

interChange Provider Important Message

Hospital Monthly Important Message Updated as of 06/07/2021

*all red text is new for 06/07/2021

CMAP Addendum B April 2021

The Department of Social Services (DSS) has updated the Connecticut Medical Assistance Program (CMAP) Addendum B to incorporate the 2021 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) for dates of service April 1, 2021 and forward to remain compliant with the Health Insurance Portability and Accountability Act (HIPAA).

Payment rate changes for procedure codes assigned a status indicator G or K were updated and loaded into the system on March 30, 2021 with an April 1, 2021 effective date for dates of service April 1, 2021 and forward. Gainwell Technologies has determined there were no outpatient claims that processed with the incorrect payment for dates of services April 1, 2021 and forward.

Any procedure code that is “NEW”, changed or deleted with an effective date of April 1, 2021 and forward was updated on April 27, 2021.

The following procedure code on the April 2021 CMAP Addendum B has an effective date of January 1, 2021: M0245 “Bamlan and etesev infusion”.

Reimbursement rate for the Covie-19 Vaccine Administration code 0001A was updated to \$40.00 on May 27,2021 retroactive to March 15, 2021. Claims for the retroactive rate adjustment will be mass adjusted in a future cycle.

Gainwell Technologies Reprocessing

Gainwell Technologies identified an issue with claims submitted with diagnosis code J1282 for through dates of service from January 1, 2021 and forward which processed up to May 11, 2021. The claims reimbursed at a lower severity of illness (SOI) than expected. The issue was corrected and the impacted claims were reprocessed. The reprocessed claims appeared on the hospital’s May 25, 2021 Remittance Advice (RA) with an Internal Control Number (ICN) beginning with region code 52.

Gainwell Technologies re-processed denied outpatient claims for COVID Vaccine Administration codes billed with RCC 770 for 0001A, 0002A, 0011A, 0012A that were retroactively added to Addendum B. Denied claims for procedure codes 0001A and 0002A for dates of service 12/11/2020 and forward as well as procedure codes 0011A and 0012A for dates of service 12/18/2020 forward will be re-processed in the June 4, 2021 claim cycle. The re-processed claims appear on the June 8, 2021 Remittance Advice (RA) with an Internal Control Number (ICN) beginning with region code 27.

Inpatient DRG Claims Reimbursing at a Lower Severity of Illness (SOI)

J1282 is a diagnosis code effective January 1, 2021. However, the 3M grouper has not been updated to include any new diagnoses as of January 1, 2021. As a result, the inpatient claims submitted with the diagnosis code are processing at a lower SOI. The grouper is normally updated in the month of October when these claims will be reprocessed. The hospitals are requesting for an earlier resolution as this issue is causing them a loss in reimbursement. (Please see the Reprocessing information above)

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Provider Bulletins

Provider Bulletin 2021-32 - Reinstatement of Copayments for Medical Services Rendered to HUSKY B Members

Effective for dates of service May 21, 2021 and forward, the copayment requirements for medical services rendered to HUSKY B members that were temporarily suspended as part of the Public Health Emergency (PHE) response to COVID-19 as outlined in PB 2020- 15 “CMAP COVID-19 Response - Bulletin 5 - Elimination of Copayments for Services Rendered to HUSKY B Members” will be reinstated. Copayments will be reinstated due to the current state PHE declaration and the relevant associated executive order (EO) 7I, Section 3, expiring May 20, 2021.

Provider Bulletin 2021-34 - CMAP COVID-19 Response - Bulletin 54: ADDITIONAL Services Covered under the “COVID-19 Testing Group”

Effective retroactive to March 11, 2021 and ending on the last day of the first calendar quarter that begins one year after the last day of the federal Public Health Emergency (PHE) period, the Department of Social Services (DSS) is adding coverage for the following services under the optional Medicaid coverage group, “COVID-19 Testing Group”:

- COVID-19 Treatment Services including specialized equipment and therapies (including preventive therapies) and treatment of a condition that may seriously complicate treatment of COVID-19 for those presumed to have or have been diagnosed with COVID-19, and
- COVID-19 Vaccine Administration.

Providers must continue to refer to *PB 2020-42 “CMAP COVID-19 Response - Bulletin 27: New COVID-19 Coverage Group for Uninsured Residents”*, and *PB 2020-48 “CMAP COVID-19 Response - Bulletin 32: Services Covered under the Optional Medicaid Coverage Group “COVID19 Testing Group” for Uninsured Connecticut Residents”* for additional details regarding eligibility and testing services that are payable.

