



Connecticut Medical Assistance Program
Policy Transmittal 2013-03

PB 2013-05
January 2013

Roderick L. Bremby, Commissioner

Effective Date: March 1, 2013
Contact: Nina Holmes @ (860) 424-5486

TO: Chiropractors, Physicians, Advance Practice Registered Nurses (APRN) and Physician Assistants (PA)
RE: Elimination of Independent Chiropractic Services

The purpose of this policy transmittal is to inform providers that pursuant to Public Act 12-1 (December Special Session) the Department is eliminating coverage for independent chiropractic services under the HUSKY A, C, and D **and** the state-funded chiropractic program for adults. This change in coverage is effective March 1, 2013 and forward.

Medically necessary independent chiropractic services will be available for HUSKY Health members under the age of 21 only as EPSDT special services, as well as for HUSKY B members, both with prior authorization. **Coverage for all independent chiropractic services for HUSKY A, C, and D members age 21 and older, including services under the state-funded chiropractic program for adults, will be eliminated effective for dates of service March 1, 2013 and forward.**

Requirements for Independent Chiropractic Services covered under EPSDT special services and HUSKY B

Consistent with current policy, prior authorization will be required for all independent chiropractic services under EPSDT special services. Additionally, effective for dates of service March 1, 2013 and forward, prior authorization will be required for all independent chiropractic services covered under the HUSKY B program. Prior authorization must be requested and approved before providing services under EPSDT special services or HUSKY B; otherwise the claim will deny.

When requesting prior authorization under EPSDT special services or HUSKY B the following must be submitted:

- An order provided by a physician licensed pursuant to Sec. 20-13 of the Connecticut General Statutes, APRN, or PA who is enrolled with the CT Medical Assistance Program;
- A description of the outcomes of any alternative measure tried; and
- Any other documentation reasonably requested by the Department or CHNCT which may be required to make a decision.

Providers shall submit requests for prior authorization to CHNCT utilizing the Authorization Request Form located online at www.huskyhealth.com, Select "For Providers," then "Provider Bulletins and Updates and Forms," then "Outpatient Authorization Request Form." Providers should select "Professional/Surgical Services" under section 15 "Authorization Service Requested." **Fax all requests, including the order from the licensed physician, APRN, or physician assistant, to CHNCT at (203) 265-3994.**

Previously authorized services under the state-funded chiropractic program for adults

Authorizations that were obtained under the state-funded chiropractic program for adults where the dates of service span beyond March 1, 2013 will not be honored. Please note any authorized services that go beyond March 1, 2013 will be denied.

Chiropractic Services for Dually Eligible Members

No changes have been made to chiropractic services that are covered under the Medicaid program for the dually eligible HUSKY Health population (members with both Medicare and Medicaid coverage). As outlined in PB 2003-24, for dually eligible HUSKY Health members, independently enrolled chiropractors may submit claims for the deductible or co-insurance as outlined in Chapter 5, Claims Submission - Section 5.7. **Please note: if Medicare denies a chiropractic claim for a dually eligible member, these services will not be covered under the HUSKY Health program.**

Posting Instructions: Policy transmittals can be downloaded from the Connecticut Medical Assistance Program Web site at www.ctdssmap.com

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

Responsible Unit: DSS, Division of Health Services, Nina Holmes, Policy Consultant, (860) 424-5486.

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