



March 2026  
Connecticut Medical Assistance Program  
<https://www.ctdssmap.com>

# The Connecticut Medical Assistance Program Provider Quarterly Newsletter

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## Attention: All Providers and Trading Partners

### Quick Reminder: Set Up Your CTDSSMAP Secure Web Account Immediately

#### Providers – Do Not Skip This Step!

As soon as your CT Medicaid enrollment or re-enrollment is finalized, your #1 priority is to create your CTDSSMAP Secure Web account.

We continue to see providers go months (and sometimes years) without activating their account which can cause serious issues such as;

- ◆ Missed enrollment and re-enrollment notices
- ◆ Outdated addresses left on file
- ◆ Preventable claim denials
- ◆ No access to e-delivery letters or portal tools
- ◆ Inability to reset passwords, manage staff access, or update required information

Avoid these issues by setting up your account right away.

#### How To Get Started

1. Visit [www.ctdssmap.com](http://www.ctdssmap.com)
2. Select **Provider**→ **Secure Site**→ **Create New Account**
3. Register as the **Master User** and update your contact information
4. Add additional clerk accounts as needed

Keeping your account current ensures you receive critical updates and helps prevent costly administrative issues.

#### Need Assistance?

#### Provider Assistance Center (PAC)

For help with eligibility, claims, enrollment, or account issues,

1-800-842-8440 (Mon-Fri, 8am-5pm)

## Attention: All Providers

### Use Only One Delivery Method for Follow-On Documentation

Gainwell Technologies would like to remind all providers that, in order to ensure efficient processing and avoid delays or duplicate submissions, you must use only **one delivery method** when sending follow-on documentation for maintenance requests that cannot be completed through the secure provider portal.

Follow-on documentation examples include copies of current licenses, permits, certifications, and any additional supporting materials required for provider maintenance.

Providers may choose **one** of the following submission methods:

- U.S. Mail  
Gainwell Technologies  
Provider Enrollment Unit  
P.O. Box 5007  
Hartford, CT 06102-5007

- Fax  
1-800-899-5401
- E-mail  
[ctproviderenrollment@gainwelltechnologies.com](mailto:ctproviderenrollment@gainwelltechnologies.com)  
**PLEASE NOTE: THIS EMAIL IS FOR DOCUMENTS ONLY.**  
**For general questions, please contact Provider Assistance Center at the number below.**

Please do not submit the same request through multiple methods.

If you are unsure which method to use or have questions, you may contact the **Provider Assistance Center (PAC)** at 1-800-842-8440.

# Attention: Electronic Billers and Trading Partners

## Keep Your Trading Partner Contact Information Up to Date

Accurate Trading Partner contact information is essential for receiving timely updates or outreach to ensure smooth electronic transactions, and keeping your organization connected to important Connecticut Medical Assistance Program (CMAP) communications. If your contact details have changed—or if it has simply been a while since you last reviewed them—now is the perfect time to log in and make sure everything is current.

Keeping this information updated helps prevent missed notifications, delays in processing, and communication gaps that can affect your daily operations.

A few minutes of review now can prevent unnecessary complications later.

### How to Update Your Trading Partner Information

Please follow the steps below to update your Trading Partner information.

#### 1. Visit the CMAP Website

Go to [www.ctdssmap.com](http://www.ctdssmap.com) to begin.

#### 2. Log In Using Your Trading Partner Secure Web Account

Use the **Trading Partner Secure Web ID and password** created after submitting your Trading Partner Profile (TPP) form. Provider → Secure Site

**Please Note:** This is different from your AVRS/Medicaid ID account. If a vendor submits your electronic files, they may hold the Trading Partner login.

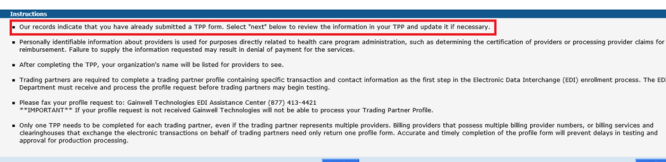
#### 3. Open Your Trading Partner Profile

Select **Trading Partner** → **Trading Partner Enrollment/Profile**.



