



Deidre S Gifford, MD, MPH, Commissioner

Effective Date: April 12, 2020
Contact: See Responsible Units

TO: Home Health Agencies and Access Agencies

RE: CMAP COVID-19 Response – Bulletin 43: Updates to the Temporary Telemedicine Coverage for Therapy Services Billed by Home Health Agencies/Access Agencies

This provider bulletin supplements provider bulletins, ***PB 20-34 CMAP COVID-19 Response – Bulletin 21: Select Added Services to the Emergency Temporary Telemedicine Coverage/Telephonic Coverage for Specified Home Health Services*** and ***PB 20-28 CMAP COVID-19 Response – Bulletin 13: Emergency Temporary Telemedicine Coverage/ Telephonic Coverage for Specified Home Health Services and Hospice Services*** by specifying that the evaluation for the start of care (SOC) evaluations for physical therapy (PT), and occupational therapy (OT) services **will be allowed** to be performed via telemedicine.

Effective for dates of service April 12, 2020 and later and until the Department of Social Services (DSS) has notified providers in writing that the state has deemed COVID-19 to no longer be a public health emergency (the “Temporary Effective Period”), the following Revenue Center Codes (RCCs) for SOC will also be allowed to be rendered via telemedicine (real time live audio-visual technology):

- 424 – PT evaluation
- 434 – OT evaluation

No changes have been made to the performance of the initial evaluations for start of care for both medical and behavioral health services and these services must continue to be provided in-person and may not be provided by telemedicine. Please continue to refer to PB 2020-28 and 2020-34 for

additional guidance related to home health services rendered via telemedicine.

Electronic Visit Verification (EVV) for Connecticut Home Care (CHC), Personal Care Assistance (PCA) Acquired Brain Injury (ABI) and Autism Waivers:

During the Temporary Effective Period, EVV will be suspended for therapy services identified in this bulletin. Providers will no longer receive new therapy prior authorizations in their Santrax EVV system.

Claims for therapy services during this temporary effective period will not require a confirmed EVV visit in order to be paid. Providers will no longer be able to bill these services through Santrax and will need to submit claims through the Gainwell Technologies provider portal or through their own billing software.

Access Agencies will continue to provide prior authorizations (PAs) for these services and the PA will be visible via the Gainwell Technologies provider portal. Providers can access their PAs by logging into the secure site, www.ctdssmap.com, and selecting Prior Authorization then Prior Authorization Search.

For questions about billing or if further assistance is needed to access the fee schedules 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.

Posting Instructions:

Policy transmittals can be downloaded from the Web site at 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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