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State/Territory Name: Connecticut

State Plan Amendment (SPA) #: 20-0006

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Center for Medicaid & CHIP Services 233 North Michigan Ave., Suite 600 Chicago, Illinois 60601



Financial Management Group

May 22, 2020

Kathleen M. Brennan, Deputy Commissioner Department of Social Services Office of the Deputy Commissioner 55 Farmington Avenue Hartford, CT 06105-3730

RE: Connecticut State Plan Amendment (SPA) Transmittal Number 20-0006

Dear Deputy Commissioner Brennan:

We have reviewed the proposed Connecticut State Plan Amendment (SPA) to Attachment 4.19-B of your state plan, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on March 31, 2020. This plan amendment incorporates the 2020 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) to the Independent Radiology and Independent Laboratory fee schedules.

Based upon the information provided by the State, we have approved the amendment with an effective date of January 1, 2020. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact James Moreth at 206-615-2043 or James.Moreth@cms.hhs.gov.

Sincerely, Todd McMillion

Director Division of Reimbursement Review

Enclosures

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TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 20-0006	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, 2020	
5. TYPE OF STATE PLAN MATERIAL (Check One):		
NEW STATE PLANAMENDMENT TO BE CONSIDERED AS NEW PLAN _X_AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)		
 FEDERAL STATUTE/REGULATION CITATION: Section 1905(a)(3) of the Social Security Act and 42 CFR 440.30 	 7. FEDERAL BUDGET IMPACT: a. FFY 2020 \$5,000 b. FFY 2021 \$8,000 	
 PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Addemdum Page 11 to Attachment 4.19-B Page 1 	9. PAGE NUMBER OF THE SUPERSEDED PLA ATTACHMENT (If applicable) Addemdum Page 11 to Attachment 4.19-B Page	
10. SUBJECT OF AMENDMENT: Effective January 1, 2020, this SPA amends Attachment 4.19-B of the Medicaid State Plan to incorporate the 2020 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).		
11. GOVERNOR'S REVIEW (Check One):		
X GOVERNOR'S OFFICE REPORTED NO COMMENT _OTHER, AS SPECIFIED: _COMMENTS OF GOVERNOR'S OFFICE ENCLOSED _OTHER, AS SPECIFIED: _NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL _OTHER, AS SPECIFIED:		
12 SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
13. TYPED NAME: Kathleen M. Brennan	State of Connecticut Department of Social Services 55 Farmington Avenue – 9th floor Hartford, CT 06105	
14. TITLE: Deputy Commissioner		
15. DATE SUBMITTED: March 31, 2020	Attention: Ginny Mahoney	
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED: 03/31/2020	18. DATE APPROVED: 05/22/2020	
PLAN APPROVED – ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL: 01/01/2020	20. SIGNATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME: Todd McMillion	22. TITLE: Director, Division of Reim	oursement Review
23. REMARKS:		
FORM CMS-179 (07-92)		

Addendum Page 11 to Attachment 4.19-B Page 1

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, 2020. 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, 2020. Select the "Independent Radiology" fee schedule, which displays global fees, including both the technical and professional components of each fee.