



TO: Inpatient Hospital Providers

RE: Activating Attending Provider Requirements

As previously communicated in provider bulletins [PB 2013-24](#) ‘Implementation of Affordable Care Act Claim Edits’ and [PB 2013-56](#) ‘The Implementation of the Ordering, Prescribing and Referring (OPR) Claim Edits’ effective December 1, 2013, the Department of Social Services (DSS) requires outpatient claims and outpatient crossover claims to include the attending physician NPI be enrolled in the Connecticut Medical Assistance Program (CMAP) on the date of service. To support these mandates, DSS will be activating the following claim edits to validate that all attending providers submitted on Inpatient Hospital claims are enrolled in CMAP.

1033 “Attending physician not enrolled on date of service.”

The edits will be set to post and pay effective for claims submitted between April 1, 2026 to April 30, 2026. The post and pay status means the edit will be displayed on the claim, but the claim will not be denied for that reason.

Effective with claims submitted on or after May 1, 2026, claims will be denied if the attending provider is not enrolled in CMAP.

The attending physician’s NPI should be entered in the fields identified below:

- Web claim: Institutional Claim Panel “Attending Phys”
- ASC X12 837 I Loop: 2310A ID Qualifier 71
- Paper UB04 – Field 76

Provider Enrollment

Attending providers not enrolled must enroll using the Provider Enrollment Wizard located on the Web site www.ctdssmap.com. From the Home page, click on the Provider tab, and then click on Provider Enrollment to begin the enrollment process. Providers must complete the entire enrollment application to enroll in CMAP.

For questions about provider enrollment or billing, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.