Connecticut Medical Assistance Program

Policy Transmittal 2020-44

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Provider Bulletin 2020-54 June 2020

Effective Date: April 1, 2020 Contact: Roberta.Cecil@ct.gov

TO: General Acute Care and Children's Hospitals

RE: CMAP COVID-19 Response – Bulletin 38: Increase in Inpatient Hospital Reimbursement for COVID-19 Claims Paid under the All Patient Refined-Diagnosis Related Group (APR-DRG) Methodology

This policy transmittal is to inform providers that, effective for discharges from April 1, 2020 through June 30, 2020, the base made under the payment APR-DRG methodology for a Medicaid patient diagnosed with COVID-19 will be increased The hospital must report the COVID-19 diagnosis code U07.1 on the claim to receive the increased payment.

All such inpatient claims submitted and paid prior to the issuance of this bulletin will be identified and reprocessed by DXC Technology at a later date. The Department of Social Services (DSS) will issue a separate Important Message notifying providers of when that will occur.

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Distribution: This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by DXC Technology.

Responsible Unit: DSS, Division of Health Services, Reimbursement Unit, Roberta Cecil at (860) 424-5932 or Roberta.Cecil@ct.gov.

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