



Connecticut Medical Assistance Program

Policy Transmittal 2014-31

Provider Bulletin 2014-76

November 2014

Roderick L. Bremby, Commissioner

Effective Date: December 1, 2014

Contact: Nina Holmes @ 860-424-5486

TO: Physicians, Physician’s Assistants, Advanced Practice Registered Nurses, Certified Nurse-Midwives

RE: Increasing the Reimbursement Rate for Paragard – HCPCS J7300

The purpose of this policy transmittal is to notify providers that effective for dates of service December 1, 2014, and forward, the Department of Social Services (DSS) is revising the fee for HCPCS J7300 (intrauterine copper contraceptive; Paragard IUD).

This change will apply to providers who bill the Paragard IUD off the physician office and outpatient fee schedule. This change applies to services billed under the HUSKY Health program (HUSKY A, B, C and D).

Accessing the Fee Schedules:

Fee schedules can be accessed and downloaded by accessing the Connecticut Medical Assistance Program 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 “Physician Office and Outpt Services” 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 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 Web site at 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 and Regulations, Nina Holmes, Health Program Assistant, Medical Policy at (860) 424-5486.

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