Connecticut Department of Social Services
Medical Assistance Program **Provider Bulletin 2025-51**
www.ctdssmap.com **September 2025**

TO: **Physicians, Advanced Practice Registered Nurses, Physician Assistants, Medical Equipment Devices and Supplies (MEDS) Providers**

RE: **Enteral & Parenteral Supplies Used for Services Other Than Nutrition - Billing and Prior Authorization (PA) Guidance**

The purpose of this provider bulletin is to provide billing and prior authorization guidance to licensed practitioners and MEDS providers for when enteral or parenteral supplies are required for medically necessary services other than providing nutrition to a HUSKY Health member.

Examples of medically necessary supplies that may be needed include, but are not limited to, low profile gastrostomy tube buttons, Mickey tubes, G & J tube extensions, MIC long tubes, feeding bags, Farrell bags (gastric decompression), NG tubes, cecostomy extension tubing, syringes, gravity bags, and normal saline.

When such supplies are needed for non-nutritional needs, the MEDS provider must submit a PA request to Community Health Network of Connecticut, Inc. (CHNCT) under procedure code **E1399 (durable medical equipment, miscellaneous)**. The PA request should include all the items needed for the HUSKY Health member and reimbursement will be based on the current *DSS Pricing Policy for MEDS Items*.

When submitting an initial PA or reauthorization request, at a minimum, the following is required:

- Fully completed authorization request via the online web portal
- A valid prescription from the ordering provider (dated within 3 months of the request) that includes the description and amount of supplies needed along with the timeframe of use
- Clinical documentation (dated within 3 months of the request) to support the medical need for the request including: how the requested item will be used
- Pricing information for each item as outlined in the *DSS Pricing Policy for MEDS Items*
    - Current Actual Acquisition Cost (AAC) and Manufacturer Suggested Retail Price (MSRP) for each item

The DSS Pricing Policy for MEDS Items is available on the HUSKY Health web site at: https://portal.ct.gov/husky. To access the policies, click on *Information for Providers* followed by *Policies, Procedures and Guidelines* under the *Medical Management* menu item.

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.

Enteral/Parenteral for Nutritional Purposes

No changes have been made when billing for enteral and parenteral supplies required for nutritional needs, and providers should continue to use appropriate enteral/parenteral coding. For additional supplemental billing guidance related to nutritional enteral supplies, refer to PB 2023-67 Prior Authorization Threshold for Procedure Code B9998 – NOC Enteral Supplies.