



**Connecticut Medical Assistance Program**  
Policy Transmittal 2025-32

Provider Bulletin 2025-74  
December 2025

Andrea Barton Reeves, J.D., Commissioner

Effective Date: January 1, 2026  
Email: [catherine.holt@ct.gov](mailto:catherine.holt@ct.gov)

**TO: Independent Audiologists and Speech and Language Pathologists**  
**RE: January 2026 HIPAA Compliant Update to the Independent Audiology and Speech and Language Pathology Fee Schedule**

Effective for the dates of service, January 1, 2026, and forward, the Department of Social Services (DSS) is incorporating the January 2026 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) to the Independent Audiology and Speech and Language Pathology fee schedule.

DSS is making this change to ensure that the Independent Audiology and Speech and Language Pathology fee schedule remains compliant with the Health Insurance Portability and Accountability Act (HIPAA). The changes apply to services reimbursed under the HUSKY Health (A, B, C and D) programs.

The following procedure codes will be added to the Independent Audiology and Speech and Language Pathology fee schedule:

Code	Description	Deleted Code
92628	Evaluation for hearing aids in one or both ears, first 30 minutes	V5010
92629	Evaluation for hearing aids in one or both ears, each additional 15 minutes	V5010
*92636	Hearing aid post-fitting follow-up services for one or both ears, first 30 minutes	92592/ 92593

*92637	Hearing aid post-fitting follow-up services for one or both ears, each additional 15 minutes	92592/ 92593
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\*Consistent with the current requirements for payment of hearing aid services, the dispensing fee reimbursed to the hearing aid provider includes the selection, orientation, training in proper use, fitting and adjustments required within the first year of service and as such, procedure codes 92636 and 92637 should not be billed within the first of year of service of a hearing aid. It is the responsibility of the hearing aid provider to perform and ensure post-fitting within the first year.

**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 applicable 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 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](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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