

interChange Provider Important Message

Hospital Monthly Important Message Updated as of 05/14/2019

***all red text is new for 05/14/2019**

CMAP Addendum B April 2019

The Department of Social Services (DSS) will be updating the CMAP Addendum B to incorporate the 2019 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) for dates of service April 1, 2019 and forward to remain compliant with the Health Insurance Portability and Accountability Act (HIPAA).

Payment rate changes for procedure codes assigned a status indicator G or K were updated and loaded into the system with an April 1, 2019 effective date on March 26, 2019. DXC Technology has determined there were no outpatient claims with date of services April 1, 2019 that processed with the incorrect payment rate.

Any NEW procedure codes that were added to CMAP Addendum B with an effective date of April 1, 2019 and forward were updated in the system on April 30, 2019.

The following procedure code has an effective date of February 1, 2019; Q2041 "Axicabtagene ciloleucel car+"

The April changes have been posted to the CMAP Addendum B Changes document on the Hospital Modernization page under "CMAP Addendum B Changes and Historical Versions".

The changes can be identified by the following indicators:

- "G or K" - A change has been made to the payment rate (status indicator G or K).
- "New" - The procedure code was added by CMS
- "X" - A change has been made to the procedure code or status indicator.

Older versions of CMAP Addendum B can be found under the Hospital Modernization page under "CMAP Addendum B Changes and Historical Versions".

DRG Calculator Updated 4/16/2019

The DRG Calculator was updated effective for dates of discharge April 15, 2019 and forward. The updated DRG calculator has been added to the Hospital Modernization Web Page. The Department of Social Services added an adjustment factor for all hospitals with dates of discharge April 15, 2019 and forward. The rate adjustment factor was added to the Provider Table CT tab to calculate the updated hospital adjusted base rate on the DRG calculator.

For inpatient discharges that occurred between October 1, 2018 and April 14, 2019, a supplemental payment will be paid out to the hospitals. This payment is tentatively scheduled for the 2nd cycle in June 2019. This payout will make up for the difference between what was paid without the adjustment factor and what would have been paid if the adjustment factor was in effect for that period. For an inpatient claim to be considered for a supplemental payment, it must be an inpatient claim with a date of discharge between October 1, 2018 and April 14, 2019 and must be submitted prior to June 5, 2019.

Newborn DRG codes 5891 - 5894

- 5/14/19 - DSS updated the DRG weights, ALOS and Outlier Threshold for DRG codes 5891 - 5894 on February 14, 2019 effective for date of discharges October 1, 2015 to September 30, 2018. Any inpatient claims with a discharge date of October 1, 2015 and forward that processed

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between May 11, 2018 and February 14, 2019 at the incorrect DRG weight, ALOS or outlier amount will be identified and reprocessed in a future claim cycle yet to be determined (TBD).
DRG Weight, Average Length of Stay (ALOS) and Outlier Threshold Amount Updated 10/1/2018

- 02/12/2019 - Any inpatient claims with a discharge date of October 1, 2018 to November 13, 2018 that processed at the incorrect DRG weight, ALOS or outlier amount will be identified and reprocessed in a future claim cycle yet to be determined (TBD).

Modifier GZ “Not Reasonable and Necessary”

DXC Technology identified an issue with the APC grouper not processing outpatient procedures with modifier GZ. DXC Technology has updated the system on March 27, 2019 to allow these services to process to the correct status indicator listed on CMAP Addendum B.

Provider Bulletins

Provider Bulletin 2019-25 - Removal of Prior Authorization/Registration for Behavioral Health Professional Services Rendered During a Medical Inpatient Stay

Effective for inpatient admissions on or after May 1, 2019, Prior Authorization (PA)/registration will no longer be required for behavioral health professional services rendered by a Physician, Advanced Practice Registered Nurses (APRNs) and Physician Assistant during a medical inpatient stay in Place of Service (POS)/Facility Type Code (FTC) 21 - Inpatient Hospital.

Provider Bulletin 2019-22 - Electronic Claims Submission, Web Remittance Advice, Check, EFT and 835 Schedule (HUSKY Health Program)

The Department of Social Services (DSS) and DXC Technology has published the Connecticut Medical Assistance Program Electronic Claims Submission, Remittance Advice (RA), Check and Electronic Funds Transfer (EFT) issue dates and 835 schedule for July 2019 to December 2019.

