

Provider Update NEWS FOR THE NETWORK

January 2026

Provider Update is a monthly, online provider newsletter. We encourage you to <u>register</u> 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).

Reminders and Updates

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 are responsible for reviewing and revalidating their information every 90 days to ensure accuracy of the Provider Directory. If you do not review and update your information at least every 90 days, this may result in suppression from the directory until your 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, 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.

The importance of culturally appropriate health care

As you know, the ability of health care professionals to provide culturally appropriate care is essential to the overall health and well-being of our communities' diverse populations. Because beliefs and behaviors surrounding health are influenced by race, ethnicity, nationality, and language, it's vital for providers to thoughtfully consider these factors when developing care plans and treating patients.

Racial and ethnic minority groups often face health care challenges that others do not. Whether due to social stigma, geographic hurdles, or financial or language barriers, many individuals and families are unable to access much-needed medical and behavioral health care.

CarePartners of Connecticut 1 Provider Update January 2026

CarePartners of Connecticut's <u>language interpretation services</u> are available to assist providers with communication for non-English-speaking patients. In addition to supporting patients' communication needs, health care professionals can practice culturally appropriate care by:

- Integrating traditional healers into patient care teams
- Incorporating culture-specific values into treatment planning
- Including family and community members in decision making
- Collaborating with local clinics that are easily accessible to specific populations
- Expanding practice hours to accommodate work schedules and geographic challenges
- Educating staff on the components and importance of culturally appropriate health care

We recognize that providing culturally appropriate medical and behavioral health care requires special consideration, but when we take the time to understand and meet the needs of patients with diverse backgrounds, we not only address health disparities, but help improve quality of care and overall health outcomes across our communities.

Providers can learn more — or stay up to date — on how best to serve patients of all backgrounds by referring to the U.S. Department of Health and Human Services' Physician's Practical Guide to Culturally Competent Care.

Reducing 30-day readmissions

Reducing hospital readmissions within 30 days is a considerable priority in health care, leading to increased patient satisfaction and improved outcomes.

To do this, it's essential to identify patients who may not understand their transition of care (TOC) instructions, including necessary follow-up care and changes to their medication regimens, and to provide targeted post-discharge TOC interventions.

Effective TOC interventions should prioritize timely follow-up and patient education.

Timely follow-up

Follow-up that is absent or delayed too far beyond the window immediately following a patient's transition out of the hospital can be a significant factor in the occurrence of 30-day readmissions. Some examples of timely follow-up that can help avoid these early readmissions include:

- Communication from the patient's primary care physician, such as reaching out to schedule a follow-up appointment
- Follow-up phone calls from any member of the patient's care team
- Home visits, when appropriate
- Medication reconciliation/review to ensure that the patient's medications are being used and monitored appropriately

Patient education

It's critical to make sure the patient has a solid understanding of their TOC plan so they can take the correct steps to avoid adverse events and readmissions. An integral component of TOC patient education is medication management; CarePartners of Connecticut strongly encourages providers to review these patients' medication lists with them to ensure that the lists are accurate and they have the correct prescriptions. •

Updates to Medical Necessity Guidelines

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.

Updates to Medical Necessity Guidelines (MNG)				
MNG Title	Eff. date	Summary		
Intensity Modulated Radiation Therapy (IMRT)	12/31/2025	We have temporarily retired the Intensity-Modulated Radiation Therapy (IMRT) Medical Necessity Guidelines, as the codes listed as requiring prior authorization on the MNG are being discontinued as of Dec. 31, 2025. As a result, prior authorization is currently no longer required for IMRT. We will continue to evaluate prior authorization requirements in the future, and will provide appropriate notice in the event that authorization is reinstated.		



Updates to Payment Policies

Please refer to the chart below for information on new and updated CarePartners of Connecticut Payment Policies. For details, access the policies listed below by navigating to the Payment Policies category of our Provider Resource Center.

Updates to Payment Policies				
Payment Policy Title	Eff. date	Summary		
Unlisted and Not Otherwise Classified Codes Policy	1/1/2026	Minor administrative updates for accuracy and clarity.		
General Coding and Claims Editing	1/1/2026	As a reminder, in alignment with guidance from the Centers for Medicare & Medicaid Services, the reporting of CPT code 85060 (PC/TC 8) by a physician or other qualified health care professional is appropriate only when it is accompanied by place of service (POS) code 21 (inpatient hospital.)		
		CarePartners of Connecticut will deny 85060 (PC/TC 8) when billed without POS 21.		

Helpful reminders for providers

Avoid printing	All CarePartners of Connecticut provider documentation is updated regularly. For the most current information, providers should view all documentation online at carepartnersct.com/for-providers and avoid printing.
Browser note	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.
Secure Provider Portal self-service tools	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.

Not yet registered?	Information on how to register for secure access is available on CarePartners of Connecticut's public Provider website.
For more information	Public Provider Website; Secure Provider Portal
Contact information	Call Provider Services at 888-341-1508, weekdays, 8 a.m. to 5 p.m.