You should see a message confirming that your TPP form has already been submitted. **If not, you may be using the wrong login credentials.**

The Instruction panel, shown below must state that you have already submitted a TPP form as the portal recognizes that you have already enrolled. If you do not see the panel below –STOP you may have used the wrong User ID and Password to log in or you may not be enrolled as a Trading Partner



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You should not see the screen below when updating an existing Trading Partner account. This usually happens if you're logged in with an AVRS/Medicaid ID Secure Web Account or if you are not an active Trading Partner. Trading Partner login credentials are mailed in two letters after your enrollment form is processed, and those letters explain how to set up your Secure Web Account.

#### Instructions

- This form is intended for clearinghouses, billing services, and software companies seeking to become trading partners. If you already have received a trading partner ID, and wish to update your TPP, then you must first log in to your secure portal account.
- Personally identifiable information about providers is used for purposes directly related to health care program administration, such as determining the certification of providers or processing provider claims for reimbursement. Failure to supply the information requested may result in denial of payment for the services.
- Trading partners are required to complete a trading partner profile containing specific transaction and contact information as the first step in the Electronic Data Interchange (EDI) enrollment process. The EDI Department must receive and process the profile request before trading partners may begin testing.
- Please fax your profile request to: Gainwell Technologies EDI Assistance Center (877) 413-4421  
\*\*IMPORTANT\*\* If your profile request is not received Gainwell Technologies will not be able to process your Trading Partner Profile.
- Only one TPP needs to be completed for each trading partner, even if the trading partner represents multiple providers. Billing providers that possess multiple billing provider numbers, or billing services and clearinghouses that exchange the electronic transactions on behalf of trading partners need only return one profile form. Accurate and timely completion of the profile form will prevent delays in testing and approval for production processing.

#### 4. Update Your Contact Information

Review and update all contact details in the **Trading Partner Information Panel**—including phone numbers, emails, and key personnel.

#### 5. Review of All Trading Partner Profile Panels

The system will guide you through your Transaction Sets, Covered Providers, and Electronic Remittance Advice (ERA) panels to ensure everything is accurate.

#### 6. Complete the Electronic Signature Agreement

Add your electronic signature and review the summary of your updates.

#### 7. Submit Your Changes

Click **Submit** to finalize your updates. You will receive confirmation once your profile has been successfully updated.

#### Important Reminder

Your updates will **not** be saved unless you review all enrollment panels and click **Save/Submit** on the final screen. Exiting early will result in lost changes.

For Trading Partner login assistance, contact the **Provider Assistance Center at 1-800-842-8440**.

#### Need More Detailed Instructions?

Visit [www.ctdssmap.com](http://www.ctdssmap.com) → **Information > Publications > Provider Manuals > Chapter 10 Web Portal/AVRS**

- Trading Partner Enrollment panels: **pages 108–116**

Trading Partner panels: **page 117**

# Attention: Prescribing Providers

## Introducing a New Resource to Support Prior Authorization And Product Searches

As part of our ongoing commitment to improving provider access to clear, reliable, and easy-to-use tools, we are pleased to introduce a new resource designed to streamline two essential functions in your daily workflow: the **Prior Authorization Form Directory and Diabetic Product Search Link**.

This enhanced tool brings together key information in one convenient location, helping providers quickly locate the forms, product details, and coverage information needed to support efficient patient care. Whether you are submitting a prior authorization request or searching for covered diabetic supplies, this resource is built to reduce administrative burden, improve accuracy, and support confident decision-making at the point of care.

