



Connecticut Medical Assistance Program
Policy Transmittal 2017-35

Provider Bulletin 2017-91
December 2017

Roderick L. Bremby, Commissioner

Effective Date: February 1, 2018
Contact: Dana Robinson-Rush @ 860-424-5615

TO: Physicians, Physician Assistants, Certified Nurse-Midwives and Advanced Practice Registered Nurses

RE: Deletion of Select CPT Codes Listed on the Physician Office and Outpatient Fee Schedule

Effective for dates of service February 1, 2018 and forward, the Department of Social Services (DSS) will incorporate the deletion of select Current Procedure Terminology (CPT) codes from the Physician Office and Outpatient Services fee schedule.

The following CPT codes are being end dated or deleted from the physician office and outpatient fee schedule in order to be consistent with Medicaid regulations and coverage policies:

CPT Code 96040

CPT code 96040 (Genetic counseling, 30 minutes) when billed by a genetic counselor, which is not an enrollable provider type under the HUSKY Health provider network. Any service performed by a genetic counselor is not eligible for HUSKY Health reimbursement because genetic counselors are not categorized as an allied health professional, and they cannot render services under the supervision of a health professional.

Genetic counseling performed by a physician, physician assistant, certified nurse-midwife or advance practice registered nurse can be billed if it is part of the Evaluation/Management (E/M) visit and these services would be billed under the E/M codes already on the physician office and outpatient fee schedule.

CPT Code 97607 and 97608

CPT code 97607 (Neg press wnd tx \leq 50 sq cm, non-durable) and CPT 97608 (Neg press

wound tx $>$ 50 cm, non-durable) when billed as a professional service when a disposable wound vacuum is used. A disposable wound vacuum is classified as non-durable medical equipment which is not covered under the Connecticut Medical Assistance Program (CMAP). The Healthcare Common Procedure Coding System (HCPCS) codes for disposable wound vacuum will not be added to the durable medical equipment (DME) fee schedule. In order to be consistent, the CPT codes (97607 and 97608) for the professional service attached to the disposable wound vacuum must be deleted from the physician office and outpatient fee schedule since the HCPCS code for the wound vacuum will not be added to this fee schedule.

CPT code 97605 (Neg press wound tx \leq 50 cm, durable) and CPT code 97606 (Neg press wound tx $>$ 50 cm, durable) remain billable codes listed on the physician office and outpatient fee schedule for the professional services performed using a durable wound vacuum.

Accessing the Fee Schedules

The updated fee schedules can be accessed and downloaded by accessing the CMAP Web site: www.ctdssmap.com. From this Web page, go to "Provider", then to "Provider Fee Schedule Download". Click on the "I accept" button and proceed to click on the appropriate fee schedule. To access the CSV file, press the control key while clicking the CSV link, then select "Open". An Important Message (IM)

will be posted and distributed to all providers once the fee schedule has been updated.

For questions about billing or if further assistance is needed to access the fee schedule on the CMAP Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

Posting Instructions: Policy transmittals can be downloaded from the Web site at www.ctdssmap.com.

Distribution: This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by DXC Technology.

Responsible Unit: DSS, Medical Care Administration, Medical Policy and Regulations, Dana Robinson-Rush, Health Policy Consultant, Medical Policy at (860) 424-5615.

Date Issued: December 2017