



Connecticut Medical Assistance Program
Policy Transmittal 2026-19

Provider Bulletin 2026-32
June 2026

Andrea Barton Reeves, J.D., Commissioner

Effective Date: July 1, 2026
Contact: dana.robinson-rush@ct.gov

TO: Physicians, Physician Assistants, Advanced Practice Registered Nurses, Certified Nurse-Midwives, Podiatrists, and Optometrists

RE: 1. July 2026 Quarterly HIPAA Compliant Update - Physician Office and Outpatient Fee Schedule

2. Updates to Skin Substitutes Listed on the Physician Office & Outpatient Fee Schedule

1. July 2026 Quarterly HIPAA Compliant Update:

Effective for dates of service July 1, 2026 and forward, the Department of Social Services (DSS) is incorporating the July 2026 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) to the physician office and outpatient fee schedule.

DSS is making these changes to ensure that the physician office and outpatient fee schedule remains compliant with the Health Insurance Portability and Accountability Act (HIPAA). The changes apply to services reimbursed under the HUSKY Health programs (A, B, C, and D).

Updates to Skin Substitutes Listed on the Physician Office & Outpatient Fee Schedule:

This provider bulletin (PB) supersedes the guidance found in [PB 2018-69](#) Update to the Billing Guidance to the HCPCS Codes for Skin Substitutes.

Effective July 1, 2026, DSS is updating the procedure codes listed on the physician office and outpatient fee schedule for skin substitutes based on guidance from the Centers for Medicare & Medicaid Services (CMS).

DSS will be end-dating several procedure codes for select skin substitutes that were determined to be “investigational” or not

approved by the Food & Drug Administration (FDA), as required by Section 17b-262-342(13) of the Regulations of Connecticut State Agencies.

Additionally, several other procedure codes for FDA approved skin substitutes that are currently listed on the physician office and outpatient fee schedule will be repriced according to guidance from CMS, effective July 1, 2026.

Providers must continue to reference the physician office and outpatient fee schedule for reimbursement rates and prior authorization requirements.

The changes apply to services reimbursed under the HUSKY Health programs (A, B, C, and D).

Accessing the Fee Schedule:

The updated fee schedule can be accessed and downloaded by going to the Connecticut Medical Assistance Program (CMAP) Website: 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”.

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 Unit:

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