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DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services JFK Federal Building, Government Center Room 2275 Boston, Massachusetts 02203



## Division of Medicaid and Children's Health Operations/Boston Regional Office

February 11, 2019

Roderick Bremby, Commissioner Department of Social Services 55 Farmington Avenue Hartford, CT 06105

Dear Commissioner Bremby:

We are pleased to enclose via email a copy of approved Connecticut State Plan Amendment (SPA) No. 18-007, submitted to my office on March 27, 2018 and approved on January 9, 2019.

This SPA amends Attachment 4.19-B of the Medicaid State Plan to incorporate the 2018 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) to the Independent Radiology and Independent Laboratory fee schedules to remain compliant with the Health Insurance Portability and Accountability Act (HIPPA). This SPA also makes additional reimbursement changes the independent laboratory fee schedule.

This SPA's approval is effective January 1, 2018, as requested by the State.

Changes are reflected in the following sections of your approved State Plan:

• Addendum Page 11 to Attachment 4.19B, Page 1

If you have any questions regarding this matter you may contact Marie DiMartino (617) 565-9157 or by e-mail at <u>Marie.DiMartino@cms.hhs.gov</u>

Sincerely, /S/

Richard R. McGreal Associate Regional Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE AND MEDICAID SERVICES		FORM APPROVED OMB NO. 0938-0193
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 18-0007	2. STATE: CT
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE AND MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE: January 1, 2018	
5. TYPE OF STATE PLAN MATERIAL (Check One):		
NEW STATE PLANAMENDMENT TO BE CONSIDERED AS NEW PLANAMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
<ol> <li>FEDERAL STATUTE/REGULATION CITATION: Section 1905(a)(3) of the Social Security Act and 42 CFR 440.30</li> </ol>	<ul> <li>7. FEDERAL BUDGET IMPACT:</li> <li>a. FFY 2018 \$99,700</li> <li>b. FFY 2019 \$112,400</li> </ul>	
<ol> <li>PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Addemdum Page 11 to Attachment 4.19-B Page 1</li> </ol>	<ol> <li>PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If applicable) Addemdum Page 11 to Attachment 4.19-B Page 1</li> </ol>	
10. SUBJECT OF AMENDMENT: Effective January 1, 2018, SPA 18-0007 amends Attachment 4.19-B of the Medicaid State Plan to incorporate the 2018 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) to the Independent Radiology and Independent Laboratory fee schedules to remain compliant with the Health Insurance Portability and Accountability Act (HIPAA). This SPA also makes additional reimbursement changes to the independent laboratory fee schedule, as described in the cover letter to this SPA submission.		
11. GOVERNOR'S REVIEW (Check One):         X_GOVERNOR'S OFFICE REPORTED NO COMMENT        COMMENTS OF GOVERNOR'S OFFICE ENCLOSED        NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
13. TYPED NAME: Roderick L. Bremby	State of Connecticut Department of Social Services 55 Farmington Avenue – 9th floor Hartford, CT 06105	
14. TITLE: Commissioner		
15. DATE SUBMITTED: March 27, 2018	Attention: Ginny Mahoney	
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED: March 27, 2018	18. DATE APPROVED: January 9, 2019	
PLAN APPROVED - ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL: January 1, 2018	20. SIGNATURE OF REGIONAL OFFICIAL:	/S/
21. TYPED NAME: Richard R McGreal	<b>22. TITLE:</b> Division of Medicaid & Children	s Health Operations
23. REMARKS:		
FORM CMS-179 (07-92)		

## OFFICIAL

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State <u>Connecticut</u>

- (3) Other Laboratory and X-ray Services –The fee schedules and any adjustments to the fee schedules are published in <u>www.ctdssmap.com</u>. Fees are effective as of the date noted below, except that fees may be deleted or added and priced in order to remain compliant with HIPAA or to correct pricing errors. Laboratory and X-ray service fees are the same for both governmental and private providers.
  - Laboratory Services were set as of January 1, 2018. The Department reviews Medicare rate changes annually to ensure compliance with federal requirements.
  - X-ray services provided by independent radiology centers were set as of January 1, 2018. Select the "Independent Radiology" fee schedule, which displays global fees, including both the technical and professional components of each fee.

TN # <u>18-0007</u> Supersedes TN# <u>17-0020</u> Approval Date 1/9/19

Effective Date 01-01-2018