

# interChange Provider Important Message

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

**Reminder: Please refer to Provider Bulletin [2025-48](#) “Performing Providers Required for Behavioral Health Federally Qualified Health Centers (FQHCs)” regarding upcoming changes**

- A. Effective for dates of service February 1, 2026 and forward the Department of Social Services (DSS) is implementing new system changes requiring all performing providers employed by or contracting with a Behavioral Health Federally Qualified Health Centers (FQHCs) who are rendering services to HUSKY Health members (HUSKY A, B, C and D) to (1) be enrolled in the Connecticut Medical Assistance Program (CMAP) and (2) to be associated to that FQHC for the claim date of service.
- B. **Non-enrolled Performing Providers:** If the performing provider is not currently actively enrolled in CMAP, please utilize the Gainwell Technologies Provider Enrollment Wizard located at [www.ctdssmap.com](http://www.ctdssmap.com) to enroll. From the Home page, go to “Provider”, then “Provider Enrollment”. Using the Enrollment Wizard, each provider not currently enrolled must choose to be enrolled as an “Individual practitioner” or “Employed/Contracted by an organization”. “Individual practitioners”, as well as all “Employed/Contracted by an organization” providers, will need to complete the “Members of Organization Panel” during the enrollment process in order to associate themselves with the BH FQHC for which they are a member. For more questions, please refer to bulletin PB 25-48.
- C. **Associating Performing Providers to FQHCs:** For organization members that are already enrolled, BH FQHCs will be required to review their members and associate them with the FQHC’s organization. The organization provider can use the “Maintain Organization Members” panel to view, separate or add members to their organization once logged in to their secure Web portal. These functions are only allowed to be performed by the organization’s local administrator (also commonly referred to as a master user). It is the organization’s responsibility to maintain proper member associations within their organization.

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D. **Claim Submission Requirements:** As a reminder, effective with dates of service February 1, 2026 and forward, claims will no longer post and pay; instead, they will deny if a valid performing provider's NPI is not included on the claim. FQHC claims that do not include a valid performing provider's NPI number, or the performing provider NPI is not associated to the billing provider number, will receive claim denials with the following Explanation of Benefit (EOB) code(s):

- 0231 - Performing Provider is Missing EOB code
- 1007 - The Performing Provider is Not on File
- 1008 - Performing Provider Must Have an Individual Number
- 1010 - Performing Provider is Not a Member of the Billing Provider Group
- 1011 - Performing Provider Number Not a Valid Format Performing provider

Performing provider's NPI should be entered in the following sections of an electronic claim:

837P - Health Care Claim Professional

- NPI Segment ID = NM109
- NPI Loop ID = 2420
- Qualifier = 82

[For claims submitted via the secure web portal located on the www.ctdssmap.com Web site, the performing provider information is entered at the detail level as shown below:](http://www.ctdssmap.com)

Detail							
Item	From DOS	To DOS	Procedure	Units	Charges	Status	#
A	1			1.00	\$0.00		

  

Item	1
From DOS*	<input type="text"/>
To DOS*	<input type="text"/>
Procedure*	<input type="text"/> [ Search ]
Modifiers	<input type="text"/> [ Search ] <input type="text"/> [ Search ]
Units*	1.00
Facility Type Code*	<input type="text"/> [ Search ]
Charges*	\$0.00
Rendering Physician	<input type="text"/> [ Search ]
Referring Provider	<input type="text"/> [ Search ]
Ordering Provider	<input type="text"/> [ Search ]

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\* Individuals Not Licensed to Practice Independently When Providing Behavioral Health Services in BH FQHC Setting.

These individuals cannot enroll in CMAP.

When the claim is billed, the supervising provider must be entered as the rendering provider if the services were rendered by an individual not licensed to practice independently. For additional information on individuals not licensed to practice independently, please refer to provider bulletin [2019-18](#) "Supervision of Individuals Not Licensed to Practice Independently When Providing Behavioral Health Services in Clinic Settings."