

DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 20-Z: COVID-19 Temporary Rate Increase for Non-Sterile Gloves

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 September 1, 2020 and continuing until 90 days after the termination of the state or federal Coronavirus Disease 2019 (COVID-19) Public Health Emergency declarations, as extended, whichever is later, SPA 20-Z will amend Attachments 4.19-B of the Medicaid State Plan in order to revise the medical surgical supplies fee schedule to increase the rate for non-sterile gloves as detailed below, which is necessary to address access to care issues which have escalated during this pandemic. In addition, effective on or after September 1, 2020, the Department will reduce the quantities from 4 boxes a month to 3 boxes per month, which is necessary due to the limited quantities that many suppliers and manufacturers are facing and in order for the fiscal impact of the rate increase to have a minimal increase in federal and state expenditures.

Specifically, the Department will temporarily increase reimbursement of non-sterile gloves as follows:

Code	New Quantities per month	New Reimbursement per box
A4927 – Gloves, non-sterile, per 100	3 boxes	\$8.00

Please note that non-sterile gloves are covered in order to prevent an individual from coming into contact with bodily fluids (e.g., during wound care, incontinence care, applying an ostomy or colostomy, tube feedings etc.). Non-sterile gloves are classified as personal protection equipment (PPE) against COVID-19 or in other contexts in which sterile gloves are necessary.

Fiscal Impact

DSS estimates that this SPA will increase annual aggregate expenditures by approximately \$205,000 in Federal Fiscal Year (FFY) 2021 and \$211,000 in FFY 2022.

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 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 20-Z: COVID-19 Temporary Rate Increase for Non-Sterile Gloves.”

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than September 9, 2020.

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

(7) Home Health Services –

(a) Intermittent or part-time nursing services provided by a home health agency or by a registered nurse when no home health agency exists in the area are provided with limitations.

(b) Home health aide services provided by a home health agency with limitations.

(c) Physical therapy, occupational therapy, or speech pathology and audiology services provided by a home health agency or medical rehabilitation facility are provided with limitations.

The fee schedule for licensed home health care agencies for service (a), (b), and (c) above can be accessed and downloaded by going to the Connecticut Medical Assistance Program website: www.ctdssmap.com. From this web page, go to “Provider,” then to “Provider Fee Schedule Download.” Home health service rates were set as of October 1, 2019 and are effective for services on or after that date. Rates are the same for private and governmental providers and are published on the agency’s website. The Department may add or delete codes in order to remain compliant with HIPAA. In no case will the fee paid to an agency exceed the agency charge to the general public for similar services.

(d) Medical supplies, equipment and appliances suitable for use in the home – The current fee schedule was set as of September 1, 2020 and is effective for services provided on or after that date, except that codes may be deleted or added in order to remain compliant with HIPAA. The fee schedule can be accessed and downloaded by going to the Connecticut Medical Assistance Program website: www.ctdssmap.com. From this web page, go to “Provider,” then to “Provider Fee Schedule Download.” Over-the-counter products provided by pharmacies are reimbursed at Average Wholesale Price (AWP). All governmental and private providers are reimbursed according to the same fee schedule.

(8) Private duty nursing services – Not provided.

TN # 20-Z
Supersedes
TN # 20-0011

Approval Date _____

Effective Date 09/01/2020