



**TO: Medical Equipment, Devices and Supplies (MEDS) Providers**

**RE: (1) Removal of Prior Authorization from Wheelchair Repair Procedure Codes  
(2) Manual Pricing Process for Select Wheelchair Repair Codes**

**(1) Removal of Prior Authorization from Wheelchair Repair Procedure Codes**

Effective for dates of service July 1, 2024, and forward, as specified by Section 3 of Public Act 24-58, the Department of Social Services (DSS) is removing the prior authorization (PA) requirement from procedure codes for wheelchair repairs. This update will impact select procedure codes, specifically for wheelchair repairs that are billed with the RB (repair) modifier.

No changes have been made to the PA requirements for the purchase or modification of a wheelchair. Continue to refer to the Durable Medical Equipment fee schedule for PA requirements by procedure code.

**(2) Manual Pricing Process for Select Wheelchair Repair Codes**

Effective for dates of service July 1, 2024, and forward, the manually priced process will be used to price the wheelchair repair codes that will no longer require prior authorization (PA) as specified in section 1 above. Claims that include the wheelchair repair codes for which the PA requirement was removed will suspend for manual pricing when:

- The billed amount for the wheelchair repair procedure code is greater than the max fee of \$1000 as listed on the DME fee schedule; or
- The max fee amount for the specific procedure code is listed as MP (manually price) on the DME fee schedule.

This is consistent with the current pricing policy for wheelchair repair codes and is necessary to price the claim accurately based on the repair being performed.

Once the claim is submitted, providers must submit the pricing documentation (invoice) specific to the repair being performed, to written correspondence at Gainwell Technologies (GT) using one of the methods outlined below. Consistent with current pricing requirements, the pricing documentation (invoice) cannot be older than 12 months.

**Pricing Documentation Requirements:**

At a minimum, the pricing documentation must include the following details:

- HUSKY Health member identification (ID) number
- Date of Service for the claim
- Claim Internal Control Number (ICN)
- Provider National Identification Number (NPI)
- Pricing documentation (invoice) that is no older than twelve (12) months

Pricing of the manually priced claims will be completed within (10) business days, once all appropriate and complete documentation is received, following the pricing logic outlined in the DSS Pricing Policy. If the documentation submitted is incomplete, or the invoice is older than twelve (12) months, the claim will not be submitted for review until such information is received.

Providers must keep a copy of the pricing (invoice) information in addition to all pertinent clinical documentation on file to support the claim submitted for manual pricing. This information must be made available to DSS to ensure proper coding is utilized and appropriate payment is provided for the wheelchair repair. If this documentation is not maintained or is

inaccurate, claims may be subject to recoupment or adjustment during a post payment review.

**Methods to Submit Pricing Documentation:**

The pricing documentation outlined above can be submitted utilizing one of three methods:

**Fax:**

860-986-7995

**Email:**

[ctxix-claimattachments@gainwelltechnologies.com](mailto:ctxix-claimattachments@gainwelltechnologies.com)

**USPS:**

Gainwell Technologies  
PO Box 2971  
Hartford, CT 06104

**Accessing the MEDS Pricing Policy**

The DSS Pricing Policy for MEDS Items can be accessed and downloaded from the HUSKY Health Web site: [www.huskyhealthct.org](http://www.huskyhealthct.org). From the “Provider Home” home page, go to “Medical Management,” then to “Policies, Procedures, & Guidelines,” then to “DSS Pricing Policy for MEDS Items” located under the Medical Equipment and Supplies section.

**Accessing the Fee Schedules**

The updated fee schedules can be accessed and downloaded from the CMAP Web site: [www.ctdssmap.com](http://www.ctdssmap.com). From the home page, go to "Provider", then to "Provider Fee Schedule Download". Click on the "I accept" button and proceed to the appropriate 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 schedules 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.



Questions? Need assistance? Call the Provider Assistance Center Mon–Fri 8:00 am – 5:00 pm  
Toll free 1-800-842-8440 or write to Gainwell Technologies, PO Box 2991, Hartford, CT 06104  
Program information is available at [www.ctdssmap.com](http://www.ctdssmap.com)