

# interChange Provider Important Message

**Attention: Behavioral Health Federally Qualified Health Centers (FQHCs)**

**RE: Elimination of Co-payments for Behavioral Health Services Rendered to HUSKY B Members**

The Department of Social Services (DSS) is sending this important message to notify providers that an issue has been identified with claims processing where a \$10.00 co-pay amount was inappropriately deducted from Behavioral Health (BH) FQHC claims. DXC Technology will be identifying and reprocessing claims to correct the issue in a future claim cycle.

Please remember that effective for dates of service September 1, 2018 and forward, the co-payment requirement is discontinued for all behavioral health (BH) services rendered to HUSKY B members under the Connecticut Medical Assistance Program (CMAP). Providers must **not** collect the \$10.00 co-payment for BH services. This change applies to BH services rendered in all outpatient settings performed by all enrolled CMAP providers for which there was previously a \$10.00 co-payment requirement for HUSKY B members.

If a provider charged the \$10.00 co-pay for a Behavioral Health service to a HUSKY B member from September 1, 2018 through October 5, 2018, the provider must refund the total of any such co-pay amounts to the member. Members are no longer required to make the co-payment as of September 1, 2018. Failure to refund the co-payments will effectively result in an overpayment; once the subject claims have been reprocessed, the co-pay amount will not be deducted from the reprocessed claim. We appreciate that this process will pose some inconvenience for providers, but it is a necessary step to ensure members are not charged for services incorrectly and to ensure compliance with Centers for Medicare and Medicaid Services (CMS) mental health parity requirements for HUSKY B.

