

ADMINISTRATIVE REGULATIONS

Regulations and notices published herein, pursuant to General Statutes Sections 4-168 and 4-173, are printed exactly as submitted by the forwarding agencies. These, being official documents submitted by the responsible agencies, are consequently not subject to editing by the Commission on Official Legal Publications.

A cumulative list of effective amendments to the Regulations of Connecticut State Agencies may be found in the Connecticut Law Journal dated January 3, 2012.

DEPARTMENT OF SOCIAL SERVICES

Notice of Intent to Adopt Regulations

In accordance with the provisions of subsection (a) of section 4-168 of the Connecticut General Statutes, as amended, notice is hereby given that the Commissioner of Social Services, under the authority of section 17b-262 of the Connecticut General Statutes, proposes to adopt new regulations, sections 17b-262-912 to 17b-262-925, inclusive, of the Regulations of Connecticut State Agencies, to provide Medicaid payment for services provided by licensed behavioral health clinicians in independent practice to individuals under twenty-one (21) years of age.

Statement of purpose: (A) The purpose of the regulations is to add licensed behavioral health clinicians to the list of independent practitioners that may bill for Medicaid payment and to establish the rules governing payment for these services. The problems, issues or circumstances that the regulation proposes to address: Connecticut's Medicaid State Plan was modified effective January 1, 2008, to provide coverage for the services provided to individuals under twenty-one (21) years of age by licensed clinical social workers, licensed marital and family therapists, licensed professional counselors and licensed or certified alcohol and drug counselors. Historically, independent licensed behavioral health clinicians have been able to be reimbursed for services provided to individuals covered by HUSKY A, but not for individuals covered by Medicaid fee-for-service. The HUSKY A waiver will be sunseting on December 31, 2011. Individuals currently covered by HUSKY A will be absorbed by the Medicaid fee-for-service program effective January 1, 2012. This regulation will permit expansion of coverage for independent licensed behavioral health clinicians to all Medicaid covered individuals in compliance with the revised State Plan and will assure continued coverage for the former HUSKY A clients after the waiver ends. Currently there are no regulations governing the payment of these independent licensed behavioral health clinicians under Connecticut Medicaid. The proposed regulations will set forth the requirements for payment of licensed, independent behavioral health clinicians under Medicaid.

(B) The main provisions of the regulation: (1) Define "licensed behavioral health clinicians"; (2) identify the individuals to whom licensed behavioral health clinicians may provide reimbursable services; (3) identify the services covered, the service limitations and the services not covered by Medicaid; (4) describe the prior authorization and registration requirements; (5) identify the rules concerning billing procedures, payment, payment rate and payment limitations; and (6) describe the documentation requirements licensed behavioral health clinicians shall meet.

(C) The legal effects of the regulation, including all of the ways that the regulation would change existing regulations or other laws are: The proposed regulation will permit payment for services provided by independent licensed behavioral health clinicians to individuals under the age of twenty-one (21) covered by the Medicaid program. This will also ensure that individuals enrolled in HUSKY A who are receiving services from an independent licensed behavioral health clinician in private practice prior to January 1, 2012, may continue to receive those services and have the services paid for by Medicaid after the HUSKY A waiver program sunsets.

A copy of the complete text of these regulations is available at no cost upon request from the Department of Social Services, Office of Legal Counsel, Regulations and Administrative Hearings, 25 Sigourney Street, 12th floor, Hartford, CT 06106; email sandie.prentiss@ct.gov.

In addition, all written comments regarding these regulations may be submitted within 30 days of the publication of this notice to the Department of Social Services, Office of Legal Counsel, Regulations, and Administrative Hearings, 25 Sigourney Street, Hartford, CT 06106. Attention: Brenda Parrella. A hearing will be scheduled on the proposed regulation if requested by fifteen persons, by a governmental subdivision of an agency or by an association having not less than fifteen members, if notice of the request is received by the Department within fourteen days after the date of publication of this notice.

When submitting comments please refer to regulation control #11-11/PP.

DEPARTMENT OF SOCIAL SERVICES

Notice of Intent to Adopt Regulations

In accordance with the provisions of subsection (a) of section 4-168 of the Connecticut General Statutes, as amended, notice is hereby given that the Commissioner of Social Services, under the authority of section 17b-262 of the Connecticut General Statutes, proposes to amend sections 17b-262-630 to 17b-262-640, inclusive, of the Regulations of Connecticut State Agencies, to provide Medicaid payment for services provided by independent occupational therapists.

Statement of purpose: (A) The purpose of the regulations is to add "independent occupational therapists" to the list of independent therapists that may bill for Medicaid payment under sections 17b-262-630 to 17b-262-640, inclusive, of the Regulations of Connecticut State Agencies. The problems, issues or circumstances that the regulation proposes to address: Effective January 1, 2012, the Department will transition from a Managed Care Organization ("MCO") model to an Administrative Services Organization ("ASO") model. Under the ASO model, the Department's existing regulations will be used to determine the requirements for payment for medical services. Currently there are no regulations governing the payment of independent occupational therapists under Medicaid and, therefore, those services will not be reimbursed under an ASO model unless the regulation is amended as proposed. The proposed regulation will set forth the requirements for payment for independent occupational therapist under Medicaid. This amendment will also permit individuals receiving independent occupational therapy services under their MCOs prior to the transition to continue to receive those services after they are transitioned to the ASO.