



Deidre S. Gifford, MD, MPH, Commissioner

Effective Date: March 11, 2021
Contact: See Below

TO: All Providers

RE: CMAP COVID-19 Response – Bulletin 54: ADDITIONAL Services Covered under the “COVID-19 Testing Group”

Effective **retroactive to March 11, 2021 and ending on the last day of the first calendar quarter that begins one year after the last day of the federal Public Health Emergency (PHE) period**, the Department of Social Services (DSS) is adding coverage for the following services under the optional Medicaid coverage group, “COVID-19 Testing Group”:

- COVID-19 Treatment Services including specialized equipment and therapies (including preventive therapies) and treatment of a condition that may seriously complicate treatment of COVID-19 for those presumed to have or have been diagnosed with COVID-19, and
- COVID-19 Vaccine Administration.

These changes have been implemented pursuant to section 9811 of the Federal American Rescue Plan Act of 2021, Public Law 117-2. The coverage is retroactive to March 11, 2021.

As previously communicated, DSS implemented an optional Medicaid coverage group, “COVID-19 Testing Group”, for uninsured Connecticut residents effective March 18, 2020. Providers must continue to refer to *PB 2020-42 “CMAP COVID-19 Response – Bulletin 27: New COVID-19 Coverage Group for Uninsured Residents”*, and *PB 2020-48 “CMAP COVID-19 Response – Bulletin 32: Services Covered under the Optional Medicaid Coverage Group “COVID-19 Testing Group” for Uninsured Connecticut Residents”* for additional details regarding

eligibility and testing services that are payable.

UPDATED Services Covered under the COVID-19 Testing Group

No changes have been made to the testing services previously communicated as covered services effective March 18, 2020 under the COVID-19 Testing Group. In addition to COVID-19 testing services, individuals covered under the COVID-19 Testing Group are also eligible for services performed to diagnose, treat, or vaccinate against COVID-19 infections. Services rendered that are not specific to COVID-19 testing, COVID-19 treatment (including treatment of a condition that may complicate treatment of COVID-19) or COVID-19 vaccine administration are not covered and should not be billed to the Connecticut Medical Assistance Program (CMAP). Please note that non-emergency medical transportation continues to not be covered for the COVID-19 Testing group.

Additional Providers Eligible to Bill for Services Covered under the COVID-19 Testing Group

In addition to the providers listed in *PB 2020-48 “CMAP COVID-19 Response – Bulletin 32: Services Covered under the Optional Medicaid Coverage Group “COVID-19 Testing Group” for Uninsured Connecticut Residents”*, the following providers are eligible for reimbursement of services rendered to individuals covered under the COVID-19 Testing group when COVID-19 testing, treatment and vaccination services are performed:

- Inpatient Hospitals

- Medical Clinics

As previously communicated, existing reimbursement methodologies for each provider category will apply to the services billed under the COVID-19 Testing Group and each provider should refer to their applicable fee schedule for reimbursement.

UPDATED Claims Submission

Providers should continue to submit claims electronically to Gainwell Technologies for individuals eligible under the COVID-19 Testing Group.

The following ICD-10-CM codes **must** be used when submitting claims under the COVID-19 Testing Group. Please note the effective dates for each diagnosis code.

ICD-10	Description	Dates of Service
U07.1	2019-nCoV acute respiratory disease	4/1/2020 – forward
Z03.818	Encounter for observation for suspected exposure to other biological agents ruled out	2/1/2020 – forward
Z11.59	Encounter for screening for other viral diseases.	2/1/2020 – 5/31/2021
Z20.822	Contact with and (suspected) exposure to COVID-19	10/1/2020 – forward
Z20.828	Contact with and (suspected) exposure to other viral communicable diseases	2/1/2020 – forward

ICD-10	Description	Dates of Service
Z11.52	Encounter for screening for COVID-19	1/1/2021 – forward
Z86.16	Personal history of COVID-19	1/1/2021 – forward
M35.81	Multisystem inflammatory syndrome (MIS)	1/1/2021 – forward
M35.89	Other specified systemic involvement of connective tissue	1/1/2021 – forward
J12.82	Pneumonia due to coronavirus disease 2019	1/1/2021 – forward
Z23	Encounter for Immunization	3/11/2021 – forward

Please note ICD-10-CM code Z11.59 will be end-dated as an acceptable code to bill under the COVID-19 Testing group so that providers can bill with the more appropriate ICD-10-CM code developed specific to COVID-19 screening: Z11.52.

COVID-19 Vaccine Administration

For additional information related to COVID-19 vaccine administration please refer to *PB 2021-23 CMAP COVID-19 Response Bulletin 51: Updated Guidance COVID-19 Vaccine Administration – Medical Practitioners* and *PB 2021-25 CMAP COVID-19 Response Bulletin 52: Updated Guidance - COVID-19 Vaccine Administration – Provided by Pharmacists, Pharmacy Interns and Pharmacy Technicians.*

Billing Questions

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.

Date Issued: May 2021

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 Units

Questions Related to **Eligibility** - DSS Medical Eligibility Policy at EligPolicy.DSS@ct.gov

Questions Related to **Covered Services** - DSS, Division of Health Services: Nina Holmes, Medical Policy Consultant at nina.holmes@ct.gov