### A Smarter, Simplified Way to Search

The new integrated directory makes it easier than ever to:

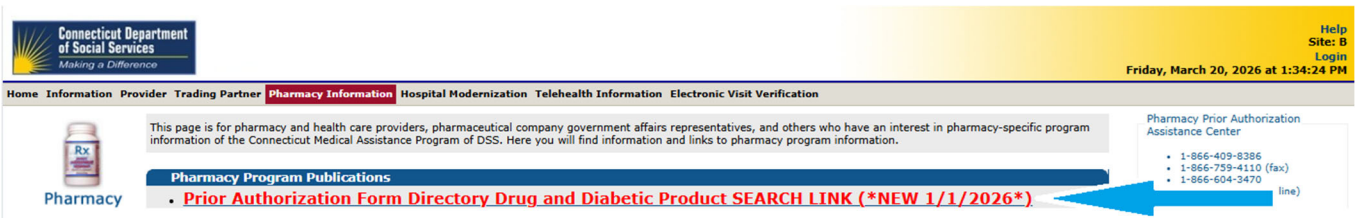
- Identify whether a medication or diabetic supply requires prior authorization
- Access detailed product and coverage information
- Locate the correct PA form in just a few clicks
- Navigate between drug and diabetic product searches with a clean, intuitive interface

Providers will find a simplified layout, streamlined navigation, and direct access to the materials most frequently requested. By consolidating these functions, the tool reduces time spent searching across multiple systems, allowing more time to focus on patient care.

### How to Access the Prior Authorization Form Directory and Diabetic Product Search Link

Providers can access the new resource directly through the CT Medical Assistance Program website. To locate the Prior Authorization Form Directory and the Drug and Diabetic Product Search Link, follow these steps:

1. Go to [www.ctdssmap.com](http://www.ctdssmap.com)
2. Click on **Pharmacy Information** in the top navigation menu
3. Select the **Pharmacy Program Publications** panel
4. Click **Prior Authorization Form Directory Drug and Diabetic Product Search Link (NEW 1/1/2026)**



**Please Note:** Before downloading any forms or documents, clear your browser cache to ensure you are accessing the most current version available on the website.

### Start Exploring Today

We encourage all providers to begin exploring this resource and incorporating it into their regular processes. As with any new tool, early familiarity will help ensure a smooth transition and allow you to take full advantage of the efficiencies it offers.

If you have questions or need assistance, contact the **Pharmacy Provider Assistance Call Center at 1-866-409-8386**.

## Attention: All EVV Users

### Sandata Support to Continue Following HHAeXchange Acquisition

To answer questions directed to DSS and Gainwell Technologies:

On October 3, 2024, HHAeXchange acquired Sandata Technologies, bringing both organizations together to strengthen home-care technology and EVV services nationwide. Importantly, **Sandata will remain fully supported**, which means customers who are credentialed to provide services in the state of Connecticut that require EVV will continue to be supported without any disruption.

Providers using Sandata Agency Management and the Sandata Aggregator **do not need to take any action**, as existing workflows will continue to be supported without interruption.

If you experience any issues while using Sandata, please contact their customer care team by calling **1-855-399-8050** or emailing [ctcustomercare@sandata.com](mailto:ctcustomercare@sandata.com).

For Alternative EVV (ALT EVV) users, please contact [ctaltevv@sandata.com](mailto:ctaltevv@sandata.com).

For additional information, you can view Sandata's Frequently Asked Questions on the link below: <https://www.sandata.com/about/faq/>.

As a reminder, questions related to EVV can be submitted securely to [ctevv@gainwelltechnologies.com](mailto:ctevv@gainwelltechnologies.com)

## Attention: Acquired Brain Injury (ABI), Autism, Connecticut Home Care (CHC), Personal Care Assistance (PCA), Mental Health Waiver (MHW) Service Providers and Home Health Agencies

### Required Documentation for Manually Entered EVV Call In/Out Times

Electronic Visit Verification (EVV) continues to be a critical compliance requirement for all EVV-mandated services. As part of maintaining accurate and auditable records, Gainwell Technologies would like to remind all providers of an important responsibility related to manual time entries.

There are situations where a caregiver may be unable to use the EVV system to clock in or out—for example:

- Technical issues with the caregiver's phone
- Service location without reliable phone or internet access
- System outages
- Emergency circumstances

In these cases, agencies are permitted to manually enter the visit times. However, **manual entries must always be accompanied by a clear, detailed note explaining why the caregiver could not call in/out.**

Auditors look closely at manual EVV entries because they

fall outside the standard verification process. Without proper documentation, agencies risk: Non-compliance findings

A note added at the time of entry protects the agency by showing that the manual adjustment was valid and justified.

