



Deidre S. Gifford, MD, MPH, Commissioner

Effective Date: January 1, 2023  
 Email: [Catherine.holt@ct.gov](mailto:Catherine.holt@ct.gov)

**TO: Dialysis Clinics**

**RE: 1. January 2023 Quarterly Dialysis Clinic HIPAA Compliant Update 2. Addition of Specific Vaccine Codes to the Dialysis Clinic Fee Schedule 3. Updates to Physician Administered Drugs**

**1. HIPAA Compliant Update**

Effective for dates of service January 1, 2023 and forward, the Department of Social Services (DSS) is incorporating the January 2023 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) by adding the following procedure codes to the Dialysis Clinic fee schedule:

Code Addition	Description	Rate
J0891	Injection, argatroban (accord), not therapeutically equivalent to j0883, 1 mg (for non-esrd use)	\$0.57
J0892	Injection, argatroban (accord), not therapeutically equivalent to j0884, 1 mg (for esrd on dialysis)	\$0.57
J0898	Injection, argatroban (auromedics), not therapeutically equivalent to j0883, 1 mg (for non-esrd use)	\$2.19
J0899	Injection, argatroban (auromedics), not therapeutically equivalent to j0884, 1 mg (for esrd on dialysis)	\$2.19

DSS is making this change to ensure that the Clinic – Dialysis fee schedule remains

compliant with the Health Insurance Portability and Accountability Act (HIPAA).

**2. Addition of Specific Vaccine Codes to the Dialysis Clinic Fee Schedule**

Effective for the dates of service January 1, 2023 and forward, DSS will be adding the following Pneumococcal vaccine procedure codes to the Dialysis Clinic fee schedule:

Code Addition	Description	Rate
90671	Pneumococcal conjugate vaccine 15 valent (PCV15) for intramuscular use	\$246.20
90677	Pneumococcal conjugate vaccine 20 valent (PCV20) for intramuscular use	\$283.72

**3. Updating Physician Administered Drugs**

The rates for physician-administered drugs, immune globulins, vaccines, and toxoids will be revised to equal 100% of the January 2023 Medicare Average Sales Price (ASP) Drug Pricing file. Providers should continue to review [PB 2018-10 Updates to the Reimbursement Methodology for Physician-Administered Drugs, Immune Globulins, Vaccines and Toxoids](#) for more information on billing physician administered drugs.

Please refer to the dialysis clinic fee schedule for codes eligible for reimbursement and the January 2023 reimbursement updates.

All the changes outlined in this provider bulletin apply to services reimbursed under the HUSKY Health (A, B, C, and D) programs.

### **Accessing the Fee Schedule**

The updated fee schedule can be accessed and downloaded by going to the Connecticut Medical Assistance Program (CMAP) Web site at [www.ctdssmap.com](http://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 Clinic – Dialysis fee schedule. To access the CSV file, press the control key while clicking the CSV link, then select “Open”.

For questions about billing or if further assistance is needed to access the fee schedule on the 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](http://www.ctdssmap.com).

**Distribution:** This policy transmittal is being distributed to providers of the CMAP by Gainwell Technologies.

**Responsible Unit:** DSS, Division of Health Services, Medical Policy; Catherine Holt, Health Program Assistant, email [Catherine.Holt@ct.gov](mailto:Catherine.Holt@ct.gov).

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