## **Connecticut Medical Assistance Program**

Policy Transmittal 2025-15

Provider Bulletin 2025-36 July 2025

Andrea Barton Reeves, J.D., Commissioner

Effective Date: July 1, 2025 Contact: see Responsible Unit

TO: Ophthalmologists, Optometrists, Optometrist Groups, Opticians, Outpatient Hospitals, and Hearing Aid Providers

**RE:** HUSKY B Allowance Updates – Vision and Hearing Aid Services

Effective July 1, 2025 and forward, consistent with the requirements under 42 C.F.R. §457.480 for the Children's Health Insurance Program (CHIP), also known as HUSKY B, the \$100.00 allowance for eyeglasses and \$1,000.00 allowance for hearing aids will be discontinued, and instead the Department of Social Services (DSS) will provide reimbursement in full, up to the fee schedule allowed amount. This update applies to vision and hearing aid services covered for HUSKY B members.

Effective July 1, 2025, and forward, HUSKY B members will no longer be responsible for any portion of coverage for eyeglasses or hearing aids. The reimbursement received by DSS will be considered payment in full.

No other changes have been implemented related to vision and hearing aid coverage. Providers must continue to follow all policy, prior authorization and billing requirements associated with vision and hearing aid services under the HUSKY B program.

Providers will not need to do anything when submitting claims. The claims processing system will be set up to reimburse eyeglasses and hearing aids for amounts greater than the \$100.00 and \$1,000.00 allowances, respectively, when applicable, according to the Max Fee amounts on the applicable fee schedules.

## **Accessing the Fee Schedule**

The updated fee schedule can be accessed and downloaded by going to the Connecticut

Medical Assistance Program (CMAP) Web site at <a href="www.ctdssmap.com">www.ctdssmap.com</a>. From this Web page, go to "Provider", then to "Provider Fee Schedule Download", scroll to the bottom of the page and click on "I Accept", then select the applicable 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 the fee schedule on the Connecticut Medical Assistance Program Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

<u>Posting Instructions</u>: Policy transmittals can be downloaded from the Web site at <u>www.ctdssmap.com</u>.

<u>Distribution</u>: This policy transmittal is being distributed to providers of the CMAP by Gainwell Technologies.

## **Responsible Units:**

**Vision Services**: DSS, Division of Health Services, Medical Policy; Catherine Holt, Health Program Assistant, email <a href="mailto:catherine.holt@ct.gov">catherine.holt@ct.gov</a>.

Hearing Aids: DSS, Division of Health Services, Medical Policy; Ginny Mahoney, Health Program Supervisor, email ginny.mahoney@ct.gov.

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