

# **Connecticut Department of Social Services Medical Assistance Program**

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Provider Bulletin 2025-28 June 2025

TO: All Providers

RE: Changes to Prior Authorization Process for Medical Goods and Services: Provider Notification of Determinations and Requests for Additional Information

The purpose of this provider bulletin is to notify enrolled Connecticut Medical Assistance Program (CMAP) providers of an upcoming change to the prior authorization (PA) process for medical goods and services.

# PA Requests Submitted via the Medical Authorization Portal

Effective July 1, 2025, Community Health Network of Connecticut, Inc. (CHNCT) is implementing changes for all PA requests submitted via the HUSKY Health Medical Authorization Portal.

Note: These changes do not apply to PA requests submitted via fax.

The changes are as follows:

 Requests for additional information will no longer be faxed. Requesting providers will be notified that additional information is needed pertaining to their PA submission via a message in the authorization portal. The message will list the additional information needed for medical necessity review along with the due date for submitting the information. Providers may upload the information to the portal.

Note: Additional information pertaining to a provider re-evaluation (appeal) request should not be attached to a denied authorization in the portal. Clinical documentation attached to a denied authorization in the portal will not be considered a request for re-evaluation. Providers should follow the re-evaluation process as outlined in their denial letter.

- Determination letters (approval and denial letters) will no longer be faxed to the requesting provider.
  - Determination letters will be available to the requesting provider in the medical authorization portal. Letters may be downloaded as needed.
  - o When the ordering or prescribing provider is different than the requesting provider, a copy of the adverse determination (denial letter) will be faxed to the ordering or prescribing provider only.
- Determination status (approved, denied, or pended) is also visible in the portal.

# **Accessing the Portal**

Providers can access the medical authorization portal on the HUSKY website at: <a href="https://portal.ct.gov/HUSKY">https://portal.ct.gov/HUSKY</a> \rightarrow Information for Providers \rightarrow Prior Authorization \rightarrow Medical Prior Authorization.

#### **Portal Registration**

New users will follow a two-step authentication process to activate a new user account. Users must complete a Medical Authorization Portal Access Request Form and return to Community Health Network of Connecticut, Inc. (CHNCT) via email or fax. The form and instructions may be accessed at: <a href="https://portal.ct.gov/husky">https://portal.ct.gov/husky</a>  $\rightarrow$  Information for Providers  $\rightarrow$  Prior Authorization  $\rightarrow$  Medical Prior Authorization  $\rightarrow$  Complete Access Request Form.

Users must then register online at <a href="https://portal.ct.gov/husky">https://portal.ct.gov/husky</a>  $\rightarrow$  Information for Providers  $\rightarrow$  Prior Authorization  $\rightarrow$  Medical



Prior Authorization  $\rightarrow$  Register for the Medical Authorization Portal.

Users may contact CHNCT Technical Portal Support for assistance with registration at:

- Email: MedicalAuthHelpDesk@chnct.org
- Phone: 1.877.606.5172, Monday through Friday 9:00 a.m. 4:00 p.m.

#### **Provider Training**

Providers can access training demonstration videos and quick reference guides on the HUSKY Health website at <a href="https://portal.ct.gov/HUSKY">https://portal.ct.gov/HUSKY</a>  $\rightarrow$  Information for Providers  $\rightarrow$  Prior Authorization  $\rightarrow$  Medical Prior Authorization.

# The trainings cover:

- Portal registration
- Navigation
- Verification of client eligibility
- Creation and submission of PA requests
- Information needed for authorization of specific goods and services
- Location of:
  - o Reference numbers
  - Authorization status
  - o Determination letters
- Upload of clinical documentation
- How to view messages and download letters

## **Prior Authorization Submission**

There are no changes to the PA submission process. For questions regarding the prior authorization process, please contact CHNCT at 1-800-440-5071, between the hours of 8:00 a.m. and 6:00 p.m.