To ensure compliance, each note should briefly state:

- **The reason** the caregiver could not call in/out
- **Any relevant context**, such as technical issues or environmental limitations
- **Confirmation** that the caregiver was present and provided the service

Example: *"Caregiver unable to clock in due to phone malfunction. Verified service start and end time with client."*

Keeping these notes consistent protects your agency and ensures full EVV compliance. Please refer to provider bulletin [PB23-39](#) for ABI, CHC, PCA, Autism and MH waiver compliance requirements.

# Attention: Acquired Brain Injury (ABI), Autism, Connecticut Home Care (CHC), Personal Care Assistance (PCA), Mental Health Waiver (MHW) Service Providers and Home Health Agencies

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## Service Orders vs Prior Authorization

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A Service Order is issued by the Access Agency Case Manager detailing authorized services, frequencies, and specific procedure codes.

A prior authorization is the official approval recorded in the Medicaid Management Information System.

A Service Order must be converted into a Prior Authorization in the system before services begin to ensure reimbursement. The provider must also verify eligibility for the dates of service.

If the provider has a Service Order but no Prior Authorization number in the portal, they must contact the Access Agency Case Manager as Gainwell Technologies cannot enter them for the provider.

Providers should review their Prior Authorization online at

[www.ctdssmap.com](http://www.ctdssmap.com) using their secure provider ID and password to determine if their request has been approved, denied, or modified prior to submitting their claims to Gainwell Technologies.

**Please note:** If you have a Service Order number or approval for services but do not have a Prior Authorization number, please contact the access agency, DSS Autism Case Manager, or Advanced Behavioral Health (ABH) representative responsible for the client's care plan for assistance. A Service Order does not mean that a Prior Authorization has been transferred to the CMAP secure site.

**Please note:** Neither Gainwell Technologies nor Sandata can enter a Prior Authorization into the CMAP portal or the Sandata EVV system on behalf of an access agency, DSS Case Manager, or ABH representative.

# Attention: Physicians, Physician Assistants, APRNs, Certified Nurse Midwives, and Doulas

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## Updated Maternity Bundle FAQ Now Available!

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The Connecticut Medical Assistance Program (CMAP) is pleased to announce that the Maternity Bundle Billing and Claims Frequently Asked Questions (FAQ) document has been updated as of January 30, 2026.

The revised FAQ provides additional clarification on program requirements, billing guidance, covered services, and key policy updates designed to support providers participating in the Maternity Bundle initiative. We encourage all Medicaid providers, especially those delivering maternity-related services, to review the updated information to ensure continued compliance with program expectations.

You can access the updated FAQ directly here:

[Maternity Bundle FAQ](#)

You can also access the updated FAQ published on the DSS website directly here:

[DSS Maternity Bundle FAQ](#)

If you have any questions after reviewing the revised document, please contact the **Provider Assistance Center (PAC)** for support at **1-800-842-8440 (Mon-Fri, 8am-5pm)**

# Attention: Acquired Brain Injury (ABI), Autism, Connecticut Home Care (CHC), Personal Care Assistance (PCA), And Support and Planning Coach (S&PC) Service Providers

## Credentialing Update and Guidance to Obtaining Service Referrals

Providers wishing to receive service referrals must first be credentialed with GT Independence (GTI), the Department of Social Services Fiscal Intermediary and credentialing agent. Providers must then complete an online enrollment application via the [ctdssmap.com](http://ctdssmap.com) Web site for each program credentialed which must then be approved by the Department of Social Services (DSS).

### Credentialing

Providers credentialing for the first time and those rec credentialing should reach out to GTI via GTI's preferred method of contact for all credentialing communications, at [providercredentialing@gtindependence.com](mailto:providercredentialing@gtindependence.com). Indicate "New Enrollment Credentialing Request" or "Re-enrollment Credentialing Request" in the subject line of the email and include contact information (phone, email, mailing address) of the person who will be responsible for the credentialing process should GTI need to reach out to you. Providers can also include their questions or other communications they wish to share with GTI regarding the credentialing application process.

