



Connecticut Medical Assistance Program
Policy Transmittal 2024-15

Provider Bulletin 2024-39
 June 2024

Andrea Barton Reeves, J.D., Commissioner

Effective Date: July 1, 2024
 Contact: hector.massari@ct.gov

TO: Board Certified Behavioral Analysts, Behavioral Health Clinics, Rehabilitation Clinics, Medical Clinics, School-Based Health Clinics, Outpatient Hospitals, Physicians, Physician Assistants, Advance Practice Registered Nurses, Psychologists and Behavioral Health Clinician Providers

RE: Reimbursement Rate Increases for Select Behavioral Health Services for Children

Pursuant to section one of Public Act 23-204, the Connecticut Department of Social Services (DSS) was allocated seven million dollars towards increasing the reimbursement rates of select behavioral health services for children covered under HUSKY Health.

Effective for dates of service July 1, 2024 and forward, DSS will increase the reimbursement rates of select behavioral health services (including family therapy services) for HUSKY Health members ages, 20 years old and under, listed on the following fee schedules:

- Autism Spectrum Disorder,
- Physician Office and Outpatient,
- Behavioral Health Clinic & Outpatient Hospital Behavioral Health,
- Psychologist,
- Behavioral Health Clinician,
- Rehabilitation Clinics,
- Special Services, and
- Medical clinics (including School-Based Health Clinics).

Please note: A new rate type will be added to each of the above-mentioned fee schedules identifying all procedure codes and procedure codes with select modifiers with increased reimbursement rates.

The following procedure codes with or without identified modifiers are eligible for the increase:

90785	90791	90792	90832	90833
90834	90836	90837	90838	90846
90847	90849	90853	90870	90875
90876	90880	90887	96105	96110
96112	96113	96116	96121	96125
96130	96131	96132	96133	96136
96136-TF	96137	96137-TF	96156	96158
96159	96164	96165	96167	96168
96170	96171	97153	97158	99202
99203	99204	99205	99211	99212
99213	99214	99215	99242	99243
99244	99245	99406	99407	99412
99442	99443	G8431	G8510	H0012
H0014	H0015	H0031	H0032	H0032-TS
H0035	H0046	H2012	H2013	H2014
H2019	S9480	S9484	S9484-HM	S9484-HT
S9485	S9485-HT	T1016	T1017	

Please note: Updates to the claims processing system and fee schedules to reflect the revised rates are currently in process. Paid claims where the detailed billed amount is greater than the new allowed amount will be retroactively adjusted. Gainwell Technologies will identify and reprocess these claims without any additional work on the part of providers. Providers are encouraged to bill their usual and customary charge when submitting claims to ensure the systematic reprocessing of their claims whenever a rate change occurs. *An Important Message (IM)*

will be sent notifying providers when the updates are made and when the ID and reprocess will occur.

Accessing the Fee Schedules:

When available, the updated fee schedules can be accessed and downloaded by accessing the Connecticut Medical Assistance Program (CMAP) Web site: www.ctdssmap.com. From this Web page, go to “Provider”, then to “Provider Fee Schedule Download”. Click on the “I accept” button and proceed to click on the appropriate 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 CMAP Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

Posting Instructions: Policy transmittals can be downloaded from the CMAP Web site at www.ctdssmap.com.

Distribution: This policy transmittal is being distributed to providers of the CMAP by Gainwell Technologies.

Responsible Unit: DSS, Division of Health Services, Integrated Care Unit; hector.massari@ct.gov

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