



Connecticut Medical Assistance Program
Policy Transmittal 2013-38

PB 2013-85
December 2013

Roderick L. Bremby, Commissioner

Effective Date: January 1, 2014
Contact: Nina Holmes @ (860) 424-5486

TO: Dialysis Clinics, Family Planning Clinics, and Medical Clinics

RE: Fee Schedule Updates

Effective for dates of service January 1, 2014 and forward, the Department of Social Services is incorporating the 2014 HCPCS changes (additions, deletions, and description changes) to its clinic fee schedules. The Department is making these changes to ensure that the clinic fee schedules remain compliant with the Health Insurance Portability and Accountability Act. The changes apply to services reimbursed under all the HUSKY Health and Prior Authorizations Requirements grid for clinic services. This grid is available at www.huskyhealth.com under "For Providers" under "Benefits and Authorization."

In conjunction with the annual update, The Department of Social Services is adjusting its fees for injectable procedure codes.

Reimbursement of A, J, Q, and S codes

The reimbursement rates for the drug codes (A, J, Q, and S codes) have been revised to equal 100% of the April 2013 Medicare rates, effective January 1, 2014, for codes that are priced by Medicare.

Family Planning Clinic

Procedure code J7301 (Skyla 13.5 mg) has been added to the fee schedule effective January 1, 2014 and forward.

Please note that any inclusions and exclusions to the list of Family Planning Benefit Only codes are found at the footer of the fee schedule.

Medical Clinics

Several immunizations codes have been added to the fee schedule effective January 1, 2014 and forward. As a reminder, if the product is available from the Department of Public Health through the Vaccines for Children (VFC) program, the Department will reimburse the provider for the applicable form of administration only when billed with the code reflecting which immunization was given.

Accessing the Fee Schedule:

The updated clinic fee schedules can be accessed and downloaded by going to the Connecticut Medical Assistance Website: www.ctdssmap.com. From this web page, go to "Provider", then to "Provider Fee Schedule Download", then to the appropriate "clinic" 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 HP Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 800-842-8440.

Posting Instructions: Policy transmittals can be downloaded from the web site at www.ctdssmap.com. Holders of the Connecticut Medical Assistance Program Provider Manual should replace their existing fee schedules with the new schedules.

The Department will post new fee schedules incorporating these changes in early January due to the delay in receipt of files from CMS. HP will place an Important Message (IM) on the web to notify providers when the fee schedule is available. All changes will be effective January 1, 2014 regardless of when the fee schedule is actually posted.

Distribution: This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program Provider Manual by HP Enterprise Services.

Responsible Unit: DSS, Medical Care Administration, Medical Policy and Regulations, Nina Holmes, Policy Consultant, at 860-424-5486 or Ruth McGinley at 860-424-5197

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