



**Connecticut Medical Assistance Program**  
Policy Transmittal 2015-22

Provider Bulletin 2015-44  
July 2015

Roderick L. Bremby, Commissioner

Effective Date: July 1, 2015  
Contact: Nina Holmes @ 860-424-5486

**TO: Physicians, Physician Assistants, Advanced Practice Registered Nurses, Certified Nurse Midwives**

**RE: Continuation of the HUSKY Health Primary Care Increased Payments Policy**

This policy transmittal is being sent to notify providers that the HUSKY Health Primary Care Increased Payments Policy is being extended for dates of service July 1, 2015 through June 30, 2017. As a result, the Department's current policy will continue unchanged for dates of service July 1, 2015 through June 30, 2017.

**Eligible Codes, Dates of Service, and Increased Payment Amounts**

There are no changes to the currently eligible codes under the HUSKY Health Primary Care Increased Payments Policy. Please see "Accessing the Fee Table" below for directions on accessing the list of eligible CPT codes. Please also refer to PB 2014-75 for details regarding the eligible codes.

**Attestation Criteria under the HUSKY Health Primary Care Increased Payment Policy**

There are no changes to the HUSKY Health Primary Care Increased Payment Policy attestation criteria. Providers who are already attested under the HUSKY Health Primary Care Increased Payment Policy, and who have not been found to be ineligible during the Department's attestation validation process are automatically eligible to continue to receive primary care increased payments for dates of service July 1, 2015 – June 30, 2017.

**Accessing the Attestation**

Physicians and non-physician/midlevel practitioners who have not yet attested eligibility for the first time under the HUSKY Health Primary Care Increased Payments Policy can do so by accessing this link: <https://www.surveymonkey.com/r/HUSKYHealthpcattest>. For more information, please refer to PB 2014-75.

**Accessing the Fee Table**

To access the HUSKY Health Primary Care Increased Payments Policy fee information from the [www.ctdssmap.com](http://www.ctdssmap.com) Web site, go to "Provider" and then to "Provider Fee Schedule Download". Click "I

Accept" at the end of the Connecticut Provider Fee Schedule End User License Agreements and then click on "Fee Schedule Instructions" in the red text at the top of the page. Scroll down to table name 2015 HUSKY Health Primary Care Rates.

For questions about billing or if further assistance is needed to access the fee schedule on the Connecticut Medical Assistance Program Web site, please contact the HP 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 Connecticut Medical Assistance Program Web site at [www.ctdssmap.com](http://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, Medical Policy Section; Nina Holmes, Policy Consultant, (860) 424-5486.

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