# **Connecticut Medical Assistance Program**

Policy Transmittal 2021-15

Provider Bulletin 2021-26 April 2021

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Effective Date: May 21, 2021

Contact: See Below

**TO:** All Providers

RE: REVISED Reinstating Prior Authorization Requirements that were Suspended During

the Public Health Emergency

Effective for dates of service May 21, 2021 and authorization forward. all prior requirements that were suspended or modified as part of the Public Health Emergency (PHE) response to COVID-19 as outlined in PB 2020-**33** - CMAP COVID-19 Response – Bulletin 23: Prior Authorization Changes to the Requirements for Specified Services will be reinstated. The PA requirements will be reinstated due to the current state PHE declaration and the relevant associated executive order (EO) 7EE, Section 4, expiring May 20, 2021.

# **PRIOR AUTHORIZATION:**

PA will be reinstated on the following services (in accordance with standard rules and procedures in effect before the PHE):

#### **Inpatient Hospital Admissions:**

Prior authorization requirements for all in-state and border hospital admissions will be reinstated, including all inpatient general acute care hospitals, children's hospitals, chronic disease hospitals and freestanding psychiatric hospitals. (PA has remained in effect for outof-state hospital admissions, which is not changing.)

#### **Inpatient Hospice Services:**

General inpatient hospice days beyond the fifth day will require PA, as required by section 17b-262-843(a)(1) of the Regulations of Connecticut State Agencies.

## **Outpatient Behavioral Health Services:**

Standard PA and registration requirements, as applicable, will be reinstated for the following outpatient behavioral health services:

Behavioral Health	Procedure Code(s)
Service	
Psychiatric Diagnostic	90791-90792, 90785
Evaluation	
Intensive Outpatient	S9480
Program (IOP) - MH	
Intensive Outpatient	H0015
Program (IOP) - SA	
Partial Hospitalization	H0035
Program (PHP)	
Extended Day Treatment	H2012
(EDT)	
Other Behavioral Health	H2019 and T1017
Services (Targeted Case	
Management and Home-	
Based Services)	
Psychological &	96116, 96121,
Neurological Testing	96130-96133,
	96136-96137 –
	Psychological Testing
	96136 TF and
	96137 TF –
	Neuropsychological
	Testing Only
Methadone Maintenance	H0020
Case Management	T1016
Adult Day Treatment	H2013

# **Eligible Providers:**

The following providers must obtain PAs and registrations for the above services:

Physicians

- Advanced Practice Registered Nurses (APRN)
- Physician Assistants
- Outpatient Hospitals
- Outpatient Chronic Disease Hospitals (CDH)
- Freestanding Psychiatric Hospitals
- Opioid Treatment Programs (Methadone Maintenance Clinics)
- Freestanding Behavioral Health Clinics
- Medical Clinics (including School Based Health Centers)
- Federally Qualified Health Centers
- Independent Behavioral Health Clinicians (Licensed Clinical Social Workers (LCSWs), Licensed Alcohol and Drug Counselors (LADCs). Licensed Marital and Family Therapists Professional (LMFTs), Licensed Counselors (LPC), and Licensed Psychologists)

Please Note: Behavioral health services rendered by a physician assistant must be billed under the physician/physician group provider ID. The physician assistant must be listed as the rendering provider on claims.

# **Outpatient Behavioral Health Services** rendered in the Rehabilitation Clinic

Standard PA and registration requirements, as applicable, will be reinstated for the following outpatient behavioral health services when performed in the rehabilitation clinic:

Service	Procedure Code(s)
Psychiatric Diagnostic	90791
Evaluation	
Individual Therapy	90832, 90834, 90837
Group Therapy	90853
Family Therapy	90846, 90847,
Neurological Testing	96132, 96133,
	96136 TF and 96137
	TF-Neuropsychological
	Testing Only

### **Advanced Radiology and Imaging Services:**

The global and technical components for nonemergent outpatient advanced imaging procedures will be reinstated effective for dates of service May 20, 2021 and forward. Please refer to applicable fee schedules for services that require PA.

#### **Home Health Services:**

The following temporary PA changes that were made because of the PHE declaration are expiring as of May 20, 2021 and standard rules are being reinstated for dates of service May 21, 2021 and forward:

- CMAP's medical administrative services organization (ASO) (Community Health Network of CT) and behavioral health ASO (Beacon Health Options) will not grant any additional automatic home health extensions for prior authorizations for dates of service beyond May 31, 2021. Home health agencies must request reauthorizations for dates of service on and after June 1, 2021 in accordance with all standard procedures and requirements.
- PA thresholds that were temporarily increased during the PHE declaration will return to threshold standards, as required by section 17b-262-732 of the Regulations of Connecticut State Agencies.
  - Nursing Services PA will be required for skilled nursing in excess of the initial evaluation and **two (2)** visits per week
  - Pregnancy-related preventive prenatal nursing care services in excess of two (2) visits during the prenatal period
  - Pregnancy-related preventive postpartum nursing care services in excess of two (2) visits during the postpartum period

- Physical therapy services in excess of the initial evaluation and two (2) visits per week
- Speech therapy services in excess of the initial evaluation and two
  (2) visits per week
- Occupational therapy in excess of the initial evaluation and one (1) visits per week.

#### **Dental Services:**

Effective for dates of service May 21, 2021 and forward, PA is reinstated for the following dental procedures:

- D3310 Endodontic therapy, anterior tooth (excluding final restoration)
- D3320 Endodontic therapy, bicuspid tooth (excluding final restoration)
- D3330 Endodontic therapy, molar (excluding final restoration)

### **Medical Equipment, Devices and Supplies:**

For information related to temporary changes for specific Medical Equipment, Devices and Supplies, please refer to *PB 2021-19* - Reinstating Standard Requirements - Medical Equipment, Devices and Supplies (MEDS) Signed Delivery Receipts Requirement and Prior Authorization Extensions.

# Requesting PAs from Appropriate Administrative Service Organization:

Providers must submit PA requests to the appropriate administrative service organization for dates of service May 21, 2021 and forward:

#### **Medical Authorizations**

Community Health Network of CT (CHNCT) at 1-800-440-5071, between the hours of 8:00 a.m. to 6:00 p.m.

#### Behavioral Health Authorizations

Beacon Health Options at 1-877-552-8247

#### **Dental Authorizations**

BeneCare Provider Relations at 1-888-445-6665

#### Non-Emergency Medical Transportation Authorizations

Veyo at 1-855-478-7350

For questions about billing or if further assistance is needed to access the fee schedules on the Connecticut Medical Assistance Program (CMAP) 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:**

DSS, Division of Health Services:

For Professional Services, Home Health, Medical Clinics and Rehabilitation Clinics please contact Dana Robinson-Rush, Health Program Assistant @ dana.robinson-rush@ct.gov .

For Behavioral Health Services, please contact Roderick Winstead, Manager, Integrated Services @ roderick.winstead@ct.gov.

For Inpatient or Outpatient Hospital, please contact Colleen Johnson, Health Program Assistant @ colleen.johnson@ct.gov.

For Dental Services, please contact Hope Mitchell-Williams, Health Program Associate @ hope.mitchell-williams@ct.gov.

For MEDS, please contact Ginny Mahoney, Health Program Associate @ginny.mahoney@ct.gov.

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