

interChange Provider Important Message

Hospital Monthly Important Message Updated as of 8/9/22

*all red text is new for 8/9/22

CMAP Addendum B July 2022

The Department of Social Services (DSS) has updated 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 **July 1, 2022** 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 **V23.2** have 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 **June 27, 2022** with a **July 1, 2022** effective date for dates of service **July 1, 2022** and forward.

Any procedure code that is “NEW”, changed or deleted **were** updated on **July 27, 2022**.

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

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 [2022-56](#) - Covered CT Program

The Connecticut Department of Social Services (DSS) is pleased to announce the Covered CT program. Covered CT is a program that covers out of pocket costs, nonemergency medical transportation (NEMT) and dental services for certain income-eligible individuals who purchase coverage through Access Health. In partnership with the Office of Health Strategy and federal Medicaid Partners (pending approval) DSS is responsible for covering these costs resulting in zero out-of-pocket coverage for eligible individuals.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2022-60](#) - CMAP COVID-19 Response Bulletin 61: COVID-19 Vaccine Administration: Additional Adult and Pediatric Booster Codes and Vaccinations for Members 6 Months to Four Years of Age

Consistent with the applicable Food and Drug Administration (FDA) Emergency Use Authorizations (EUA), effective for dates as specified below, and through the end of the federal public health emergency (PHE), the Department of Social Services (DSS) will reimburse for the administration of the following COVID-19 vaccine administration procedure codes at the Medicare rate.

Please refer to the provider bulletin for additional information.

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Provider Bulletin [2022-62](#) - Paxlovid Prescribing by Pharmacists

The U.S. Food and Drug Administration (FDA) recently revised the Emergency Use Authorization (EUA) for Paxlovid (nirmatrelvir and ritonavir), to authorize pharmacists to prescribe Paxlovid to eligible patients, with certain limitations to ensure appropriate patient assessment and prescribing of Paxlovid.

Effective 08/03/2022, pharmacists can prescribe and dispense to a patient a maximum of a 5 day supply of Paxlovid based on the below FDA guidance.

Please refer to the provider bulletin for additional information.

TPL Audit Report - August 2022

The Third-Party Liability (TPL) Audit reports were sent to the following hospitals on **August 1, 2022**.

- Bridgeport Hospital
- Danbury Hospital
- Lawrence and Memorial Hospital
- Prospect Rockville Hospital, Inc

As a reminder, failure to respond to an audit will result in a recoupment of claims. Any claims recouped can be identified by as having an Internal Control Number (ICN) starting with region code 52 and the Explanation of Benefit (EOB) code 8282 - CLAIM HAS BEEN RECOUPED DUE TO TPL AUDIT FAILURE.

Additionally, providers can view/modify the address that letters are mailed to via the Secure Web portal accounts. For additional information on maintaining address data, providers should refer to Chapter 10, available under Information > Publications on the www.ctdssmap.com Web site.

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.

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:

- William C Backus Hospital - Outpatient - 10/23/2022

Reminders/Upcoming Changes

Reminder on Billing Requirements for Clients Transferring from Medical to Psychiatric Unit

Hospital providers are reminded that in order to avoid claim denials, the following process must be followed with regards to clients transferring from medical to psychiatric units. If the client is subsequently transferred to a psychiatric unit, the hospital should administratively discharge (Patient Status 65) the client from medical and re-admit the client to behavioral health (Admit

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Source D) to qualify for the per diem rate for the behavioral health portion of the stay. There are related instructions in Chapter 8 Hospital of the provider manual.

Trauma Questionnaire Responses

Hospitals who wish to submit Trauma Questionnaire Responses may fax them to 1-833-577-3519 or email them to CTXIX-TraumaMailbox@gainwelltechnologies.com. If providers wish to continue sending those responses on paper, please be sure to include the trauma questionnaire letter you received and place that immediately behind the documentation regarding the claim. Additionally, the information should be unstapled.

Transition to Gainwell Technologies for *ctxixhosppay* Email Box

Gainwell Technologies is pleased to announce that the hospital email box has migrated to @gainwelltechnologies.com. While emails sent to ctxixhosppay@dxc.com will auto forward for a short period of time, hospitals are encouraged to begin using the ctxixhosppay@gainwelltechnologies.com email address. Documentation, such as the Hospital Modernization page, has also been updated to reflect the correct email address. As a reminder, hospitals should direct most of 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 be used to submit APC and DRG related questions only. All other inquiries should be directed to the Provider Assistance Center at 1-800-842-8440.

Holiday Closures

Please be advised, the Department of Social Services (DSS) and Gainwell Technologies will be closed on Monday, September 5, 2022 in observance of the Labor Day holiday. Both the DSS' and Gainwell Technologies' offices will re-open on Tuesday, September 6, 2022.