

Provider Update

NEWS FOR THE NETWORK

May 2024

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).

Reminders and Updates

Claims submission connectivity established with RelayHealth

We're pleased to report that CarePartners of Connecticut has established 837 electronic claims submission connectivity with Optum's RelayHealth clearinghouse, as of April 23, 2024.

When Change Healthcare, a subsidiary of Optum, experienced a cybersecurity event on Feb. 21, CarePartners of Connecticut suspended system access and data transmissions between our organization and Change Healthcare. This affected providers who utilized Change Healthcare's Emdeon as a clearinghouse.

During the outage period, providers were able to submit claims via another clearinghouse or on paper. While Change Healthcare has not restored Emdeon, they have directed users to Optum's iEDI and RelayHealth. Now, CarePartners of Connecticut has established a connection with RelayHealth as a clearinghouse option.

The following functionality is still unavailable through ChangeHealthcare: 276/277 claims status inquiry, 270/271 eligibility and benefits inquiry response, and 278 referral and authorization.

However, CarePartners of Connecticut offers alternatives for you to utilize to conduct these transactions. For more information, please refer to the [Our Response to Change Healthcare's Cybersecurity Incident page](#), which includes a chart that notes ways in which you can conduct affected transactions.

This page also details accommodations that we have in place to support providers who utilize Change Healthcare, including information on claims timely filing. We encourage you to visit it regularly for updates on our response to the Change Healthcare incident.

If you need any guidance with electronic transactions, please contact the electronic data interchange (EDI) team at edi_operations@point32health.org. ♦

Payment policy updates

CarePartners of Connecticut would like to inform our provider network of some recent updates to our payment policies.

We have retired our Outpatient Cardiac and Pulmonary Rehabilitation Facility Payment Policy, and the pertinent information from this policy can now be found on the [Cardiac Services Payment Policy](#).

In addition, CarePartners of Connecticut has developed two new payment policies outlining essential billing and reimbursement guidelines, provider requirements and responsibilities, and other information pertaining to Fraud, Waste, and Abuse, as well as Clinical Trials. These policies document existing requirements for CarePartners of Connecticut providers and do not represent a change in processes or services.

Fraud, Waste, and Abuse

This policy provides detailed definitions for what CarePartners of Connecticut considers fraud, waste, and abuse to entail.

CarePartners of Connecticut is committed to detecting, investigating, and preventing wrongful acts, and will identify, investigate, recover funds, report, and when appropriate, take legal actions, if suspected fraud, waste, and/or abuse has occurred.

We reserve the right to conduct audits on any provider and/or facility to ensure compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply, CarePartners of Connecticut will expect the provider/facility to refund all payments related to noncompliance.

Clinical Trials

The Clinical Trials Payment Policy outlines CarePartners of Connecticut's coverage of routine costs associated with in-network services rendered during qualified clinical trials for cancer and other life-threatening conditions, in accordance with state and federal mandates and when medically necessary and consistent with the member's benefits.

For complete information, please refer to the [Fraud, Waste, and Abuse](#) and [Clinical Trials Payment Policies](#). ♦

Join us for Dr. Amishi Jha's Peak Mind webinar!



We're pleased to share that best-selling author and neuroscientist, Dr. Amishi Jha is back with new insights on increasing performance in high stress, high stakes environments, as well as in everyday life. Dr. Jha's webinar will feature a panel of mindfulness

experts who will share practical advice for starting, rebooting, and maintaining personal pursuit of a peak mind.

We encourage our provider partners to share information about this event with their patients, and join us as we learn how paying attention can boost our energy and focus!

Peak Mind: Impact and Practice

Wednesday, May 15

10-11 a.m.

[Registration information](#)

[Learn more about our custom mindfulness programming for providers](#), along with links to Point32Health mindfulness resources that you can share with your patients. ♦

Bill capped rental modifiers as appropriate

CarePartners of Connecticut would like to remind our provider network that capped rental durable medical equipment (DME) items (i.e., DME items that may only be reimbursed for a certain number of months per CMS) should be billed with the appropriate capped rental modifier, in accordance with correct coding practices.

When billing capped rental equipment codes for Medicare members, you must use modifier KH for the first month of the rental, modifier KI for the second and third months, and modifier KJ for months four through 13. It is not appropriate to report modifier RR throughout the rental period.

KH	Initial claim, either rent (first month) or purchase
KI	Second or third month rental
KJ	Rental month four to 13
NU	New equipment
UE	Used durable medical equipment

When billing for new and used equipment purchases, providers must continue using the NU (new) and UE (used) modifiers. ♦

Depression screening in the primary care setting

With many patients turning to their primary care doctors with physical symptoms that often co-exist with depression, we are reminding our provider partners of the importance of conducting depression screening during routine medical office visits.

There are several depression screening tools available for use in primary care, including the Patient Health Questionnaire (PHQ-2) as well as the [PHQ-9](#). The PHQ-9 is indicated when a patient conveys feelings of hopelessness, depression, or lack of interest when given the PHQ-2. The PHQ-9 is considered a strong foundation for diagnosis, symptom monitoring, and determination of treatment, including the need for specialty and collaborative care.

Additional depression screening tools and provider resources, as well as recommendations for follow-up protocol based on PHQ-9 scores can be found within Point32Health's [Guide for Treating Depression in the Primary Care Setting](#).

Impacting patient medication adherence

According to the National Institutes of Health, primary care providers prescribe 79% of antidepressant medications for people in the U.S. who are being treated for depression. Prescribing physicians can create a foundation for successful patient medication adherence by:

- Educating patients on the medication's purpose, benefits, and potential side effects
- Explaining the importance of taking medication as prescribed and explaining the importance of continuing to take medication even after beginning to feel better
- Encouraging patients to choose automatic prescription refill and mail delivery options
- Scheduling appointments with patients within four weeks after prescribing medication, with subsequent phone call and appointment follow up as needed
- Reminding patients to reach out with medication questions and for support during treatment

Depression resources for your patients

For patients who could benefit from the interpersonal support and structure of an in-person or virtual depression support group, there are a variety of resources you can share, including:

- [The Depression and Bipolar Support Alliance \(DBSA\)](#)
- [Anxiety & Depression Association of America](#)
- [National Alliance on Mental Illness](#)

Facilitating follow-up care

We appreciate the commitment of primary care physicians to identifying behavioral health needs of their patients and facilitating follow-up services in a timely manner. For assistance with locating a behavioral health clinician for your CarePartners of Connecticut members, contact Provider Services at 888-341-1508. ♦

CarePartners of Connecticut's access to care standards

One of CarePartners of Connecticut's fundamental priorities is ensuring the best possible access to care for the members we serve. To that end, the Access Standards section of our Provider Manual (located on page 17) outlines network practitioner standards regarding clinician availability, timeliness of appointments, and telephone accessibility, among other things. Please refer to the [Provider Manual](#) to review these standards and requirements. ♦

Upcoming training opportunity

CarePartners of Connecticut offers interactive training sessions for up-to-date information on products, plans, and processes that you can attend without having to leave your office. To register for a session, simply find a training date that works for you on our [webinars page](#), click the link, and enter the requested information.

- Tuesday, May 21 from 11 a.m.–noon ET

For the complete schedule of webinars throughout the year, please refer to this list of [2024 trainings](#). ♦

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.–5 p.m.