

# Provider Update

## NEWS FOR THE NETWORK

April 2025

*Provider Update* is a monthly, online provider newsletter. We encourage you to [register](#) to receive *Provider Update* by email. If you have registered for email distribution but aren't receiving *Provider Update* at the beginning of each month, look in your spam folder or check with your organization's system administrator to ensure the organization's firewall is adjusted to allow for receipt of *Provider Update* from (SENDER: [providerupdate@email-carepartnersct.com](mailto:providerupdate@email-carepartnersct.com)).

## Reminders and Updates

### Updates to Inpatient Facility Payment Policy

CarePartners of Connecticut is making updates to our Inpatient Facility Payment Policy, effective for dates of service beginning June 1, 2025.

Our current Inpatient Facility Payment Policy states that members who are readmitted to the same hospital within 30 days of the original inpatient discharge for the same or a related condition for which they were treated during the original admission may be reviewed. If it is determined that the member is being treated for the same or a related condition as the original admission, the readmission will be retracted.

For dates of service on or after June 1, this review will apply to members who are readmitted to the same hospital **or the same hospital system** within 30 days of the original inpatient discharge. This change in review process supports [our goal of reducing avoidable readmissions](#) and will apply for claims paid using diagnosis-related group or case rate payment methodology.

Refer to the [updated policy](#) for more information. In addition, we have updated our [Readmission \(Bridging of Claims\) Payment Policy](#) to reflect this change. ◆

### Payment Policy update: Advanced Practice Providers

CarePartners of Connecticut has updated our former Nurse Practitioners and Physician Assistants Payment Policy, which will now be known as the Advanced Practice Providers Payment Policy.

In addition to renaming the policy, we have incorporated other edits including minor administrative edits as well as bolstering the existing information with examples of advanced practice providers for further clarity.

Please refer to [the updated policy](#) for more information. ◆

### Clarified billing reminder: ambulatory surgical center services

In the March issue of *Provider Update* we offered some reminders of correct coding practices to keep in mind during certain billing scenarios, including when billing for ambulatory surgical center services.

We're providing another reminder to support our providers in ensuring that you're billing appropriately for these services, and to offer some additional clarification. When billing for **ambulatory surgical center facility** services on a CMS-1500 form or an 837 professional claim transaction, remember to include the modifier SG in order to apply the correct benefit configuration (e.g., cost sharing, deductible).

Please keep in mind that this modifier is applicable only to claims from ambulatory surgical centers for facility charges; it is **not** billable on claims for physician or other qualified health care professional services. Modifier SG is intended for use as an informational modifier to be appended to any facility service rendered by an ambulatory surgical center to identify it as an ambulatory surgical center service.

When applicable, always submit a modifier that reduces the fee schedule/allowable amount in the primary modifier position, and modifier SG in the secondary position. ◆

## Help us keep directory information up to date

Provider directories are an important resource for health care consumers, who utilize them to select providers, make appointments, and access care. In accordance with the No Surprises Act of 2021, providers should review and revalidate their information every 90 days to ensure accuracy of the Provider Directory. Failure to review and update information at least every 90 days may result in directory suppression until such information is validated.

Please make sure to notify CarePartners of Connecticut in advance of any changes to your practice address(s), phone number, office hours, ability to accept new patients, and any other changes affecting availability to see patients. You can confirm current practice information using the [Doctor Search](#). If the information listed is incorrect, update it as soon as possible by informing CarePartners of Connecticut using the Directory Inaccuracy reporting feature located on the search or by completing the [Provider Information Change Form](#) and returning it to CarePartners of Connecticut by email at [provider\\_information\\_dept@point32health.org](mailto:provider_information_dept@point32health.org), as noted on the form.

If CarePartners of Connecticut identifies potentially inaccurate provider information in the directory, we may outreach to your practice to validate or obtain accurate information. If we are unable to obtain a timely response, the provider record may be subject to suppression in the directories until up-to-date information is received. ◆

## CarePartners of Connecticut Medical Necessity Guideline Updates

Providers and office staff can refer to the following chart to review changes and updates to CarePartners of Connecticut's Medical Necessity Guidelines, which detail coverage and prior authorization criteria.

| MNG Title   | Eff. date | Summary   |
|---|-----------|---|
| <a href="#">CarePartners of Connecticut Prior Authorization, Notification, and No Prior Authorization</a> | 1/1/2025  | Prior authorization is no longer required for CPT codes 93970 and 93971 related to the treatment of varicose veins. |



## Prior authorization reminder: intensity-modulated radiation therapy

In the [November issue of Provider Update](#), CarePartners of Connecticut announced a new prior authorization requirement effective Jan. 1, 2025 for intensity-modulated radiation therapy (IMRT). As detailed in that article, a 90-day continuity of care plan was put in place for members who were in an active course of IMRT treatment prior to Jan. 1, in alignment with our Out of Network at the In Network Level of Benefit and Continuity of Care Medical Necessity Guidelines.

