

Connecticut Medical Assistance Program Policy Transmittal 2019-23

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Provider Bulletin 2019-55 September 2019

TO: Local Health Departments

RE: Newly Created Fee Schedule for Local Health Departments

Effective September 1, 2019, the Department of Social Services (DSS) has created a separate fee schedule for the provider type, "Local Health Departments" (LHDs). This separate fee schedule consists of every procedure code listed on the "Special Services" fee schedule under the Tuberculosis (TB) rate type. In the future, additional procedure codes may be added to the LHD fee schedule, as determined by DSS.

There is a footnote on the LHD fee schedule of the requirement that a TB diagnosis code must be listed as the primary diagnosis on all submitted claims. Select ICD-CM-10 diagnosis codes for TB can be found on Table 12: "Lists of ICD-10 CM Diagnosis Codes for Tuberculosis Eligibility Waiver" under the "Fee Schedule Instructions" on the Connecticut Medical Assistance Program (CMAP) Web Page.

Accessing the Fee Schedules:

Fee schedules can be accessed and downloaded from the CMAP Web site, <u>www.ctdssmap.com</u>. From the Home page, go to "Provider", then to "Provider Fee Schedule Download". Click on the "I accept" button and proceed to the appropriate fee schedule. To access the CSV file, press the control key while clicking the CSV link, then select "Open". For questions about billing or if further assistance is needed to access a fee schedule on the CMAP Web site, please contact the Provider Assistance Center (PAC), Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

Posting Instructions: Policy transmittals may be downloaded from the CMAP Web site, <u>www.ctdssmap.com</u>.

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