



**Connecticut Medical Assistance Program**  
Policy Transmittal 2024-42

Provider Bulletin 2024-81  
December 2024

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Effective Date: January 1, 2025  
Contact: See below

**TO: Physicians, Physician Assistants, Advanced Practice Registered Nurses, Certified Nurse Midwives, Psychiatrists, and Federally Qualified Health Centers**

**RE: Adding Select Procedure Codes for Electronic Consultations**

Effective for dates of service January 1, 2025, and forward, the Department of Social Services (DSS) is adding select procedure codes to the physician office and outpatient fee schedule for billing electronic consultations (e-consults).

distance. DSS is expanding this measure as part of an effort to increase access to medically necessary specialist services covered under the Connecticut Medical Assistance Program (CMAP).

CPT Code	Description	Rates
99451	Interprofessional telephone/Internet/EHR assessment and mgt by consultative physician, 5 mins or more	\$37.46
99452	Interprofessional telephone/Internet/EHR referral service(s) provided by a treating/requesting physician, 30 mins	\$34.85

**Guidance for E-Consults Procedure Codes-Referring Provider:**

CPT code 99452 should be billed by the primary care or treating practitioner within an office setting, if 16-30 minutes in the service day is spent preparing for the referral and/or communicating with the specialist performing the e-consult. The primary care or treating practitioner may not report this CPT code more than once in a 14-day period for each individual HUSKY Health member per specialty.

**Guidance for E-Consults Procedure Codes-Consulting Provider:**

CPT code 99451 should be billed when an e-consult for an evaluation/management (E/M) visit performed by a specialist occurs in place of a face-to-face (F2F) visit with that same specialist E-consult codes are not reimbursable if there has been an F2F visit with the specialist 14 days prior to or 14 days after the e-consult occurs (or at the next available appointment date with the specialist if that date is greater than 14 days) when:

- the F2F visit was/is related to the original complaint; and,
- the F2F visit is with the same specialist (or specialist group) and was completed in addition to the e-consult.

Based on the 2025 Current Procedural Terminology (CPT) manual, DSS defines an e-consult as a consultation service through which a member’s primary care practitioner or treating practitioner (defined as a physician, advanced practice registered nurses (APRN), certified nurse midwife (CNM), and physician assistant) requests the opinion and/or treatment advice of a physician/psychiatrist, APRN, CNM or physician assistant with a specific specialty, to assist the primary care or treating practitioner in the diagnosis and/or management of the member’s presenting complaint.

E-consult services are typically provided in cases where a timely face-to-face visit with a specialist is not necessary or may not be feasible due to, factors including but not limited to, time and

In this circumstance, the e-consult codes should not be billed when the specialist will bill for an F2F visit.

Please note if a F2F visit and e-consult are billed by the same specialist or specialist group as outlined above, claims will be subject to denial via the claims processing system or subject to recoupment based on a post-payment audit review by DSS Quality Assurance division.

**Guidance for Federally Qualified Health Centers:**

E-consults that are performed in the FQHC setting are reimbursed as part of the overall encounter for the date of service. Separate reimbursement from the encounter received for e-consults is not permitted.

Case management or follow-up services to an e-consult performed by FQHCs will be considered part of the initial visit and no additional payments will be made to the FQHCs for this follow-up care rendered on the same date of service.

**Requirements of the Specialists:**

As is required for all services reimbursed under CMAP, all providers, including the specialist performing the e-consult, must be enrolled in the CMAP provider network. Providers must enroll as the provider type and specialty that they are licensed/certified with the State of Connecticut-Department of Public Health.

**Eligible Specialists:**

DSS compiled a list of select medical and behavioral health provider specialties that are eligible to receive reimbursement for e-consults.

<b>Specialties Eligible to Render E-Consults</b>
Allergy and Immunology (Adult & Pediatric)
Pulmonology (Adult & Pediatric)
Cardiology (Adult & Pediatric)
Dermatology (Adult & Pediatric)
Otolaryngology (Adult & Pediatric)
Sleep Medicine
Neurology (Adult & Pediatric)
Oncology (Adult & Pediatric)
Ophthalmology (Adult & Pediatric)

Orthopedic Surgery (Adult & Pediatric)
Pain Medicine
Medical Genetics
Sports Medicine
Adolescent Medicine
Gastroenterology (Adult & Pediatric)
General Surgery (Adult & Pediatric)
Geriatric Medicine (including Nurse Practitioner)
Nephrology (Adult & Pediatric)
Neurology (Adult & Pediatric)
Endocrinology, Diabetes and Metabolism (Adult & Pediatric)
Hematology (Adult & Pediatric)
Infectious Diseases (Adult & Pediatric)
Rheumatology (Adult & Pediatric)
Developmental-Behavioral Pediatrics
Pediatric Neurodevelopmental Disabilities
Child Abuse Pediatrics
Obstetrics and Gynecology
Maternal Fetal Medicine
Pediatric Hospice and Palliative Medicine
Pediatric Medical Toxicology
Pediatric Orthopedic Surgery
Urology (Adult & Pediatric)
Neurology with Special Qualifications in Child Neurology
Child & Adolescent Psychiatry
Psychiatry (including APRN and Physician Assistant)

In addition to this provider bulletin, specialty providers should refer to the CPT manual (corresponding to the date of service) for additional guidance for these CPT codes.

**Please note:** An “e-consult” is not eligible for reimbursement under CMAP if the “e-consult” is performed as a split or shared medical or behavioral health visit (see [PB 22-35 Updated Guidance Regarding Shared/Split Medical Visits](#) for more information). It is DSS’ expectation that the appropriate level of specialist performs the e-consult and bills accordingly.

**Requirements of E-consult's Electronic System:**

All e-consults must be conducted through a secure internet exchange between the primary care or treating practitioner and the specialist.

**Telephonic consultations are not reimbursable under CMAP.**

The system used to complete the e-consult must, at a minimum, comply with the following requirements. The system must:

- be in compliance with Health Insurance Portability and Accountability Act (HIPAA) and other applicable security and privacy requirements.
- enable transmission through electronic communication systems to a specialist who uses the information to evaluate the cases for the type of e-consults for which it is used.
- be compatible with the primary care or treating practitioners' electronic health records (EHR) system.

**Consent to Services:**

Consent from the HUSKY Health member is required prior to the e-consult request being sent to the consulting specialist. The consent must include permission to consult with eligible specialists. Consent may be verbal or written (including electronic) and the consent must be clearly documented in the HUSKY Health member's patient record.

**Documentation Requirements:**

All documentation for encounters and the corresponding e-consults must be in compliance with Section 17b-262-349 and Section 17b-262-1004 of the regulations of Connecticut state agencies. The documentation should include the medical/behavioral health reasoning for the e-consult along with any documentation of medical/behavioral health conclusions and any recommendations for treatment written by the specialist.

Also, as defined in Section 17b-262-349 and Section 17b-262-1004(a) of the regulations of Connecticut state agencies, all required documentation for encounters and the e-consults

must be retained in the HUSKY Health member's medical and/or behavioral health file and it must be available to DSS upon request.

**Posting Instructions:** Policy transmittals can be downloaded from the Web site at [www.ctdssmap.com](http://www.ctdssmap.com).

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

**Responsible Unit:**

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