

interChange Provider Important Message

Hospital Monthly Important Message Updated as of **4/11/2023**

*All red text is new for 4/11/2023

CMAP Addendum B April 2023

The Department of Social Services (DSS) is in the process of updating the Connecticut Medical Assistance Program (CMAP) Addendum B to incorporate the 2022 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) for dates of service April 1, 2023 and forward to remain compliant with the Health Insurance Portability and Accountability Act (HIPAA).

An updated PDF and Excel version of Connecticut Medical Assistance Program (CMAP) Addendum B V23.0 will be posted to the Hospital Modernization page on the www.ctdssmap.com Web site. Payment rate changes for procedure codes assigned a status indicator G or K were updated and loaded into the system on March 31, 2023 with an April 1, 2023 effective date for dates of service April 1, 2023 and forward.

Any procedure code that is “NEW”, changed or deleted will be updated in the near future.

Provider Bulletins

Note that the following reflects an overview of provider bulletins distributed since the last Hospital Monthly Important Message was posted. Hospitals should use the links presented below to review the full bulletin.

Provider Bulletin [2023-13](#) - 2023 Revision of Rates for Certain Clinical Diagnostic Laboratory Testing Codes

Effective for dates of service retroactive to January 1, 2023, and forward, the Connecticut Medical Assistance Program (CMAP) Department of Social Services (DSS) is adjusting the reimbursement for certain clinical diagnostic laboratory services. This update is being made to comply with federal Medicaid law (42 U.S.C. § 1396b(i)(7)), which prohibits state Medicaid programs from paying more than Medicare would pay for any laboratory service.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2023-15](#) - New Hepatitis C Policy

The purpose of this bulletin is to notify providers of the upcoming change that is effective April 5, 2023. The Department of Social Services (DSS) will now allow pharmacy claims to process for twenty eight (28) days of medication or less for the treatment of Hepatitis C per fill. This is a change in our previous policy to limit the days supply on a pharmacy claim for fourteen (14) days of medication or less. Hepatitis C medications will continue to require prior authorization.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2023-18](#) - New Guidance for Services Rendered via Telehealth under the Connecticut Medical Assistance Program (CMAP)

Effective for dates of service on and after May 12, 2023, which is the first day after the federal COVID-19 public health emergency declaration ends, in accordance with sections 17b-245e and 17b-245g of

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the Connecticut General Statutes, the Department of Social Services (DSS) is issuing new guidance for services eligible for reimbursement under the Connecticut Medical Assistance Program (CMAP) when rendered via telehealth. Telehealth services include synchronized audio-visual (telemedicine) two-way communication services and, where specified by DSS, audio-only two-way synchronized communication services delivered via telephone. This guidance applies to services rendered under CMAP to HUSKY A, B, C and D members.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2023-19](#) - Reinstating Non-Emergency Medical Transportation and Non-Emergency Ambulance Transportation

Effective for dates of service on and after May 12, 2023, which is the first day after the end of the federal COVID-19 public health emergency, the Department of Social Services (DSS) restrictions imposed for nonemergency medical transportation and nonemergency ambulance transportation due to the public health emergency will be rescinded.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2023-20](#) - COVID-19 Laboratory Testing Coverage

Effective for dates of service May 12, 2023 and forward the Department of Social Services (DSS) will continue to provide reimbursement for COVID-19 laboratory testing codes as specified on the Independent Laboratory fee schedule.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2023-21](#) - Reminder: Prior Authorization for Inpatient Elective Admissions

As a reminder, prior authorization is required for all elective inpatient admissions. Failure to obtain prior authorization for an elective inpatient admission is NOT a valid reason for submitting the request through the medical authorization portal as an emergent inpatient admission. A hospital should only submit an authorization/notification for an emergent admission related to an elective procedure if the observation/outpatient/extended stay admission is converted to an inpatient admission, in which case the notification is to be made within two business days.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2023-28](#) - Policy Updates and Changes to Clinical Review Criteria

The purpose of this provider bulletin is to notify enrolled Connecticut Medical Assistance Program (CMAP) providers of upcoming policy changes to clinical review criteria for certain medical services and items.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2023-29](#) - New Eligibility Group - State Funded Postpartum Care for Non-Citizens

The Connecticut General Assembly enacted legislation (PA 21-176, §2) to expand access to health care to immigrant populations and improve birth outcomes of Connecticut residents. Pursuant to this legislation, the Department of Social Services (DSS) will be adding a new eligibility group, State Medical Postpartum, effective April 1, 2023.

Please refer to the provider bulletin for additional information.

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TPL Audit Report - March 2023

The Third-Party Liability (TPL) Audit reports were sent to the following hospitals on April 1, 2023.

- Bridgeport Hospital
- Charlotte Hungerford Hospital
- Connecticut Children's Medical Center
- The Danbury Hospital
- Griffin Hospital
- Middlesex Hospital
- Mount Sinai Rehabilitation Hospital Inc
- Saint Francis Hospital and Medical Center
- Vassar Health Connecticut, Inc

Re-enrollment Reminder for Hospitals

Hospital providers are reminded to take note of their re-enrollment due date with CMAP. Failure to complete and submit their re-enrollment application in enough time to allow for review by DSS by **the re-enrollment due date** will cause the hospital to be dis-enrolled on the re-enrollment due date.

Dis-enrollment will impact claims processing and the hospitals' ability to verify eligibility until the re-enrollment has been completed.

The following hospitals have re-enrollment due dates coming up in the near future:

- Norwalk Hospital Association - Inpatient - 6/25/23

Reminders/Upcoming Changes

Inpatient Claims DRG Assignment Issue on Claims that initially suspended

Gainwell Technologies has identified an issue for inpatient sterilization claims that initially suspended, where DRG assignment is incorrect on the recycled claims. A system change is in process. When corrected, Gainwell will identify and re-process any claims that processed incorrectly. An important message will be posted when the issue has been corrected, and claims are scheduled for re-processing.

Gainwell Technologies identified an issue where claims did not assign the DRG using the primary diagnosis code. Providers were notified via a banner page message. The impacted claims were identified and reprocessed and appeared on the impacted providers' March 28, 2023 Remittance Advice (RA) with an Internal Control Number (ICN) beginning with region code 52.

ctxihospipay Email Box

As a reminder, hospitals should direct their inquiries to the Provider Assistance Center at 1-800-842-8440. If hospitals are experiencing extended call wait times, hospitals may email the provider assistance call center with their question at ctdssmap-provideremail@gainwelltechnologies.com. Please be sure to include your name and phone number with your inquiry.

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The ctxixhosppay@gainwelltechnologies.com email box should only be used to submit APC and DRG related questions. All other inquiries will be re-directed to the Provider Assistance Center at 1-800-842-8440.