We're reminding our provider community that **as of April 1, 2025, the continuity of care period has ended and a prior authorization must be obtained for the following codes for all members starting IMRT prior to their course of treatment:**

- 77385
- 77386
- G6015
- G6016

For prior authorization and coverage criteria, please refer to our [Intensity-Modulated Radiation Therapy Medical Necessity Guidelines](#). ◆

## Medical drug program updates

You can refer to the chart below to review changes and updates related to CarePartners of Connecticut's prior authorization and coverage program for medical drugs.

| New prior authorization programs                 |           |  |
|--|-----------|--|
| Drug(s) and policy                               | Eff. date | Additional information   |
| Niktivmo (axatilimab-csfr)                       | 4/1/2025  | Prior authorization is now required for Niktivmo (HCPCS J3590), approved by the FDA in August 2024 for the treatment of chronic graft-versus-host disease (cGVHD) after failure of at least two prior lines of systemic therapy in adult and pediatric patients weighing at least 40 kg.   |
| Hympavzi (marstacimab-hncq)                      | 4/1/2025  | Prior authorization is now required for Hympavzi (HCPCS J3590), approved by the FDA in October 2024 for routine prophylaxis to prevent or reduce the frequency of bleeding episodes in adult and pediatric patients 12 years of age and older with hemophilia A without factor VIII inhibitors or hemophilia B without factor IX inhibitors. |
| Aucatzyl   | 4/1/2025  | Prior authorization is now required for Aucatzyl (HCPCS C9301), a CD19-directed genetically modified autologous T cell immunotherapy indicated for the treatment of adults with relapsed or refractory B-cell precursor acute lymphoblastic leukemia (ALL).  |
| Tecelra  | 4/1/2025  | Prior authorization is now required for the CAR t-cell medication Tecelra (HCPCS Q2057).   |
| Updates to existing prior authorization programs |           |  |
| Drug(s) and policy                               | Eff. date | Additional information   |
| Hemlibra (emicizumab-kxwh)                       | 6/1/2025  | Adding requirement that patients have severe hemophilia as defined by less than 1% of endogenous factor VIII.  |
| Breyanzi   | 4/1/2025  | Criteria updated to remove a limitation in alignment with National Comprehensive Cancer Network guidelines and published journals.   |



## Language interpretation services reminder

In support of our provider partners and culturally diverse member population, we'd like to remind you that CarePartners of Connecticut offers access to free language interpretation services to facilitate the care and treatment of your non-English-speaking patients. Patients in need of qualified interpreters or translation of written materials are encouraged to outreach to CarePartners of Connecticut Member Services at 888-341-1507 for additional information. ◆

## Living Well Community – upcoming programs for providers and members

CarePartners of Connecticut is pleased to share that the virtual 2025 Living Well Community brought to you by Point32Health is thriving (CarePartners of Connecticut is part of Point32Health's [family of companies](#)). Offering wellness webinars, guided meditation, fitness classes, and more, we'll focus in the months ahead on developing healthy eating habits; exploring seasonal and cultural cuisines; and making food choices to help optimize nutrition and reduce food waste.

We'll also continue to feature monthly interviews with leading mindfulness researchers through [The Art and Science of Awareness](#) series and offer weekly sessions with mindfulness experts and instructors designed to help us [Mind the Moment in Everyday Life](#).

For program details and session links, visit the [Living Well Community page](#), which is updated regularly. We encourage providers to share this information with patients, office staff, and community members who could benefit or may be interested in participating. The Living Well Community program is free, and no advanced registration is required.

To access recordings of past Living Well Community webinars, classes, and other offerings, visit the Point32Health [Living Well](#) and [Mind the Moment](#) YouTube pages. You can also [view the recorded version](#) of Dr. Jud Brewer's 2024 Hunger Habit workshop for Living Well, which is available until April 22, 2025. To access Living Well's 24/7 meditation hotline, featuring brief, pre-recorded sessions in English and Spanish, call 877-589-6736. ♦

## Helpful reminders for providers

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|--|--|
| <b>Avoid printing</b>                            | All CarePartners of Connecticut provider documentation is updated regularly. For the most current information, providers should view all documentation online at <a href="https://carepartnersct.com/for-providers">carepartnersct.com/for-providers</a> and avoid printing.   |
| <b>Browser note</b>                              | If you are using an outdated or unsupported browser, certain features on CarePartners of Connecticut's website may be unavailable. For an improved user experience, upgrade your browser to the latest version of Mozilla Firefox or Google Chrome.  |
| <b>Secure Provider Portal self-service tools</b> | CarePartners of Connecticut's online self-service tools enable providers to electronically submit transactions and/or access information related to claims submission, claims status, referrals, prior authorizations, electronic remittance advice, member eligibility, panel information and more. Log in to the secure Provider portal to manage transactions online. |

|                             |  |
|-----------------------------|--|
| <b>Not yet registered?</b>  | Information on how to <a href="#">register for secure access</a> is available on CarePartners of Connecticut's public Provider <a href="#">website</a> . |
| <b>For more information</b> | <ul style="list-style-type: none"><li>• <a href="#">Public Provider Website</a></li><li>• <a href="#">Secure Provider Portal</a></li></ul>               |
| <b>Contact information</b>  | Call Provider Services at 888-341-1508, weekdays, 8 a.m. to 5 p.m.   |