

interChange Provider Important Message

Hospital Monthly Important Message Updated as of 12/13/22

*all red text is new for 12/13/22

CMAP Addendum B October 2022

The October version of CMAP Addendum B has been posted to the Hospital Modernization page on the www.ctdssmap.com Web site.

Please note that the October version of CMAP Addendum B also reflects the following additional Procedure Codes:

- CPT code 90677 was added effective 1/1/22
- CPT codes 90611 and 90622 were added effective 10/1/22; when billing with these codes, providers must include both the procedure code for the vaccine administration with Revenue Center Code 770 “Prevent Care Svs” and the procedure code for the vaccine product with the National Drug Code - NDC (ages 18+)

Annual 3M Grouper Updates

International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Updates

The update to the ICD-10 (International Statistical Classification of Diseases) codes effective October 1, 2022 may cause inpatient Diagnostic Related Group (DRG) claims with header Through Date of Service (TDOS) October 1, 2022 and forward to suspend with either EOB code 0693 “Invalid Principal Diagnosis” or EOB code 0920 “3M Grouper Error” until the new 3M Grouper is loaded. The impacted claims have since been re-cycled for processing.

Diagnosis Related Grouper (DRG) October Updates

For the October 1, 2022 update, there were no new or deleted DRGs.

Diagnosis Related Grouper (DRG) January Updates - DRG Weight, Average Length of Stay (ALOS) and Outlier Threshold

Per the amendment to Attachment 4.19-A of the Medicaid State Plan, DSS shall pay for hospital inpatient services on a fully prospective per discharge basis using DRG-based payments. Diagnosis related groups will be assigned using the most recent version of the 3M All Patient Refined Diagnosis-Related Grouper (APR-DRG) with each new grouper version released by 3M being implemented the subsequent January 1st. DRG Weights, average length of stays and outlier thresholds for the new version will all have an effective date of January 1, 2023.

A provider bulletin will be distributed in December 2022 reminding hospitals of the annual update to the inpatient hospital adjustment factors and the APR-DRG weights, effective January 1, 2023. Once the DRG calculator has been updated and posted to the www.ctdssmap.com Web site with that most current information, additional provider notification will be distributed.

Annual Rates/Parameters for the Outpatient Payment Prospective System (OPPS)

Hospitals are reminded that they will receive their annual rates/parameters letter for the Outpatient Payment Prospective System (OPPS) in December.

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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 [2022-89](#) - 1) January 1, 2023 Changes to the Connecticut Medicaid Preferred Drug List (PDL)

The Pharmaceutical & Therapeutics (P&T) Committee has modified the list of preferred prescription products. The Committee has determined these preferred products as efficacious, safe, and cost-effective choices when prescribing for HUSKY A, HUSKY C, HUSKY D, Tuberculosis (TB), Emergency Medicaid Dialysis Service (EMDS), and Family Planning (FAMPL) clients. Effective January 1, 2023, changes (additions or removals) have been made to select drug classes. (Please note that the additions and removals listed refer to all strengths and dosage forms unless otherwise stated.)

Please refer to the provider bulletin for additional information.

Provider Bulletin [2022-89](#) - 2) Reminder About the 5-day Emergency Supply

In addition to the one-time 14-day temporary supply, DSS also allows for a 5-day emergency supply of a medication that requires PA for non-PDL or Brand Medically Necessary (BMN). If the pharmacist or prescriber is unable to obtain a PA and the client requires the medication after the one-time 14-day override has been used, the pharmacist may call the Pharmacy Prior Authorization Assistance Call Center, available 24 hours a day, 7 days a week, at 1-866-409-8386 to request a one-time 5-day emergency supply of the medication.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2022-89](#) - 3) Billing Clarification for Brand Name Medications on the Preferred Drug List (PDL)

This serves to provide clarification on billing requirements for a pharmacy when a brand name medication, which is identified as a preferred product on the Connecticut Medicaid PDL, is dispensed.

Please refer to the provider bulletin for additional information.

Provider Bulletin [2022-89](#) - 4) Pharmacy Web PA Tool

Actively enrolled prescribing providers and clerks affiliated to the prescriber can utilize the Pharmacy Web PA feature to:

Please refer to the provider bulletin for additional information.

Provider Bulletin [2022-90](#) - 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.

Please refer to the provider bulletin for additional information.

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TPL Audit Report - November 2022

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

- **Vassar Health Connecticut, Inc. - DBA Sharon Hospital**

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 of the Provider Manual, available under Information > Publications on the www.ctdssmap.com Web site.

