



**State of Connecticut
Department of Social Services
Medical Care Administration
25 Sigourney Street
Hartford, CT 06106-5033**

**Policy Transmittal 2008-12
May 2008**

PB 2008-24

Contact: Nina Holmes
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A handwritten signature in black ink, appearing to read "Michael P. Starkowski".

Michael P. Starkowski
Commissioner

January 1, 2008
Effective Date

TO: Medical Clinics and Managed Care Organizations
SUBJECT: Medical Clinic Fee Schedule Update

The purpose of this policy transmittal is to inform providers that the department has updated the Medical Clinic Fee Schedule effective for dates of service on or after January 1, 2008. This fee schedule is intended to implement fee increases pursuant to Public Act No.07-185. If applicable, paid claims for dates of service on or after January 1, 2008 will be mass adjusted to reflect the fee increases. Providers will be notified by EDS when the mass adjustment will occur and will not need to resubmit claims.

The new fee schedule includes behavioral health codes 90801, 90804, 90805, 90806, 90807, 90808, 90846, 90847, 90853, and 90862, which may be billed by medical clinics when these services are provided by a licensed or certified behavioral health practitioner performing within their scope of practice in any of the professional and occupational license or certification categories pertaining to behavioral health covered in Title 20 of the Connecticut General Statutes of Connecticut.

Accessing the Fee Schedule:

The updated fee schedule is not attached to this transmittal but can be accessed and downloaded by going to the Connecticut Medical Assistance Program Web site: www.ctdssmap.com. From this web page, go to "Provider", then to "Provider Fee Schedule Download", then to "Clinic", then to "01/01/2008".

For questions about billing or if further assistance is needed to access the fee schedule on the EDS Web site, contact the EDS Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at:

**In state toll free.....800-842-8440 or
Out of state or in the local Farmington, CT area.....860-269-2028**

Posting Instructions: Holders of the Connecticut Medical Assistance Program Provider Manual should replace their existing fee schedule with the new schedule. Policy transmittals can also 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 Electronic Data Systems. Managed Care Organizations are requested to send this bulletin to their network providers and subcontractors.

Responsible Unit: DSS, Medical Care Administration, Medical Policy Section, Nina Holmes, Policy Consultant, (860) 424-5486

Date Issued: May 2008