Please note: The credentialing process for Autism Waiver Solo Practitioners remains unchanged. Individuals should contact Carelon directly for a credentialing application at 1-877-552-8247 or [ctbhp@carelon.com](mailto:ctbhp@carelon.com).

### Enrollment

Upon receipt of their credentialing/rec credentialing letter(s), providers should access the [www.ctdssmap.com](http://www.ctdssmap.com) Web site to begin the Enrollment or Re-enrollment Application process.

ABI, Autism, CHC and PCA Waiver Service provider initial enrollment and re-enrollment are for a two-year period.

Support and Planning Coach Service provider initial enrollment and re-enrollment are for a five-year period.

An online Enrollment application must be completed for each program the provider has been credentialed to provide service. From the Web site Home page, select:

**Provider Enrollment** – Provider first time enrollment in the Waiver.

Prior to the online application being submitted, newly enrolling providers will receive an Application Tracking Number (ATN) at the end of the application process. Providers should take note of the ATN which should be placed in the upper right-hand corner of a copy of the credentialing letter that must be submitted to Gainwell Technologies to ensure it is associated to the appropriate application. The application tracking number should also be retained to track the status of their online application.

**Provider Re-Enrollment** – Existing provider already enrolled in the Waiver.

Providers must have an Application Tracking Number (ATN) to access this application as it contains their last enrollment data.

Approximately six months prior to the re-enrollment due date, providers should receive an e-delivery message that an e-delivery letter is waiting for pickup in the Trade File section of their secure Web account. Receipt of the letter notifies a provider it is time to re-enroll and provides them with the ATN to access their prior enrollment data.

Providers should begin the rec credentialing process with GT Independence soon after receipt of their re-enrollment due letter to ensure they are credentialed and the provider has submitted their re-enrollment application to Gainwell Technologies well before their program re-enrollment due date.

The re-enrollment due date can be found on the Home Page of the Providers Secure Web Account for each program.

**Credentialing Letter**- This is the follow-on document required for completion of both the enrollment and re-enrollment application process.

The Enrollment or Re-Enrollment ATN must be on each GTI credentialing letter and on any other documentation sub-

mitted to Gainwell Technologies to ensure correct association to each Waiver program application submitted.

The credentialing letter and any other documentation that may be requested must be submitted to Gainwell Technologies via **one of the following methods** of communication: It is important that providers submit their documentation only once, unless otherwise requested.

**U.S. Mail**

Gainwell Technologies  
Provider Enrollment Unit  
P.O. Box 5007  
Hartford, CT 06102-5007

**Fax**

1-800-899-5401

**E-mail**

[ctproviderenrollment@gainwelltechnologies.com](mailto:ctproviderenrollment@gainwelltechnologies.com)

**PLEASE NOTE: THIS EMAIL IS FOR DOCUMENTS ONLY.**

**For general questions, please contact the Provider Assistance Center (PAC) at 1-800-842-8440.**

**For more information regarding the credentialing, enrollment and re-enrollment process, please refer to Provider Bulletin link [PB24-84](#).**

**GTI Provider Directory**

This is a Public Facing Directory. Only those Providers who have successfully credentialed with GTI, have a credentialing letter and an approval letter from Gainwell Technologies for each Waiver or S&PC Program enrolled will appear on the GTI Directory. Information contained in the directory is pulled from both the credentialing and enrollment applica-

tions. It is important that the information submitted under both the credentialing and enrollment applications is accurate. If your agency does not appear on the directory within 30 days of receipt of your enrollment application approval letter, contact GTI to determine if they need a copy of your enrollment/re-enrollment approval letter.

The GTI Provider Directory can be accessed via the following link [GTI Provider Directory](#).

**Access Agency Directories**

The following Access Agencies have developed their own directories over time and are a resource to their Case Managers for service referral. These directories contain more information than the current GTI Directory.

**Connecticut Community Care (CCC)** - Providers can access the link [Provider Enrollments and Changes - CT Community Care](#) to complete the form to be added to the CCC Directory.

**South Western CT Agency on Aging (SWCAA)** – <https://swcaa.org/providers/> then scroll to the section on Important updates to access the form to be added to this directory.

