

NOTICE OF CONNECTICUT STATE AGENCIES

DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 23-X: HIPAA Compliance Fee Schedule Update for Physician Office & Outpatient Fee Schedule

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). Public comment information is at the bottom of this document.

Changes to Medicaid State Plan

Effective on or after October 1, 2023, SPA 23-X will amend Attachment 4.19-B of the Medicaid State Plan in order to implement the changes detailed below.

This SPA incorporates the October 2023 Healthcare Common Procedural Coding System (HCPCS) updates to the Physician Office & Outpatient fee schedule. DSS is making these changes to ensure that this fee schedule remains compliant with the Health Insurance Portability and Accountability Act (HIPAA). Codes that are being added to the fee schedule are being priced using a comparable methodology to other codes in the same or similar category on the same fee schedule.

Fee schedules are published at this link: <http://www.ctdssmap.com>, then select “Provider”, then select “Provider Fee Schedule Download”, then Accept or Decline the Terms and Conditions and then select the applicable fee schedule.

Fiscal Impact

DSS estimates that the HIPAA compliant update for the physician office and outpatient fee schedule will increase annual aggregate expenditures by approximately \$137,511 in State Fiscal Year (SFY) 2024 and \$212,454 in SFY 2025.

Obtaining SPA Language and Submitting Comments

The proposed SPA is posted on the DSS website at this link: <https://portal.ct.gov/DSS/Health-And-Home-Care/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 or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105. Please reference “SPA 23-X: HIPAA Compliance Fee Schedule Update for 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 October 11, 2023.

DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 23-AD: Community First Choice - Rate Increases for Home-Delivered Meals, Personal Care Attendant (PCA) Per Diem, and PCA Overnight Services

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). Public comment information is listed below.

Changes to Medicaid State Plan

Effective on or after October 1, 2023, this SPA will amend Attachment 4.19-B of the Medicaid State Plan in order to make the reimbursement increases described below for the Community First Choice (CFC) benefit pursuant to section 1915(k) of the Social Security Act.

The CFC personal care attendant (PCA) per diem and overnight rates are being increased to ensure that the wage-based component of those rates complies with the most recent increase in the state minimum wage. This adjustment is not necessary for the hourly self-directed PCA rates, which already include a wage-based component at or above the most recent increase in the state minimum wage. The increased rates are as follows:

Code	Description	Rate
1019Z	Personal Care Services: Per Diem	\$411.56
1020Z	Personal Care Services: Overnight	\$320.90
1227Z	Pca Individual Per Diem Prorated Hourly	\$17.94
3020Z	Pca Individual Overnight Prorated Hourly	\$18.88

The purpose of the portion of this SPA for the self-directed PCA rate increase is to reflect the most recent increase in the state's minimum wage within the rate that includes the various components already specified in the approved Medicaid State Plan.

In addition, the rates for home delivered meals (codes 1218Z, 1220Z, and 1221Z) under the CFC benefit will be increased by 12.5%. The purpose of the portion of this SPA for the home-delivered meals rate increase is to implement funding for rate increases for home-delivered meals included in the state fiscal year (SFY) 2024-2025 biennial state budget enacted by the Connecticut General Assembly and signed into law by the Governor.

Fee schedules are published at this link: <http://www.ctdssmap.com>, then select "Provider", then select "Provider Fee Schedule Download," then select the applicable fee schedule.

Fiscal Impact

DSS estimates that the rate increases to the PCA per diem and overnight services will increase annual aggregate expenditures by approximately \$270,311 in State Fiscal Year (SFY) 2024 and \$413,578 in SFY 2025.

DSS estimates that the rates increases to the home-delivered meals will increase annual aggregate expenditures by approximately \$27,856 in SFY 2024 and \$45,964 in SFY 2025.

Obtaining SPA Language and Submitting Comments

The proposed SPA is posted on the DSS website at this link: <https://portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-State-Plan-Amendments>. The proposed SPA may also be obtained at any DSS resource center, 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 or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105. Please reference fSPA 23-AD: Community First Choice - Rate Increases for Home-Delivered Meals, PCA Per Diem, and PCA Overnight Services.

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than **October 26, 2023**.

DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 24-B: Section 1915(i) Portion of the Connecticut Home Care Program for Elders - Rate Increases for Home Delivered Meals and Adult Day Services

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). Public comment information is listed below.

Changes to Medicaid State Plan

Effective on or after January 1, 2024, and subject to CMS approval, this SPA will amend Attachment 4.19-B of the Medicaid State Plan in order to reflect a 12.5% rate increase to home delivered meals and a 8.6% rate increase to adult day services for the state plan Home and Community-Based Services (HCBS) option under section 1915(i) of the Social Security Act portion of the Connecticut Home Care Program for Elders (CHCPE).

The increased rates for the affected adult day health procedure codes are as follows:

Code	Description	New Rate
1200Z	Adult Day Health – Full Day (Non-Medical)	\$92.45
1201Z	Adult Day Health – Full Day (Approved Medical)	\$98.10
1202Z	Adult Day Health – Half Day (Less Than O	\$62.24

The increased rates for the affected home delivered meals codes are as follows:

Code	Description	New Rate
1218Z	Meal Service: Single Hot Meal/Meal Service – Single Meal – Hot/Cold	\$6.32
1220Z	Double Meal (One Hot – One Cold) Per Double Meal/Meal Service – Double (One Hot/ Cold	\$11.57
1221Z	Kosher Meals Double	\$11.57

The purpose of this SPA is to implement funding for rate increases included in the State Fiscal Year (SFY) 2024-2025 biennial state budget enacted by the Connecticut General Assembly and signed into law by the Governor and to improve access to these services.

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

Fiscal Impact

DSS estimates that the provisions of this SPA will increase annual aggregate expenditures by approximately \$29,160 in State Fiscal Year (SFY) 2024 and \$69,985 in SFY 2025.

Obtaining SPA Language and Submitting Comments

The proposed SPA is posted on the DSS website at this link: <https://portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-State-Plan-Amendments>. The proposed SPA may also be obtained at any DSS resource center, 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 or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105. Please reference “SPA 24-B: Section 1915(i) Portion of the Connecticut Home Care Program for Elders – Rate Increases for Home Delivered Meals and Adult Day Services”.

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than **October 26, 2023**.
