

## NOTICES OF CONNECTICUT STATE AGENCIES

---

### NOTICE OF ADOPTED STREAM FLOW CLASSIFICATIONS

---

#### HOUSATONIC, HUDSON & SOUTHWEST COASTAL RIVER BASINS

---

In accordance with the Connecticut Regulations of Connecticut State Agencies Section 26-141b-5, the Commissioner of the Connecticut Department of Energy and Environmental Protection hereby gives notice that the Department, through consideration of the factors required by and following the procedures specified in the regulations, has adopted stream flow classifications for the rivers and streams of the Housatonic, Hudson and Southwest Coastal River Basins. The stream flow classification of a stream or river segment is based on ecological conditions and human use characteristics, and determines flow management goals and applicable flow standards for that segment.

The maps of the stream flow classifications are available on-line at [www.ct.gov/deep/streamflow](http://www.ct.gov/deep/streamflow). Such maps include river and stream segments in the following towns: Ansonia, Beacon Falls, Bethany, Bethel, Bethlehem, Bridgeport, Bridgewater, Brookfield, Canaan, Cornwall, Danbury, Darien, Derby, Easton, Fairfield, Goshen, Greenwich, Harwinton, Kent, Litchfield, Middlebury, Milford, Monroe, Morris, Naugatuck, New Canaan, New Fairfield, New Milford, Newtown, Norfolk, North Canaan, Norwalk, Orange, Oxford, Plymouth, Prospect, Redding, Ridgefield, Roxbury, Salisbury, Seymour, Sharon, Shelton, Sherman, Southbury, Stamford, Stratford, Thomaston, Torrington, Trumbull, Warren, Washington, Waterbury, Watertown, Weston, Westport, Wilton, Winchester, Wolcott and Woodbury.

With the finalization of stream flow classifications for the Housatonic, Hudson and Southwest Coastal River Basin, classifications for all streams across the state are now complete. Additional information on the Stream Flow Standards and Classifications is available on the Department's website at: [www.ct.gov/deep/streamflow](http://www.ct.gov/deep/streamflow). Anyone requiring more information may contact the Department by email at: [deep.streamflowclass@ct.gov](mailto:deep.streamflowclass@ct.gov) or by phone at 860-424-3020.

          (3/13/19)          

Date

          (Betsey Wingfield for)          

Katherine S. Dykes  
Commissioner

---

**DEPARTMENT OF SOCIAL SERVICES**

---

**Notice of Proposed Medicaid State Plan Amendment**

---

**SPA 19-L: Updates to the Physician Office & Outpatient Fee Schedule**

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

**Changes to Medicaid State Plan**

Effective on or after April 1, 2019, Medicaid State Plan Amendment (SPA) 19-L will amend Attachment 4.19-B of the Medicaid State Plan to update the physician office and outpatient fee schedule as follows:

This SPA will increase the rates for select Long-Acting Reversible Contraceptive (LARCs) Devices. This change will apply to providers who bill these LARCs off the physician office and outpatient fee schedule. This change is necessary to properly reimburse providers for the increased acquisition cost of this device in order to ensure sufficient access to the device.

<b>Code</b>	<b>Description</b>	<b>Price</b>
J7296	Kyleena 19.5 mg	\$953.51
J7297	Liletta, 52 mg	\$689.45
J7298	Mirena 52 mg	\$953.51
J7301	Skyla 13.5 mg	\$793.96

This SPA will update the reimbursement methodology for gender reassignment services to ensure that the services paid under the fee table for those services includes all medically necessary gender reassignment services.

This SPA will restructure the payment methodology for pediatric medical providers who apply fluoride varnish to the teeth of HUSKY Health members as follows:

- Expand the age range from 0-4 years to 0-6 years with no preventative dental history who could receive an oral health assessment with the application of fluoride varnish by a pediatric medical provider;
- Remove a duplicative procedure code (D1206) for the application of topical fluoride listed on the physician office and outpatient fee schedule;
- Remove Current Dental Terminology (CDT) code D0145 from the physician office and outpatient fee schedule; and
- Add a fixed fee when modifier DA - Oral health assessment by an eligible, licensed non-dental provider is billed with procedure code 99188 - Application of topical fluoride varnish by a physician or other qualified health care professional, which is paid at \$25.00 (in addition to the existing payment for the application of the fluoride varnish).

Fee schedules are published at this link: <http://www.ctdssmap.com>, then select “Provider”, then select “Provider Fee Schedule Download.”

**Fiscal Information**

Based on available information, DSS estimates that this SPA will increase annual aggregate expenditures by approximately \$83,000 in State Fiscal Year (SFY) 2019 and \$530,000 in SFY 2020.