**Agency on Aging of South Central CT (AoACC)** – <https://www.aosacc.org/providers/> - New Providers: click the Provider Enrollment Link. Existing providers: click the directory update.

**Western CT Area Agency on Aging (WCAAA)** – **Unavailable at this time.**

# Attention: All Autism Spectrum Disorder Providers

## Enrollment Reminder and Clarification: Providers Need to Obtain Qualification from Carelon Behavioral Health for Enrollment and Re-Enrollment

To enroll as an Autism Spectrum Disorder Provider, providers must complete the online enrollment process through Gainwell Technologies at [www.ctdssmap.com](http://www.ctdssmap.com). In order to successfully enroll, performing providers and billing providers must meet the applicable minimum qualifications to provide these services. The Connecticut Behavioral Partnership, administered by Carelon Behavioral Health of Connecticut is responsible for qualifying ASD providers who wish to enroll in the Medicaid program. Once successfully “Qualified,” your qualification letter will be sent to Gainwell Technologies to complete your enrollment application.

**In order to Qualify to provide ASD services and enroll, please submit the necessary documents to the Provider Relations Department at Carelon Behavioral Health at [CTBHP@Carelton.com](mailto:CTBHP@Carelton.com).**

**Please review the list of required documents below.**

- Completed Department of Children and Families Release of Information form, including the provider’s social security number and date of birth. The form is provided on the last page of this application.
- A letter of intent describing the services to be rendered and reflecting the experience of performing the services
- A resume or CV highlighting the provider’s professional experience, including the number of years of direct service experience to individuals with ASD.
- University diploma
- A copy of a current professional clinical license and certificate (BCBA). If an applicant is not a BCBA, only a professional clinical license is required.
- Two (2) samples of behavior support plans that include functional assessments.
- If not covered by an agency’s liability insurance, the applicant must submit a certificate of insurance or certificate of insurability demonstrating professional liability insurance of a minimum of \$500,000 per occurrence and \$1.5 million in aggregate. You are **required** to provide documentation of such coverage annually and upon request.

Note: If a provider has less than two (2) years of full-time work experience in treating individuals with ASD, an interview with a representative from the Connecticut Behavioral Health Partnership will be conducted. The interview may include a discussion of competency to perform holistic functional assessments, collect meaningful data, and recommend proactive and reactive interventions. This discussion will also explore professional development based off training experience and on-the-job supervision.

**One important clarification that providers must understand is that the “Qualification Letter” must come from CTBHP which is administered by Carelon Behavioral Health of Connecticut. There has been confusion in the past with providers becoming “credentialed” with Carelon, the national private insurance company. This is not the correct “Carelon” for this purpose and providers must use the word “qualification” and not “credentialed” when referring to this process. Your CTBHP qualification letter will have the letterhead pictured in the screenshot below.**



**Please be aware, if your letter does not have this Connecticut BHP letterhead, it is likely not the correct Qualification Letter that you need to obtain. This can lengthen the timeline of your enrollment and prevent payment of claims if this information is not correct as it is needed to complete the enrollment and re-enrollment application. To avoid the potential confusion please use the contact [ctbhp@carelon.com](mailto:ctbhp@carelon.com), or 1-877-552-8247 (ext. 1, 2, then 7) for information regarding this process.**

**For more information regarding performing Autism Services you can click [HERE](#) to visit Chapter 7 of the provider Manual for Autism Spectrum Disorder or you can click [HERE](#) for the link to CTBHP’s website on [ASD services](#).**

# Appendix

## 2026 Holiday Schedule

Date	Holiday	Gainwell Technologies	CT Department of Social Services
1/1/2026	New Year's Day, observed	Closed	Closed
1/19/2026	Martin Luther King Jr. Day	Closed	Closed
2/12/2026	Lincoln's Birthday, observed	Open	Closed
2/16/2026	Presidents' Day	Closed	Closed
4/3/2026	Good Friday	Closed	Closed
5/25/2026	Memorial Day	Closed	Closed
6/19/2026	Juneteenth Day	Open	Closed
7/3/2026	Independence Day, observed	Closed	Closed
9/7/2026	Labor Day	Closed	Closed
10/12/2026	Columbus Day	Closed	Closed
11/11/2026	Veterans' Day, observed	Closed	Closed
11/26/2026	Thanksgiving Day	Closed	Closed
11/27/2026	Day after Thanksgiving	Closed	Open
12/25/2026	Christmas Day	Closed	Closed

