



Connecticut Medical Assistance Program

Policy Transmittal 2022-56

Provider Bulletin 2022-82

December 2022

Deidre S. Gifford, MD, MPH, Commissioner

Effective Date: July 1, 2022

Contact: Dana.robinson-rush@ct.gov

TO: Physicians, Podiatrists, Physician Assistants, Advanced Practice Registered Nurses, and Certified Nurse Midwives

RE: Revising the Rates for Select Mammography Codes

This provider bulletin supersedes the section titled; “Recalculating the Professional & Technical Components for the Bilateral Screening Mammography Code” found in [PB22-47](#). All other guidance in PB 22-47 will remain in effect.

		incl cad bi	
77067		Scr mammo bi incl cad	107.10
77067	26	Scr mammo bi incl cad	\$32.00
77067	TC	Scr mammo bi incl cad	\$75.10

Retroactive to dates of service, July 1, 2022 and forward, the Department of Social Services revised the rates for select mammography codes to ensure that the rates on the physician radiology fee schedule aligned with the appropriation approved in section 1 of Public Act 22-118 (which codifies the State Fiscal Year 2023 Midterm Budget adjustments) and that were submitted to the Centers for Medicare and Medicaid Services as part of the State Plan Amendment.

The changes apply to services reimbursed under the HUSKY Health programs (A, B, C, and D).

The rates for the global and technical (modifier TC) components for the mammography codes listed below were revised as follows. The professional component will continue to reimburse at the increased rate of \$32.00 as previously communicated in [PB 22-47](#).

Billing Instructions:

Paid claims, where the detailed billed amount was equal to or greater than the new allowed amount, were systematically adjusted in the claim cycle on November 18, 2022. Providers should have seen these claims on their November 22, 2022 Remittance Advice. Gainwell Technologies mass adjusted these claims without any additional work on the part of providers. Providers are encouraged to bill their usual and customary charge when submitting claims to ensure the systematic reprocessing of their claims whenever a rate change occurs.

Procedure Code	Modifier	Description	Rate
77065		Dx mammo incl cad uni	\$95.92
77065	26	Dx mammo incl cad uni	\$32.00
77065	TC	Dx mammo incl cad uni	\$63.92
77066		Dx mammo incl cad bi	\$109.14
77066	26	Dx mammo incl cad bi	\$32.00
77066	TC	Dx mammo	\$77.14

Accessing the Fee Schedule:

The updated fee schedule can be accessed and downloaded by going to the CMAP Web site: www.ctdssmap.com. 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”.

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 CMAP by Gainwell Technologies.

Responsible Unit:

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Date Issued: December 2022