



Connecticut Medical Assistance Program
Policy Transmittal 2024-29

Provider Bulletin 2024-67
December 2024

Andrea Barton Reeves, J.D., Commissioner

Effective Date: January 1, 2025
Contact: See Below

TO: Connecticut General Hospitals, Private Psychiatric Hospitals, Chronic Disease Hospitals, Children's General Hospitals

RE: Pediatric Inpatient Psychiatric Services: Implementation of a Voluntary Value-Based Payment (VBP) Program

The Department of Social Services (DSS) is planning to implement a voluntary Value-Based Payment (VBP) program for Pediatric Inpatient Psychiatric Services in a phased-in approach. The initial phase will be for Connecticut General Hospitals and Private Psychiatric Hospitals effective January 1, 2027. Chronic Disease Hospitals and Children's General Hospitals will remain on current Interim Rate Add-On programs at this time. The effective date is a change from the 2025 effective date stated in provider bulletin PB [2023-63: Pediatric Inpatient Psychiatric Services: Interim Voluntary Value-Based Payment Opportunity for Increasing Needed Capacity and Interim Rate Add-On for Acuity and Revised Discharge Delay Policy item 4. Proposed Future Value-Based Payment Model](#). DSS is working with Carelton Behavioral Health (BH) of Connecticut, DSS' BH Administrative Services Organization (ASO), in the design of the program. It is a performance based prospective payment model using a tiered approach in this initial phase.

For the first payment cycle of January 1, 2027, to December 31, 2027, providers' tiers will be determined by performance on the metrics of length of stay (LOS) re-admission rate and connect-to-care rate using claims from January 1, 2025, to December 31, 2025 (the 1st tier determination period). To help with tracking these metrics, providers will receive quarterly VBP performance reports beginning in October 2025, reflecting data from the first

quarter (January – March) of 2025. The reports are expected to be available to providers on a quarterly basis thereafter. Quarterly reports using claims from January 1 to December 31, 2024 with delivery dates from October 2024 to July 2025, are for informational purpose and will not be used to determine payment.

Connecticut General Hospitals and Private Psychiatric Hospitals that choose not to participate in the VBP program in the initial phase may still choose to stay involved in the current Interim Rate Add-On programs. Program sign-up will occur at a later date.

For additional information on general provider requirements, please refer to www.ctdssmap.com, under information, publications, Provider Manual Chapter 2 "Provider Participation Policy".

Prior Authorization:

There is no change to existing prior authorization (PA) requirements. Any service requiring PA must be obtained from the respective ASO responsible for the broad category of services requested (medical, rehab or behavioral health, etc.).

Posting Instructions:

Policy transmittals can be downloaded from the Web site at www.ctdssmap.com.

For questions regarding this bulletin please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

Distribution:

This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by Gainwell Technologies.

Responsible Unit:

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