



Connecticut Medical Assistance Program
Policy Transmittal 2018-12

Provider Bulletin 2018-24
June 2018

Roderick L. Bremby, Commissioner

Effective Date: July 1, 2018
Contact: Refer to Responsible Units Section

TO: Physicians, Advanced Practice Registered Nurses (APRNs), Certified Nurse Midwives (CNMs), Physician Assistants (PAs), and Hospitals-Outpatient

**RE: 1. Updates to the Reimbursement Rates of Select Manually Priced Procedure Codes
2. Adding New Hepatitis-B Vaccine to the Physician Office & Outpatient Fee Schedule
3. Adding Unlisted Vaccination Procedure Code to Physician Office & Outpatient Fee Schedule**

Updates to the Reimbursement Rates of Select Manually Priced Procedure Codes

Effective for dates of service, July 1, 2018 and forward, several procedure codes that are currently manually priced will be reimbursed based on the calculation of 57.5% of the 2018 Medicare physician fee schedule. The chart below lists the reimbursement rates:

Procedure Code	Rate Type	Procedure Description	HUSKY Rate
36482	SUR	Endoven ther chem adhes 1st	\$1,377.95
36482	FTS	Endoven ther chem adhes 1st	\$113.56
44381	SUR	Small bowel endoscopy br/wa	\$603.77
44381	FTS	Small bowel endoscopy br/wa	\$54.56
44384		Small bowel endoscopy	\$98.96
45388	SUR	Colonoscopy w/ablation	\$2,104.99
45388	FTS	Colonoscopy w/ablation	\$176.08
45389		Colonoscopy w/stent plcmt	\$188.58
45390		Colonoscopy w/resection	\$216.75
45393		Colonoscopy w/decompression	\$164.16
45398		Colonoscopy w/band ligation	\$442.93
46601	SUR	Diagnostic anoscopy	\$86.77
46601	FTS	Diagnostic anoscopy	\$60.07
46607	SUR	Diagnostic anoscopy & biopsy	\$122.76
46607	FTS	Diagnostic anoscopy & biopsy	\$81.10
48551		Prep donor pancreas	\$119.29
95875		Limb exercise test	\$83.53
96377		Applicaton on-body injector	\$13.06
99091		Collect/review data from pt	\$35.66

Adding New Hepatitis-B Vaccine to the Physician Office & Outpatient Fee Schedule

In January 2018, the Food & Drug Administration approved Heplisav-B, a new Hepatitis-B vaccine to be administered to adults, aged 18 years and older

Current Procedure Terminology (CPT) code: 90739 -“Hepb vacc, 2 dose adult im” will be reimbursed at \$131.10, which is based on 100% of the April 2018 Medicare Average Sales Price (ASP) Drug Pricing Files. This CPT code will be added to the physician office & outpatient fee schedule and to Connecticut Medical Assistance Program Addendum B effective July 1, 2018.

Adding Unlisted Vaccine Procedure Code to Physician Office & Outpatient Fee Schedule

In order to allow HUSKY Health providers to be properly reimbursed for newly introduced, Federal Food & Drug Administration (FDA) approved vaccines/toxoids and timely access to medically necessary products, CPT code: 90749-“Unlisted vaccine/toxoid” will be added to the physician office & outpatient fee schedule, effective July 1, 2018.

Please note that CPT code 90749 should only be used when a specific CPT is currently not available for newly FDA approved vaccines/toxoids.

The standard 11-digit National Drug Code (NDC) is required on all submitted claims for vaccines and toxoids.

The pricing for the unlisted vaccines/toxoids will use the NDC as part of the pharmacy pricing methodology, specifically the lowest of (a) the usual and customary charge to the public or the pharmacy's actual submitted ingredient cost; (b) the National Average Drug Acquisition Cost (NADAC) established by CMS; (c) the Affordable Care Act Federal Upper Limit (FUL); or (d) Wholesale Acquisition Cost (WAC) plus zero (0) percent when no NADAC is available for a specific drug.

Accessing the Fee Schedules:

The updated fee schedules can be accessed and downloaded by accessing the Connecticut Medical Assistance Program 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".

For questions about billing or if further assistance is needed to access the fee schedule on the Connecticut Medical Assistance Program 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 Units:

Physicians, APRNs, PAs and CNMs: Dana Robinson-Rush, Medical Policy Consultant at (860) 424-5615.

Hospitals-Outpatient: Colleen Johnson, Medical Policy Consultant at (860) 424-5195.

Date Issued: June 2018