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# Appendix

## Provider Bulletins

Below is a listing of Provider Bulletins that have recently been posted to [www.ctdssmap.com](http://www.ctdssmap.com). To see the complete messages, please visit the Web site. All Provider Bulletins can be found by going to the Information -> Publications tab.

- PB26-08 Dupixent Coverage
- PB26-07 January 2026—Revision of Rates for Certain Clinical Diagnostic Laboratory Testing Codes
- PB26-06 Updates to Fee Schedules and Rate Increases for Select Behavioral Health Services
- PB26-05 Independent Therapy Fee Schedule Updates
- PB26-04 Guidance on Place of Service Codes at School Based and Community Locations
- PB26-02 Connecticut Medical Assistance Program Provider Satisfaction Survey
- PB26-01 Changes to the Prior Authorization of Radiology Services For HUSKY Health Members with Limited Benefit Coverage
- PB25-88 Obstetrics Pay for Performance Program for Non-Participating Maternity Bundle Providers
- PB25-87 January 2026 Updates to the CMAP Telehealth Table— Subsequent Hospital Care and Nursing Facility Care
- PB25-86 Changes to Prior Authorization of Physical, Occupational, And Speech Therapies for Individuals Whose Primary Diagnosis is Intellectual Disability, Developmental Delay, Autism or Other Development Disorder
- PB25-85 Update on Enhanced Care Clinic Access to Services Monitoring
- PB25-84 Policy Updates and Changes to Clinical Review Criteria
- PB25-83 January 2026 quarterly HIPAA Compliant Update—Dental Fee Schedules for Adults and Children
- PB25-82 Updating Physician Administered Drugs on Select Fee Schedules
- PB25-81 Rate Increase for PRTFs
- PB25-80 Update to the Implementation of Children’s Mental Health Urgent Crisis Centers Services for Children 18 Years Old and Younger
- PB25-79 1. New J Code for Billing Spravato® 2. Spravato® Coverage Guidelines
- PB25-78 REVISED: Out-of-State and Border Hospital Reimbursement- Effective January 1, 2026
- PB25-77 Annual Update to the Inpatient Hospital Adjustment Factors and Update to the APR-DRG Weights
- PB25-76 Cell and Gene Therapy for Sickle Cell Disease
- PB25-74 January 2026 HIPAA Compliant Update to the Independent Audiology and Speech and Language Pathology Fee Schedule
- PB25-73 January 2026 HIPAA Compliant Update to the Rehabilitation Clinic Fee Schedule
- PB25-72 January 2026 HIPAA Compliant Update—Medical Equipment Devices and Supplies Fee Schedules
- PB25-71 January 2026 HIPAA Compliant Update—Laboratory Fee Schedule
- PB25-70 January 2026 HIPAA Compliant Update-Physician-Office And Outpatient, and Physician Surgery Fee Schedules 2. Physician Administered Drug Reimbursement Updates
- PB25-69 January 2026 Quarterly HIPAA Compliant Update-Independent Radiology and Physician-Radiology Fee Schedules
- PB25-68 Updates to the Reimbursement Rates for Select Long-Acting Reversible Contraceptive Devices
- PB25-67 Rate Increases for Select Home Health and Home and Community Based Services (HCBS) Effective January 1, 2026
- PB25-66 Maternity Bundle Payment Program-Performance Year 2
- PB25-65 Medical Nutrition Therapy—Billing Update
- PB25-64 Prescription 30-Day Supply and Returns
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- PB25-62 1) January 1, 2026 changes to the Connecticut Medicaid Preferred Drug List (PDL) 2) Reminder Regarding the 5-day Emergency Supply 3) Billing Clarification for Brand Name Medications on the Preferred Drug List (PDL) 4) Pharmacy Web PA Tool
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