

TO: General Hospitals, Independent Laboratories, Physicians, Nurse Practitioners, Nurse Midwives

RE: Decrease in Current Rate for Code G0431

Effective for the dates of service October 15, 2015 and forward, the Department of Social Services will decrease the reimbursement rate of the Healthcare Common Procedural Coding System (HCPCS) code G0431 (*Drug screen, qualitative; multiple drug classes by high complexity test method [e.g., immunoassay, enzyme assay], per patient encounter).* 

The new fee will be \$38.00, which was the maximum reimbursement for drug testing code 80101 available in 2014, before being replaced with code G0341.

## Accessing the Fee Schedules

All fee schedules can be accessed and downloaded by going to the Connecticut Medical Assistance Web site: <u>www.ctdssmap.com</u>. From this Web page, go to "Provider", then to "Provider Fee Schedule Download", click "I Accept", and then click on PDF for "Lab".

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 HP Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

**<u>Posting Instructions</u>:** Policy transmittals can be downloaded from the Web site at <u>www.ctdssmap.com</u>.

**Distribution:** This policy transmittal is being distributed by HP Enterprise Services to

providers enrolled in the Connecticut Medical Assistance Program.

**<u>Responsible Unit</u>:** DSS, Division of Health Services, Medical Policy and Regulations, Edith Atwerebour, Policy Consultant, Medical Policy at (860) 424-5671

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