154 (June 2006), effective in June 2006, a number of new enhancements were made available for REVS.

Based on provider feedback, MassHealth now offers more detailed Buy-In Coverage information for those members who are eligible under the Senior Buy-In coverage type. This enhancement allows REVS to display these restrictive messages in the following circumstances:

- QMB Restrictive Message:
“Member is Qualified Medicare Beneficiary.” See 130 CMR 519.010.
- SLMB Restrictive Message:
“Member is SLMB Beneficiary.” See 130 CMR 519.011(A).
- QI Restrictive Message:
“Member is QI Beneficiary.” See 130 CMR 519.011(B).

This change is applicable for all REVS access methods, which include WebREVS,

REVSpc, automated voice response (AVR) system, point-of-service (POS) devices, eligibility operator, and third-party vendors.

Buy-In Coverage

REVS now displays two additional groups of members: Aged Specified Low Income Medicare Beneficiary (SLMB) Only and Disabled SLMB Only. This change also enables authorized MassHealth providers who charge the Uncompensated Care Pool (UCP) for services associated with these members to view any associated UCP coverage these members may have. This change is applicable for all REVS access methods.

Expanded Name Search Capability

The implementation of the expanded name search capability through the REVSpc software, AVR system, and third-party vendors has helped reduce the number of calls you need to make to the REVS eligibility operator. The existing WebREVS site has also been modified

to allow the expanded name-search capability. Please refer to All Provider Bulletin 151 (March 2006) to learn how to take advantage of the expanded name search capability on WebREVS.

All Provider Bulletins 151 and 154 are available in the Provider Library on www.mass.gov/masshealth, under the “MassHealth Regulations and Other Publications” link.

Visit the REVS Web site at
www.massrevs.eds.com.

Provider FAQ: Health Care Reform

What MassHealth coverage types are affected by the new Health Care Reform legislation?

New legislation has either restored, or in some cases, increased the coverage of benefits for dental, vision, chiropractic, orthotic, prosthetic, inpatient hospital days, and certain 24-hour substance abuse treatment services for members aged 21 years and older. MassHealth members with Standard, CommonHealth, Prenatal, and direct coverage (not premium assistance) and Basic can get coverage for the services above. MassHealth Essential members can get all of the services listed above, except for vision, chiropractor, and orthotic services. All the above mentioned coverage types can also receive the new tobacco-cessation benefit.

When did these new benefits become effective?

The new benefits became available on July 1, 2006. Please refer to All Provider Bulletin 155 (June 2006) for specifics on this legislation.

What provider communications were issued that mentioned policy changes from Health Care Reform?

All Provider Bulletin 155 was issued in June 2006 and explains some changes in MassHealth policy. The following transmittal letters to certain provider types were also issued in June 2006: AOH-8, CHC-74, DEN-76, DEN-77, FAS-16, OPD-59, ORT-18, PHM-55, PHY-111, POD-52, POD-53, PRT-18, SAT-15, and VIS-35.

These transmittals are available in the MassHealth Provider Library, located under the MassHealth Regulations and Other Publications link on www.mass.gov/masshealth.

Have the fees increased for dental services?

Yes. A revised fee schedule is available on the Division of Health Care Finance and Policy (DHCFP) Web site. To access the schedule, go to www.mass.gov/dhcfp and click on DHCFP Regulations, then on the PDF or Word icon next to Dental Services Proposed Effective July 1, 2006.

Where can I go for more information on Health Care Reform?

The online Provider Library is an excellent resource for previous provider bulletins and transmittal letters issued for changes to MassHealth policy.

More information about Health Care Reform and MassHealth will be added to the Web site shortly.

Make www.mass.gov/masshealth your first stop for MassHealth news and updates.

Let MassHealth Know Your Preferred Communication Method *(continued from page 1)*

publication that affects your practice has been issued.

Signing up for your preferred communication is easy. Just go to the MassHealth Web site at www.mass.gov/masshealth and click on the Provider Preferred Communication

Method link in the Online Service box on the right side of the screen. Fill out the short online form and click Submit Form to send your choice to us. Or, if you would rather not sign up through the Web site, call our Customer Service Center at 1-800-841-2900.

Refer to All Provider Bulletin 153 (June 2006) for more information. You can access this bulletin from the online MassHealth Provider Library, available under the MassHealth Regulations and Other Publications link on www.mass.gov/masshealth.

MassHealth Reminders

Dental Providers

MassHealth transitioned to the American Dental Association (ADA) claim form versions 2002 and 2004 on July 1, 2006. As of June 30, 2006, MassHealth no longer accepts claims submitted on the MassHealth proprietary claim form no. 11. All paper claims for dental services submitted to MassHealth must be on the ADA claim form, regardless of the date services were provided. Claims submitted via the 837D electronic transaction are not affected.

If your organization is experiencing obstacles in transitioning to the ADA claim form, contact MassHealth Customer Service at 1-800-841-2900 or e-mail providersupport@mahealth.net.

Completing the American Dental Association (ADA) Claim Form for MassHealth

When using the ADA claim form versions 2002 or 2004 to submit paper claims to MassHealth, be sure to enter the pay-to-provider number in Field 49 (this field corresponds to Item 2 on the obsolete MassHealth-proprietary claim form no. 11.) Also, the servicing/treating provider number (which corresponds to Item 5 on the obsolete claim form no. 11), should be entered in Field 54 of the ADA form, when applicable. Failure to enter a provider number in Field 49 of the ADA form will cause the claim to be returned unprocessed.

If you have questions on how to complete the ADA form for MassHealth, please refer to Dental Bulletin 35 (June 2006),

which is located in the MassHealth Provider Library under the MassHealth Regulations and Other Publications link on www.mass.gov/masshealth.

Orthotic & Prosthetic Providers

If you submit a manufacturer's invoice with claims for orthotic and prosthetic services, be sure to identify the item(s) on the invoice(s) for which MassHealth is to be billed. Providers should circle the item(s) and write the corresponding MassHealth service codes on the invoice. If you have questions, contact MassHealth Customer Service through e-mail at providersupport@mahealth.net or call 1-800-841-2900.

Revised Adult Day Health (ADH) Rates

MassHealth revised ADH service rates on May 1, 2005. Please refer to the Division of Health Care Finance and Policy (DHCFP) regulations at 114.3 CMR 10.00. The complex level-of-care rate outlined in the DHCFP regulations surpassed the MassHealth transitional payment rate, making it obsolete. As a result, MassHealth has removed regulation language about the transitional payment rate and corresponding service code S5101.

This regulation change was effective on July 1, 2006. ADH providers must discontinue using code S5101, and begin using the ADH service code and modifiers as outlined in the MassHealth *Adult Day Health Manual*.

Please refer to Transmittal Letter ADH-20, available in the Provider Library. The Provider Library is accessible

under the MassHealth Regulations and Other Publications link on www.mass.gov/masshealth.

Vision-Care Providers: Submitting Orders for Glasses

Orders for all glasses, including for MassHealth members aged 21 and older, should be faxed to 1-888-698-2020 or mailed to:

MassCor Optical Labs
P.O. Box 466
Gardner, MA, 01440.

To check the status of an existing order, call 1-888-482-7331 or fax 1-888-698-2020.

To request order forms for vision-care materials, contact MassHealth Customer Service at 1-800-841-2900 or by fax at 617-988-8973. You can also send an e-mail to providersupport@mahealth.net.

MassHealth Reminders are taken from June and July 2006 remittance advice messages. Messages are available for viewing or downloading from the Provider Library, located under the MassHealth Regulations and Other Publications link on the MassHealth Web site.