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:

- **Connecticut Children's Medical Center - Inpatient - 3/2/23**
- Hospital for Special Care - Inpatient - 2/8/2023
- **Hospital for Special Care - Outpatient - 2/10/23**
- The Charlotte Hungerford Hospital - Outpatient - 2/27/2023
- Stamford Hospital - Inpatient - 1/26/2023
- Stamford Hospital - Inpatient - 2/6/2023

Reminders/Upcoming Changes

More COVID Vaccine Updates

Please note that DSS had made updates for additional COVID vaccinations as follows:

- CPT codes 91313, 91312, 0124A and 0134A were added effective 8/31/22
- CPT codes 91314, 91315, 0154A and 0144A were added effective 10/12/22

These codes will be viewable on the updated CMAP Addendum B. Providers will need to resubmit any claims previously denied with those codes.

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Monkeypox Testing/Vaccine Update

Providers should refer to PB [2022-70](#) for information on CPT code 87593 for laboratory testing. Providers should refer to the revised CMAP Addendum B for any vaccine updates once that is posted.

Medicaid Paid Claims Data

The Electronic Data Interchange (EDI) Unit answers questions regarding the HIPAA Electronic Transactions, Gainwell Technologies Provider Electronic Solution software, and electronic claims submission. Additional EDI information is available on the Trading Partner Page of the www.ctdssmap.com Web portal.

Please contact the EDI Help Desk toll free at 1-800-688-0503 Monday through Friday, 8:00 am to 5:00 pm, excluding holidays for any questions, including requests for Medicaid paid claims data.

Faxed inquiries should be directed to 1-877-413-4421.

APR DRG Assignment

In general, every complete inpatient stay is assigned to a single diagnosis related group (DRG) using a computerized algorithm that takes into account the patient's diagnoses, age, procedures performed, and discharge status. This DRG assignment, including outlier payment, is done by 3Ms Health Information Systems tool/software using the criteria submitted on the claim. If providers have questions about DRG assignment or concerns related to such things as DRG downgrades, providers should use the tool 3M has made available to hospitals. Providers will input several data elements on their claim to this tool to determine the correct APR DRG assignment that CMAP then use to price the claim.

APR DRG Assignment Tool

The tool is available on the Web site www.aprdrgassign.com. If the report that is generated from that once you enter all of the data shows a DRG assignment other than what has been assigned to the claim in CMAP, please submit that report to us for further review via the CMAP hospital email box.

DRG Calculator

Each DRG has a relative weight that reflects the typical hospital resources needed to care for a patient in that DRG relative to the hospital resources needed to take care of the average patient.

Base DRG payment is calculated by [Hospital Base Rate * DRG Weight]

As an additional resource to providers, **DRG Weight, Average Length of Stay (ALOS), and Outlier Threshold** for the DRG code are located on the DRG pricing calculator spreadsheet on a tab titled DRG Table CT. This is posted to the Web site www.ctdssmap.com on the Hospital Modernization page under the "DRG Calculator". The DRG weight and ALOS are national standards. The outlier thresholds were developed specifically for CT through the rate setting process. When there are questions about DRG pricing, providers should first refer to this DRG calculator tool for support.

Outlier Payments

For questions related to outlier payments, please see the outpatient Outliers Issue paper located on the DSS Reimbursement Page. Providers can access this by going to www.ctdssmap.com under the "Hospital Modernization" page. On the right side column, click on "DSS Reimbursement Home Page".

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Once on the DSS home page, click on Related Resources and then the link for “Hospital Payment Modernization (HPM) Issue Papers.” Once you click on the link, you will see a list of links. Click on the “Issue Paper - Outpatient Outliers”. This will give you information on how outlier payments are calculated.

Inpatient Hospital Fee Schedule for Organ Acquisition Cost

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

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. All other inquiries will be re-directed to the Provider Assistance Center at 1-800-842-8440.

Holiday Closures

Please be advised, that Gainwell Technologies will be closed on Friday, December 23, 2022 in observance of the Christmas Eve Holiday. Both the DSS’ and Gainwell Technologies’ offices will be closed on Monday, December 26, 2022 in observance of Christmas Day Holiday; the Department of Social Services (DSS) and Gainwell Technologies will re-open Tuesday, December 27, 2022.

Both the DSS’ and Gainwell Technologies’ offices will be closed on Monday, January 2, 2023 in observance of New Year’s Day Holiday; the Department of Social Services (DSS) and Gainwell Technologies will re-open Tuesday, January 3, 2023.