



Connecticut Medical Assistance Program
Policy Transmittal 2023-12

Provider Bulletin 2023-24
April 2023

Andrea Barton Reeves, J.D., Commissioner

Effective Date: May 12, 2023
Contact: See below

TO: Physicians, APRNs, Physician Assistants, Home Health Agencies, Access Agencies and Hospice Agencies

RE: Updated Guidance – Home Health and Hospice Services - Ending Temporary Flexibilities

In response to the federal declaration ending the public health emergency, the Department of Social Services (DSS) is ending temporary flexibilities for specified home health and hospice services effective for dates of service, May 12, 2023, and forward.

Home Health (HH) Services:

Effective May 12, 2023, and forward, all home health services must be rendered in-person including nursing care, therapy services, all evaluations (including, start of care (SOC), resumption of care (ROC), and for initial and recertification evaluations for physical therapy (PT), occupational therapy (OT), speech and language pathology (SLP) services), and medication administration services.

Continue to refer to the following provider bulletins (PB) for additional guidance:

- [PB 14-44](#) *Implementation of Connecticut General Statute 19a-492 Permitting Registered Nurses to Delegate Administration of Medication to Home Health Aides who have Obtained Certification for Medication Administration.*
- [PB 15-07](#) *Clarification of Billing Medication Administration Visit Code and Skilled Nursing Visit Code Related to Pre-pouring of Medication.*

- [PB 15-75](#) *Addition of New Medication Administration Prompt Code.*
- [PB 15-90](#) *Additional Billing Guidance for New Medication Administration Prompt Code for additional guidance.*
- [PB 17-59](#) *Clarifying Billing Instructions for Therapy Evaluations and Services Performed as Part of the Home Health Care Plans (Revised).*
- [PB 19-49](#) *Correction to the Guidance for Billing Evaluation and Assessment Services for Home Health Care Services.*

HH Face-to-Face Requirements:

Effective for dates of service May 12, 2023, and forward, home health providers must once again comply with the time frame for the Face to face (F2F) encounter requirements as specified by 42 CFR 440.70. Specifically, for the initiation of home health services, the F2F encounter related to the primary reason that the HUSKY Health member requires home health services must occur within 90 days before or within 30 days after the start of services. Compliance with this requirement includes provision of the F2F encounter via telehealth as specified by 42 CFR 440.70(f)(6) and if the service billed complies with the telehealth policies as outlined and specified by DSS.

Continue to refer to provider bulletin, [PB 17-02](#) *New Face-to-Face Requirement for Initial Orders of Home Health Services* for guidance.

HH Prior Authorization:

There are no changes to prior authorization requirements. Continue to refer to [PB 21-26 REVISED Reinstating Prior Authorization Requirements that were Suspended During the Public Health Emergency](#) and [PB 15-38 Prior Authorization of Home Health Aide and Extended Nursing Services](#).

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

For dates of service May 12, 2023, and forward, claims for the above-mentioned home health services will require a confirmed EVV visit to be paid, however, claims that may appear with EOB 3327 “Confirmed Visit Not Found” will be in a *post and pay* status. This will allow providers time to implement EVV for all Home Health Care Services (HHCS). Please note, a *post and pay* status means that the error is informational and will not affect payment of these claims. The date on which this edit will be enforced for home health claims will be communicated in a future EVV notification.

Providers will see home health prior authorizations for CHC, ABI, PCA and Autism members in their Sandata EVV system, as codes in an EVV Temporarily Suspended status due to the COVID-19 Public Health Emergency Period are returned to an EVV mandated status. Home Health agencies will be able to bill these services through Sandata Agency Management (SAM), the www.ctdssmap.com Secure Provider Web portal or through their own billing software. Access Agencies or the Autism care manager will continue to provide prior authorizations (PAs) for these services and the PA will be visible via the www.ctdssmap.com Secure provider Web portal. Providers can access their PAs by logging into the secure site, www.ctdssmap.com, and selecting Prior

Authorization then Prior Authorization Search.

Hospice Services:

Effective for dates of May 12, 2023, all hospice services must be performed in-person.

Continue to refer to [PB 18-60 Reminder of Connecticut Medicaid Coverage of Hospice Benefit](#) for guidance.

Note: Please carefully review the entirety of this bulletin along with all other provider bulletins and documents (i.e., FAQs) found on the CMAP Web site, www.ctdssmap.com.

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 CMAP by Gainwell Technologies.

Responsible Units:

Physicians, APRNs, Hospice Agencies, Home Health Agencies: DSS, Division of Health Services, Medical Policy Section; Dana Robinson-Rush, Health Program Assistant, email: dana.robinson-rush@ct.gov.

Waivers (CT Home Care Program for Elders, Personal Care Assistant, Acquired Brain Injury, Autism):

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