

June 22, 2009

Dear Participating Provider:

Effective July 1, 2009, Community Health Network of Connecticut (CHNCT) will adhere to and implement the changes for Rehabilitation Clinics as detailed by State of Connecticut, Department of Social Services Policy Transmittal PB2009-13. This Policy Transmittal discusses new requirements for claims submissions and prior authorization. Please review the attached Policy Transmittal.

In accordance with the above-mentioned transmittal, all Rehabilitation Clinics must begin billing with the required GO or GP modifiers effective July 1, 2009. The modifiers are required to distinguish between services performed by a physical or occupational therapist in a Rehabilitation Clinic setting. DSS clearly states that failure to utilize the appropriate modifier will result in denial of claims.

If you have questions on the above changes, please contact our dedicated **Provider Call Center at 800-440-5071, option 7** (Monday-Thursday 8:00 am – 5:00 pm and Friday 9:00 am- 5:00 pm. The Provider Call Center is closed from 12:00 pm to 1:00 pm daily) or your dedicated Senior Provider Relations Representative.

Sincerely,

*Rafael Batista, Jr.*

Rafael Batista, Jr.  
Director, Provider Relations