

## **DEPARTMENT OF SOCIAL SERVICES**

### **Notice of Proposed Medicaid State Plan Amendment**

#### **HIPAA Billing Code and Reimbursement Update – Laboratory Services (SPA 16-006)**

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services.

#### Changes to Medicaid State Plan

Effective January 1, 2016, SPA 16-006 will amend Attachment 4.19-B of the Medicaid State Plan in order to revise the DSS fee schedule for Laboratory Services. Changes include the addition and deletion of codes in order to remain consistent with Healthcare Common Procedure Coding System (HCPCS) updates pursuant to the Health Insurance Portability and Accountability Act (HIPAA).

#### Fiscal Information

Based on available information, DSS does not anticipate that this SPA will change annual aggregate expenditures.

#### Information on Obtaining SPA Language and Submission of Comments

In accordance with federal Medicaid requirements, upon request, DSS will provide copies of the proposed SPA. Copies of the proposed amendment may also be obtained at any DSS regional office and on the DSS web site: <http://www.ct.gov/dss>. Go to “Publications” and then “Updates”.

Written, phone, and email requests should be sent to Ginny Mahoney, Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5145, Fax: 860-424-5799, Email: [ginny.mahoney@ct.gov](mailto:ginny.mahoney@ct.gov)). Please reference “SPA 16-006: HIPAA Billing Code and Reimbursement Update – Laboratory Services”.

Members of the public may also send DSS written comments about the SPA. Written comments must be received by DSS at the above contact information no later than January 13, 2016.

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State Connecticut**

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(3) Other Laboratory and X-ray Services –The fee schedules and any adjustments to the fee schedules are published in [www.ctdssmap.com](http://www.ctdssmap.com). 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, 2016. The Department reviews Medicare rate changes annually. Any Medicaid fee that exceeds the applicable Medicare fee is reduced to 90% of the Medicare fee or the Medicare floor whichever is higher.
- X-ray services provided by independent radiology centers were set as of January 1, 2016. Select the “Independent Radiology” fee schedule, which displays global fees, including both the technical and professional components of each fee.

TN # 16-006

Approval Date \_\_\_\_\_

Effective Date 01-01-2016

Supersedes

**SPA 13-036 (SPA 16-005, 15-046, 15-021, 15-008 and SPA 15-001 touch this same page)**