

**DEPARTMENT OF SOCIAL SERVICES**

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

**SPA 22-G: Dental Services – HIPAA Compliance Fee Schedule Updates**

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 January 1, 2022, SPA 22-G will amend Attachment 4.19-B of the Medicaid State Plan to incorporate the January 2022 Healthcare Common Procedure Coding System (HCPCS) changes (additions, deletions and description changes) to the dental fee schedules for adults and children. Codes that are being added are being priced using a comparable methodology to other codes in the same or similar category and replacement codes are being priced in a manner designed to make the billing code updates cost neutral. DSS is making these changes to ensure that these fee schedules remain compliant with the Health Insurance Portability and Accountability Act (HIPAA).

Specifically, the following procedure codes are being added to the Dental fee schedule:

<b>Added Code</b>	<b>Description</b>
D7299	Removal of temporary anchorage device, requiring flap
D7300	Removal of temporary anchorage device without flap
D5725	Rebase hybrid prosthesis
D5765	Soft liner for complete or partial removable denture-indirect
D8020	Limited orthodontic treatment of the transitional dentition

The former code, D7997 “removal of hardware” is now better defined by the addition of codes D7299 and D7300 by describing two types of common hardware types used to treat dental facial conditions.” In addition, D5725 and D5765 will be added to the existing fee schedule in the prosthodontic section. These codes have been created to be more inclusive and expand on the existing types of partials. Lastly, D8020 has also been added to be more specific regarding the types of dental services that will be rendered.

Fee schedules are published at this link: <http://www.ctdssmap.com>, then select “Provider”, then select “Provider Fee Schedule Download” Accept or Decline the Terms and Conditions and go to the Adult or Children’s Dental Fee Schedule, as applicable.

### **Fiscal Impact**

DSS estimates that this SPA will not change annual aggregate expenditures in State Fiscal Year (SFY) 2022 and SFY 2023.

### **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](mailto: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 22-G: Dental Services – HIPAA Compliance Fee Schedule Updates”.

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than January 12, 2022.

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Connecticut

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**(10) Dental Services:**

- (a) Dental Services Provided to Adults: Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of dental services provided to adults. The agency's fee schedule rates were set as of January 1, 202~~2~~<sup>1</sup> and are effective for services provided on or after that date. All rates are published on the Connecticut Medical Assistance Program website: <https://www.ctdssmap.com>. From this web page, go to "Provider," then to "Provider Fee Schedule Download," then select the applicable fee schedule.
- (b) Dental Services Provided to Children: Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of dental services provided to children. The agency's fee schedule rates were set January 1, 202~~2~~<sup>1</sup> and are effective for services provided on or after that date. All rates are published on the Connecticut Medical Assistance Program website: <https://www.ctdssmap.com>. From this web page, go to "Provider," then to "Provider Fee Schedule Download," then select the applicable fee schedule.

TN # 22-G

Supersedes

TN # 21-0009

Approval Date \_\_\_\_\_

Effective Date 01/01/2022