

interChange Provider Important Message

Hospital Monthly Important Message Updated as of 5/19/2025

*All red text is new for 5/19/25

CMAP Addendum B April 2025

The April version of CMAP Addendum B has been updated and posted to the Hospital Modernization page on the www.ctdssmap.com Web site. An important message was posted on April 30, 2025 to announce the updates. Attention Outpatient Hospitals: CMAP Addendum B Updated.

The Department of Social Services (DSS) and Gainwell has updated the Connecticut Medical Assistance Program (CMAP) Addendum B to incorporate the 2025 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions, and description changes) for dates of service April 1, 2025 and forward to remain compliant with the Health Insurance Portability and Accountability Act (HIPAA). These updates have been made, an updated PDF and Excel version of Connecticut Medical Assistance Program (CMAP) Addendum B V26.1 has been 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 April 3, 2025 with an effective date for dates of service April 1, 2025 and forward.

The changes can be identified by the following indicators:

- “G or K” - A change has been made to the payment rate (status indicator G or K).
- “New” - The procedure code was added by CMS.
- “X” - A change has been made to the procedure code or status indicator.

Older versions of CMAP Addendum B can be found under the Hospital Modernization page under “CMAP Addendum B Changes and Historical Versions.”

Quarterly ICD-10 Updates

Quarterly ICD-10 updates will be made effective for April 1st. There are 50 ICD-10 surgical codes being added and 5 being discontinued. New codes will now be recognized with the new diagnosis grouper installed.

3M Grouper Updates

The Diagnosis Related Grouper (DRG) was implemented on April 30, 2025. Claims submitted on and after 4/30/25 with DOS 4/1/25 and after will use the new version of the grouper. Although this is a new version of the grouper, **there are no changes to DRG rates or weights.**



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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 [2025-09](#) - Important Reminder Concerning Ownership Changes

Important reminder concerning ownership changes: due to board changes, stock exchange/sale, practice sale changes in leadership and all other transactions that change the ownership or change any ownership of 5% or greater.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2025-16](#) - Pharmacists Prescribing and Dispensing Emergency or Hormonal Contraceptives

Effective May 1, 2025, certified pharmacists who have completed the required training program that meets the requirements of Public Act No. 23-52 and is accredited by the Accreditation Council for Pharmacy Education (ACPE) to prescribe and dispense emergency or hormonal contraceptives may submit their NPI as the prescribing provider's NPI on claims submitted to the Connecticut Medical Assistance Program (CMAP).

Please refer to the provider bulletin for additional information.

Provider Bulletin [2025-17](#) - New Fasenra (benralizumab) and Xolair (omalizumab) Prior Authorization Clinical Criteria Requirements

Effective June 1, 2025, the Department of Social Services (DSS) will implement a Prior Authorization (PA) requirement for prescription benefit coverage of benralizumab injection, marketed as Fasenra, and omalizumab injection, marketed as Xolair, for HUSKY A, C, and D members.

The latest form can be found on the following links: [Fasenra Prior Authorization Form](#) or the [Xolair Prior Authorization Form](#) as well as at www.ctdssmap.com under the pharmacy information tab.

Please refer to the provider bulletin for additional information.

TPL Audit Report - May 2025

The Third-Party Liability (TPL) Audit reports were sent to the following hospitals on May 1, 2025.

- Saint Vincent's Medical Center

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TPL Audit Letters and Reports

Effective June 1, 2025, Third Party Liability (TPL) Audit Letters and Reports will be electronically delivered to providers who have established Secure Web portal accounts. Any provider who has not yet established their Secure Web portal accounts, or for which a unique Secure Web portal account cannot be determined, will continue to receive these letters via USPS. The update will be announced and instructions for downloading will be sent to all providers through an Important Message in the near future.

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 reenrollment has been completed.

The following hospitals have re-enrollment due dates coming up in the next **6 months**:

- Bridgeport Hospital - Outpatient - 8/13/2025
- Yale New Haven Hospital - Outpatient - 8/20/2025

Reminders/Upcoming Changes

Newborn Form W-416 Delays

The typical turnaround time is 24 hours for processing this form. If after 3 business days hospitals do not see the newborn's client ID and are not able to find it on www.ctdssmap.com, hospitals have been instructed to contact the benefit center or email ExpeditedHusky.DSS@ct.gov.

Written Correspondence

For timely filing appeals, the hospital provider can do one of the following three (3) things:

Submit all claims on paper to Gainwell Technologies by

- FAX: 1-877-413-4241
- EMAIL: ctdssmap-provideremail@gainwelltechnologies.com
- MAIL: Written Correspondence - PO Box 2991 - Hartford, CT 06104.

Make sure that a cover letter is attached and that you state the reason why you are sending in the claims on paper.



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Claim Denials

If your claim denies please refer to Provider Manual Chapter 12 “[Claim Resolution Guide](#)”. This chapter provides a detailed description of the cause of the Explanation of Benefit (EOB) code and more importantly, the necessary correction to the claim, if appropriate, in order to resolve the error condition. If you need additional assistance, please contact the Provider Assistance Center at 1-800- 842-8440 and if PAC is unable to assist, then they will escalate your inquiry.

ctxixhosppay 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.

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

Holiday Closures

Please be advised, that the Department of Social Services (DSS) and Gainwell Technologies’ offices will be closed on Monday, May 26, 2025 in observance of the Memorial Day Holiday; the Department of Social Services (DSS) and Gainwell Technologies will re-open on Tuesday, May 27, 2025.

