



## Process for Reversing 10/1 Fee Schedule Cuts

We remain committed to working closely with providers to restore reimbursement levels in effect prior to October 1, 2025. In consultation with provider partners, Standard Plans and Tailored Plans will follow the process outlined below:

### *Outstanding Recoupments*

Any outstanding recoupment related to the October 1 fee schedule changes are cancelled effective immediately.

### *Revised Fee Schedules*

DHHS will issue updated fee schedules reflecting the restored rates. However, because CMS's annual coding update occurred concurrently with the October 1 changes, the previous fee schedules are no longer compatible with current provider and plan systems. New schedules must therefore reflect both the restored rates and updated coding standards.

### *Effective Date*

Plans will work to implement the new fee schedules as quickly as possible, but no later than 45 days following DHHS's issuance of revised fee schedules. Currently, DHHS is targeting January 5, 2026, as the date when revised fee schedules will be shared with the plans. Providers should continue to monitor communications from plans for more details and any updates on timelines.

### *Reprocessing*

Plans will begin reprocessing claims as soon as possible. While plans have up to 30 days to reprocess following implementation of the updated fee schedules, we intend to do so with urgency to swiftly get necessary funds to providers.