

interChange Provider Important Message

Reimbursement for Medical Equipment Devices and Supplies (MEDS) and Durable Medical Equipment (DME) for Outpatient Hospitals and Outpatient Chronic Disease Hospitals

Effective for dates of service September 1, 2023 and forward, the Department of Social Services is updating the Connecticut Medical Assistance Program (CMAP) Addendum B to expand the number of MEDS/DME procedure codes that are payable to outpatient hospitals and outpatient chronic disease hospitals. Outpatient hospitals and outpatient chronic disease hospitals must continue to follow the CMAP Addendum B for coverage and reimbursement of all outpatient hospital services. Reimbursement for the following procedure codes will be based on the current fee listed on the applicable MEDS/DME fee schedule.

Effective for dates of service September 1, 2023 and forward the following procedure codes will be update on CMAP Addendum B:

E0100	E0130	E0153
E0105	E0135	E0154
E0110	E0140	E0155
E0111	E0141	E0156
E0112	E0143	E0157
E0113	E0144	E0158
E0114	E0147	L3710
E0116	E0148	
E0118	E0149	

Please Note: MEDS/DME vendors are not eligible to bill for MEDS/DME items provided to a CMAP member when the CMAP member is in the emergency room or outpatient hospital.