Provider Bulletin 2021-36 - Electronic Claims Submission, Web Remittance Advice, Check, EFT and 835 Schedule (HUSKY Health Program)

The Department of Social Services (DSS) and Gainwell Technologies are publishing the Connecticut Medical Assistance Program Electronic Claims Submission, Remittance Advice (RA), Check and Electronic Funds Transfer (EFT) issue dates and 835 schedule for the benefit of the provider community.

Provider Bulletin 2021-40 - Revised Diagnostic Related Group (DRG) Coding Reviews

The Department of Social Services (DSS) has been conducting reviews of inpatient hospital claims paid under a Diagnostic Related Group (DRG) methodology to ensure DSS is reimbursing the proper amount for these claims in conformance with Medicaid and DSS policy. These post payment reviews are conducted by DSS’ contractor, Health Management Systems, Inc. (HMS).

For those claims HMS identifies as improperly overpaid, DSS will initiate a partial recoupment of the claim payment rather than the claims being fully recouped. The paid amount will be recalculated by deducting the recoupment amount from the detail paid amount on the claim.

Inpatient claims that are identified and reprocessed will be assigned an Internal Control Number (ICN) beginning with a region code 60 “HMS Adjustment” and Explanation of Benefit (EOB) code 8228 “HMS - DRG Coding Review Adjustment. Contact HMS at 866-206- 6855” on the provider’s PDF Remittance Advice (RA).

Provider Bulletin 2021-41 - Pediatric Inpatient Psychiatric Services

To: Connecticut General Hospitals, Private Psychiatric Hospitals, Chronic Disease Hospitals,

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Children's General Hospitals

Effective for the dates of service indicated below, the Department of Social Services (DSS) will implement the following two interim rate add-on policies through a Coronavirus Disease 2019 (COVID-19) Disaster Relief Medicaid State Plan Amendment (SPA) in order to expedite the implementation of these policies and to help address the unmet need for pediatric inpatient psychiatric services that has significantly worsened due to COVID-19. Federal rules allow a disaster relief SPA to be in effect no longer than the end of the federal public health emergency (PHE). If the federal COVID-19 PHE ends prior to June 30, 2022, the Department plans to submit a standard SPA at the end of the federal PHE to sustain these payment policies through June 30, 2022.

1. Interim Rate Add-On for Increasing Needed Capacity: Effective for dates of service from June 1, 2021 through June 30, 2022, Connecticut hospitals may be eligible for a rate add-on to the per diem rate based on their ability set forth in the bulletin.

2. Interim Rate Add-On for Acuity: Effective for dates of service from July 1, 2021 through June 30, 2022, hospitals that bill using the per diem rate for such services and psychiatric hospitals may be eligible for an acuity-based rate add-on to the applicable per diem rate if authorized by the behavioral health ASO in accordance with the standards set in the bulletin.

3. Proposed Future Value-Based Payment Model: Effective for dates of service on and after July 1, 2022, all short-term general hospitals, short-term children's general hospitals, private psychiatric hospitals, and chronic disease hospitals in Connecticut that provide pediatric inpatient psychiatric services may voluntarily choose to participate in the value-based payment (VBP) program, which is currently under development.

Reminders/Updates:

COVID-19 (Coronavirus) Information and Frequently Asked Questions (FAQs) - (Updated 5/27/2021) Important Message

The FAQ document is located on the www.ctdssmap.com Web page on the home page under Important Messages.

Appendix 1 - This spreadsheet lists the procedure codes, and when applicable the revenue center codes that are eligible to be billed when performed as via telemedicine (synchronized audio and visual) or telephonically (audio-only) during the Temporary Effective Period in response to COVID-19. Hospitals must refer to the corresponding provider bulletins for billing guidance, including effective dates and applicable fee schedules. Hospitals must continue to follow CMAP Addendum B regarding reimbursement.

TPL Audit Report - June 2021

The Third-Party Liability (TPL) Audit reports were sent to the following hospitals on June 1, 2021: Danbury Hospital, Bridgeport Hospital, and Hartford Hospital.

Re-enrollment Reminder for Hospitals

The hospitals 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 and no claims after that date will be allowed until the re-enrollment is completed.

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This 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:

- The Griffin Hospital - inpatient hospital - 09/06/2021

Holiday Closure

Please be advised that the Department of Social Services (DSS) and Gainwell Technologies will be closed on Monday, July 5, 2021 in observance of the Independence Day holiday. Both DSS and Gainwell Technologies offices will re-open on Tuesday, July 6, 2021.