

DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 18-P: Ambulatory Surgical Center Services – HIPAA Billing Code and Reimbursement Update

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS).

Changes to Medicaid State Plan

Effective on or after January 1, 2018, SPA 18-P will amend Attachment 4.19-B of the Medicaid State Plan in order to revise the DSS fee schedule for Ambulatory Surgical Centers, which is within the clinic benefit category section of the Medicaid State Plan. This SPA incorporates the 2018 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) to ensure this fee schedule remains compliant with the Health Insurance Portability and Accountability Act (HIPAA). Codes that are being added are being priced using a comparable methodology to other codes in the same or similar category.

All fee schedules (including the ASC clinic fee schedule) are published at this link: <http://www.ctdssmap.com>, then select “Provider”, then select “Provider Fee Schedule Download.”

Fiscal Impact

DSS estimates that this SPA will not have an impact on annual aggregate expenditures.

Obtaining SPA Language and Submitting Comments

This SPA is posted on the DSS website at the following link: <http://portal.ct.gov/dss>. Scroll down to the bottom of the webpage and click on “Publications” and then click on “Updates.” Then click on “Medicaid State Plan Amendments”. The proposed SPA may also be obtained at any DSS field office, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: Public.Comment.DSS@ct.gov or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5067). Please reference

“SPA 18-P: Ambulatory Surgical Center Services – HIPAA Billing Code and Reimbursement Update”.

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than January 10, 2018.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Connecticut

9. Clinic services – Except as otherwise noted in the plan, state developed fee schedule rates are the same for both governmental and private providers of clinic services and the fee schedule and any annual/periodic adjustments to the fee schedule are published in www.ctdssmap.com. Fees are effective as of the dates noted below, except that fees may be deleted or added and priced in order to remain compliant with HIPAA. Rates for freestanding clinics are set as follows:

- (a) Ambulatory Surgery Centers: The current fee schedule was set as of January 1, 2018 and is effective for services provided on or after that date. All rates are published at www.ctdssmap.com.