Provider Bulletin 2019-18 - Supervision of Individuals Not Licensed to Practice Independently When Providing Behavioral Health Services in Clinic Settings

Practitioners who are considered to be “Non-Independent Behavioral Health (BH) Practitioners”, are not licensed to practice independently in accordance with Connecticut law, but may provide services in freestanding behavioral health clinics, behavioral health FQHCs and outpatient hospital behavioral health clinic settings under the Connecticut Medical Assistance Program (CMAP) when they have appropriate professional supervision.

The provider bulletin reviews the supervision and document requirements for outpatient hospital behavioral health clinics in accordance to Connecticut General Statutes.

Provider Bulletin 2019-15 - Implementation of Electronic Delivery of Letters - Replacement to the Mailing of Connecticut Medical Assistance Program Letters

The Department of Social Services (DSS) is pleased to announce the implementation of electronic delivery of letters. This will eventually replace the mailing of many paper letters that you currently receive from the Connecticut Medical Assistance Program (CMAP) through the United States Postal Service (USPS). This initiative is part of DSS’ continuing response to provider survey feedback from providers and office staff who have indicated a preference to receive information electronically and is in addition to the eMessaging functionality for bulletins/policy transmittals announced in provider bulletin PB15-23, Implementation of Electronic Messaging - Replacement to the Mailing of Bulletins/Policy Transmittals. This initiative will be implemented in three phases.

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As of March 27, 2019, letters to Organizations Confirming Changes Made via Secure Web Portal Maintain Organization Members Panel and Electronic Funds Transfer (EFT) Letters are being delivered electronically to actively enrolled billing providers.

As of May 1, 2019, re-enrollment due notices for both active billing and performing providers are being delivered electronically to actively enrolled billing providers.

The final letters to be implemented in eDelivery will occur on June 3, 2019. This will include prior authorization notices and third party liability (TPL) trauma questionnaire letters.

Provider Bulletin 2019-14 - Updated Coding Guidelines for the Behavioral/Developmental Component of Multi-Disciplinary Examinations (MDEs)

The Department of Social Services (DSS) has updated the billing guidelines regarding Multi-Disciplinary Examinations (MDEs) provided for children covered by HUSKY Health who are in the custody of the Connecticut Department of Children and Families (DCF).

The changes in billing apply to the Behavioral/Developmental component of MDE examinations only. These changes are effective for dates of service January 1, 2019 and forward.

Providers should continue to use Provider bulletin (PB) 2017-68 "Updated Guidance Regarding Multi-disciplinary Examinations" for billing guidelines for the medical and dental portions of MDE services.

Reminders:

Scheduled Hospital Refresher Workshops:

HPE MyRoom Virtual Classroom Training
Thursday May 23, 2019 9:00 PM - 12:00PM

Connecticut Hospital Association, 110 Barnes Road, Wallingford, CT
Wednesday May 29, 2019 1:00 PM - 4:00 PM

The topics include:

- Web Account
- Account Demographics
- eDelivery
- Prior Authorization
- Web Claim Adjustments
- CMAP Addendum B
- Provider Fee Schedule
- APR DRG
- Frequent Claim Denial
- National Correct Coding Initiative (NCCI)

To register for these workshops, visit the www.ctdssmap.com Web site, go to the Hospital Modernization page and click on the Provider Training link in the quick link box. Under workshops, click on the Hospital Refresher Workshop Invitation. Click on the registration link for the workshop you wish to attend, and fill out the corresponding information.

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Billing of Influenza Vaccines for the 2018-2019 Influenza Season

DXC Technology would like to remind providers of the importance in reporting the correct Healthcare Common Procedure Coding System (HCPCS) code for each vaccine product being billed to the Connecticut Medical Assistance Program (CMAP).

If the 11-digit National Drug Code (NDC) reported on the claim does not correspond to the vaccine code reported on the same claim detail, the vaccine will be denied.

Hospitals can refer to the important message titled: Attention Primary Care Providers: Billing of Influenza Products (Posted 1/24/19) for additional information on coding.

Inpatient Behavioral Health Prior Authorization Request

When the hospital request prior authorizations for an inpatient behavioral health stays from Beacon Health Options, they should no longer be requesting an additional unit for the discharge day. The hospital should only be requesting the actual number of days the client was in the hospital, not including the date of discharge.

TPL Audit Report - May 2019

The Third Party Audit reports were sent to the following hospitals on Thursday May 2, 2019:

Charlotte Hungerford Hospital, William Backus Hospital, Norwalk Hospital and Gaylord Hospital.

HOLIDAY CLOSURE:

Please be advised that the Department of Social Services (DSS) and DXC Technology will be closed on Monday, May 27, 2019 in observance of the Memorial Day holiday. Both DSS and DXC Technology offices will re-open on Tuesday, May 28, 2019.