



Connecticut Medical Assistance Program
 Policy Transmittal 2014-15

PB 2014-

July 2014

Roderick L. Bremby, Commissioner

Effective Date: July 1, 2014
 Contact: C. LaVigne @ 860-424-5719

TO: Home Health Agencies

RE: Add-on's to fees for extraordinary costs related to AIDS, maternal and child health care,
 Escort services, or extended hour services

In accordance with Section 17b-242 of the Connecticut General Statutes, the Commissioner of Social Services may increase any fee payable to a home health care agency or homemaker-home health aide agency upon the application of such an agency evidencing extraordinary costs related to: (1) serving persons with AIDS; (2) high-risk maternal and child health care; (3) escort services; or (4) extended hour services. This notice is being sent to notify home health agencies of the Department of Social Services new procedures on requesting and applying for add-ons to the Medicaid fees.

In order to receive add-on fees effective for July 1st fee schedules, the attached revised forms should be submitted by May 1st every year along with the most recent filed Medicare annual cost report. Add-on fees will no longer be carried forward from state fiscal year to year automatically. If an agency currently receiving add-on fees does not re-apply timely (and qualify for add-on fees), the provider will receive the standard fees at the beginning of the new state fiscal year and cannot apply again until the following May.

Due to this late notice, for the state fiscal year beginning July 1, 2014, all agencies currently receiving add-on fees will continue to be paid their current adjusted fees until October 1, 2014. All home health agencies must re-apply or apply, using the attached revised forms, by September 10, 2014. Revised or new add-on fees, if applicable, will be included in a revised fee schedule effective October 1, 2014. **Again, if agencies currently receiving add-on fees do not re-apply (and qualify**

for add-on fees) for reimbursement for extraordinary costs related to serving persons with AIDS, high-risk maternal and child healthcare, escort services, and extended hour services, by September 10, 2014, the standard fees will be issued effective October 1, 2014.

The attached forms can be submitted to Kathy Shaughnessy at DSS, Office of Reimbursement and CON, 55 Farmington Avenue, Hartford, CT 06105, or electronically to

kathleen.shaughnessy@ct.gov

To download the PDF form visit:

<http://www.ct.gov/dss/cwp/view.asp?a=4654&q=548764>

If there are any questions, please contact Christopher LaVigne, Director Reimbursement and Certificate of Need, at 860 424-5719.

-
- **Posting Instructions:** Policy transmittals can be downloaded from the web site at www.ctdssmap.com
-
- **Distribution:** This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program Provider Manual by HP Enterprise Services.
-
- **Responsible Unit:** DSS, Reimbursement and Certificate of

Need, Christopher LaVigne,
Director, 860 424-5719.

-
-