**Obtaining SPA Language and Submitting Comments**

The proposed SPA is posted on the DSS website at this link: <http://portal.ct.gov/dss>. Scroll down to the bottom of the webpage and click on “Publications” and then click on “Updates.” Then click on “Medicaid State Plan Amendments”. The proposed SPA may also be obtained at any DSS field office, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: [Public.Comment.DSS@ct.gov](mailto:Public.Comment.DSS@ct.gov) or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5067). Please reference “SPA 19-L: Updates to the Physician Office & Outpatient Fee Schedule”.

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than April 10, 2019.

---

**DEPARTMENT OF SOCIAL SERVICES**

---

**Notice of Proposed Medicaid State Plan Amendment**

---

**SPA 19-P: Chemical Maintenance Clinics –  
Reimbursement Update for Border Providers**

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

**Changes to Medicaid State Plan**

Effective on or after April 1, 2019, Medicaid State Plan Amendment (SPA) 19-P will amend Attachment 4.19-B of the Medicaid State Plan to add clarifying language that border providers who are licensed chemical maintenance clinics in an area bordering Connecticut are eligible for payment on the same conditions as newly established in-state chemical maintenance clinics. Specifically, border providers who are licensed chemical maintenance clinics that meet all applicable requirements would receive the weekly rate for seven daily doses of \$88.52, which is the same rate that is paid to any newly established in-state chemical maintenance clinic.

**Fiscal Information**

Based on available information, DSS estimates that this SPA will increase annual aggregate expenditures by approximately \$26,000 in State Fiscal Year (SFY) 2019 and \$175,000 in SFY 2020.

### **Obtaining SPA Language and Submitting Comments**

The proposed SPA is posted on the DSS website at this link: <http://portal.ct.gov/dss>. Scroll down to the bottom of the webpage and click on “Publications” and then click on “Updates.” Then click on “Medicaid State Plan Amendments”. The proposed SPA may also be obtained at any DSS field office, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: [Public.Comment.DSS@ct.gov](mailto:Public.Comment.DSS@ct.gov) or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5067). Please reference “SPA 19-P: Chemical Maintenance Clinics – Reimbursement Update for Border Providers”.

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than April 10, 2019.

---

### **Department of Social Services**

---

### **Notice of Proposed Medicaid State Plan Amendment (SPA)**

---

#### **SPA 19-Q: Private Psychiatric Residential Treatment Facility (PRTF) Rate Increase**

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 (HHS).

#### **Changes to Medicaid State Plan**

Effective on or after May 1, 2019, SPA 19-Q will amend Attachment 4.19-A of the Medicaid State Plan to implement a rate increase to the per diem rate for privately operated PRTFs. The purpose of this rate increase is to expand access to medically necessary services provided by private PRTFs and to improve the quality of those services.

The increased rate will be \$610 per day, which was calculated based on DSS’s analysis of the allowable costs reported by privately operated PRTFs on their cost reports. In order to foster improved quality of services and also to ensure appropriate care is provided to children with high levels of clinical acuity, as a condition of receiving the increased rate, within four months after the effective date of the increased rate (with a report due one month later) each PRTF will need to document compliance with several standards established by DSS, including: evidence-based treatment, required provision of therapeutic recreation, required provision of family therapy, transition care coordination and discharge planning, and quality management. After additional information is available based on documentation after implementing these requirements, DSS may implement a quality-based payment methodology in the future.

This SPA will also add language to the state plan summarizing the federal requirement that in accordance with section 1905(a)(16) of the Social Security Act, as amended by section 12005 of the 21<sup>st</sup> Century Cures Act, each individual receiving PRTF services must have access to any medically necessary early and periodic screening, diagnostic and treatment (EPSDT) services, regardless of whether those EPSDT services are provided by the PRTF.

**Fiscal Impact**

DSS estimates that this SPA will increase annual aggregate expenditures by approximately \$177,000 in State Fiscal Year (FFY) 2019 and \$2.1 million in FFY 2020.

**Obtaining SPA Language and Submitting Comments**

This SPA is posted on the DSS web site at this link: <http://portal.ct.gov/dss>. Scroll down to the bottom of the webpage and click on “Publications” and then click on “Updates.” Then click on “Medicaid State Plan Amendments”. The proposed SPA may also be obtained at any DSS field office or the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: [Public.Comment.DSS@ct.gov](mailto:Public.Comment.DSS@ct.gov) or write to: Medical Policy Unit, Department of Social Services, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105 (Phone: 860-424-5067). Please reference “SPA 19-Q: Private PRTF Rate Increase”.

Anyone may send DSS written comments about the SPA. Written comments must be received by DSS at the above contact information no later than April 25, 2019.

---