## interChange Provider Important Message

### Hospital Monthly Important Message Updated as of 9/12/23

\*All red text is new for 9/12/23

### CMAP Addendum B July 2023

The Department of Social Services (DSS) is in the process of updating the Connecticut Medical Assistance Program (CMAP) Addendum B to incorporate the 2023 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) for dates of service July 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 V24.1 was posted 7/25/2023 to the Hospital Modernization page on the <u>www.ctdssmap.com</u> 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, 2023 with an effective date for dates of service July 1, 2023 and forward.

Any procedure code that is "NEW", changed or deleted were implemented on July 26, 2023.

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.

The April changes and older versions of CMAP Addendum B can be found on the Hospital Modernization page under "CMAP Addendum B Changes and Historical Versions."

Addendum B UPDATE: There were 25 DME codes that were updated and made payable on CMAP Addendum B with an effective date of 9/1/2023. The change column for these new codes will have an "X". Reimbursement for the updated procedure codes is based on the current fee listed on the applicable MEDS/DME fee schedule. Hospitals must continue to follow the CMAPs Addendum B for coverage and reimbursement of all outpatient hospital services.

Accessing the Fee Schedule: The fee schedule can be accessed and downloaded by accessing the Connecticut Medical Assistance Program (CMAP) Web site: <u>www.ctdssmap.com</u>. From this Web page, go to "Provider", then to "Provider Fee Schedule Download". Click on the "I accept" button and proceed to click on the appropriate fee schedule. To access the CSV file, press the control key while clicking the CSV link, then select "Open". Select the MEDS - DME schedule.

#### Provider Bulletins

**Provider Bulletin** <u>2023-56</u> Attestation Requirement for Behavioral Health Clinician Groups and Behavioral Health Licensed Clinicians

Electronic Signature Process IS Live! Providers ability to sign the attestation electronically is now available. Providers MUST attest online going forward. All paper copies of the attestation form will not be acceptable UNLESS you are actively submitting an enrollment or re-enrollment application at this time.

On July 6, 2023, letters started to be sent out in <u>a phased approach</u> to roll out the new required attestation process to all behavioral health providers. This attestation is required of all licensed,



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enrolled behavioral health providers (type 33) independently practicing or working under a behavioral health group, <u>hospital</u>, FQHC or clinic. The attestation form will also be required of behavioral health group (type 86) owners. The attestation requirement applies both to services rendered personally by an independently licensed behavioral health clinician (licensed psychologists, LCSWs, LMFTs, LPCs, LADCs) and also to services provided by an associate licensed behavioral health clinician (licensed master social workers (LMSWs), licensed marital and family therapy associates (LMFT-As), and licensed professional counselor associates (LPC-As) working within such clinician's scope of practice under the supervision of an applicable qualified independent licensed behavioral health clinician who is authorized under state law to supervise each applicable category associate licensed practitioner. This does not pertain to associate BH Providers or LMSW's. Prior to signing the attestation providers are required to review training slides and watch the taped training before signing and submitting the attestation form.

The owner does not need to sign off on the BH attestation if a provider is affiliated with a hospital, only the licensed clinician signs the BH attestation.

#### 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.

No new bulletins

#### Important Messages

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

#### DME Reimbursement Outpatient Hospitals and CDH

Procedures for Updating Client Third Party Liability Information NEW HMS Phone Number: 1-866-252-0671 (Posted 6/7/23)

#### Third Party Liability Update Information

#### TPL Audit Report - August 2023

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

- BRISTOL HOSPITAL INC
- CONNECTICUT CHILDREN'S MEDICAL CENTER
- GAYLORD HOSPITAL INC
- HARTFORD HOSPITAL
- MIDSTATE MEDICAL CENTER
- THE HOSPITAL OF CENTRAL CONNECTICUT
- YALE NEW HAVEN HOSPITAL

#### 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 <u>the</u> <u>re-enrollment due date</u> 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.



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

- Bridgeport Hospital Inc Inpatient 9/26/2023 (2)
- Greenwich Hospital Outpatient 9/23/23
- Hartford Hospital Inpatient 10/23/23
- Yale New Haven Hospital Inpatient 9/28/23 (2)

#### **Reminders/Upcoming Changes**

Inpatient Hospital Fee Schedule for Organ Acquisition Cost

Hospitals are reminded that the Inpatient Hospital Fee Schedule for Organ Acquisition Cost can be found on the <u>www.ctdssmap.com</u> Web site under Provider > Provider Fee Schedule Download. Once on that page, select I Accept and scroll down to select the Hospital DRG Organ Acquisition pdf file.

The following chart is effective for 7/1/2023.

Organ Acqui	sition Chart - SFY 2	2024

Organ	In-State	Out Of State	
Kidney	\$87,107	\$87,107	
Heart	\$162,517	\$162,517	
Liver	\$139,351	\$139,351	
Pancreas	See Below	See Below	
Lung	See Below	See Below	
Payment will be the lower of charges or			
state wide average.			
For lung or pancreas acquisition, must			
submit most recent Medicare cost report			
submitted to CMS.			

#### 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 <u>ctdssmap-provideremail@gainwelltechnologies.com</u>. Please be sure to include your name and phone number with your inquiry.

The <u>ctxixhosppay@gainwelltechnologies.com</u> 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.

### Holiday Closures

Please be advised that DSS and Gainwell Technologies will be closed on Monday, October 9, 2023 in observance of Columbus Day. DSS & Gainwell Technologies will re-open on Tuesday, October 10, 2023.

