

Provider Update

NEWS FOR THE NETWORK

July 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).

Reminders and Updates

Coverage changes for Stelara and biosimilars

We want to make you aware of upcoming coverage changes related to Stelara (ustekinumab) and biosimilars. Effective July 1, 2025 for CarePartners of Connecticut members, the ustekinumab biosimilars Yesintek (ustekinumab-kfce) and Steqeyma are being added to the part D formulary and Stelara is being removed. We have notified affected members of these changes, as well.

To continue providing ustekinumab therapy, prescribers should utilize Yestinek and Steqeyma, which will be more cost effective for your patients than Stelara.

Prior authorization is required for these medications. However, the existing authorization for Stelara will be valid for Yesintek and Steqeyma, and you do not need to submit a new prior authorization request until that prior authorization expires.

We strongly recommend that you write a new prescription for Yesintek or Steqeyma to make the transition as seamless as possible. ♦

Updates to Medical Necessity Guidelines

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.

Updates to Medical Necessity Guidelines (MNG)		
MNG Title	Eff. date	Summary
Intravitreal Injections and Corticosteroid Implants for Ophthalmic Conditions	9/1/2025	New guideline outlining coverage of intravitreal injections and corticosteroid implant for ophthalmic conditions, when billed with appropriate diagnosis codes. Prior authorization will not be required.
Upper Gastrointestinal Endoscopy	9/1/2025	New policy outlining coverage of Upper GI endoscopy when billed with the appropriate diagnosis code. Prior authorization will not be required.



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, 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. ♦

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. ♦

Sign up for Electronic Funds Transfer

If you're currently receiving paper checks, it's simple to switch to electronic funds transfer (EFT) at your convenience through Payspan. You'll benefit from:

- **Quicker** access to funds, with payments deposited directly into your bank account
- **Greater** convenience and efficiency with no manual processes or risk of lost paper checks
- **Easy-to-use** payment reports enabling you to track, review, and reconcile current and past online payments through Payspan

When you make the switch to electronic funds transfer with Payspan, you'll no longer receive paper checks, explanations of payment (EOPs), or Electronic Remittance Advice (ERA/835s) from CarePartners of Connecticut. You'll receive your payment and payment advisories from Payspan, which offers two electronic methods of remittance.

- **EOPs** — Access images of your Explanations of Payment (EOPs) online with the ability to view, download, and print up to 18 months of EOPs.
- **ERA/835s** — Choose to have your HIPAA-compliant Electronic Remittance Advice (ERA/835) sent directly to one of the data exchange partners. Simply follow the instructions for routing 835s to an electronic mailbox when activating your account.

Typically, it takes at least 48 hours after enrollment for your EFT account to become activated, and electronic payment is available two business days following payment release from Payspan.

Registering for electronic payments is simple! To get started:

1. Obtain a registration code and PIN by calling Payspan Provider Services at 877-331-7154 or visiting payspanhealth.com/RequestRegCode/.
2. Have your bank name, routing number, account number, and your TIN/NPI handy.
3. Follow the step-by-step registration instructions on the [Payspan registration website](#).

If you already have a Payspan account, update it online to include CarePartners of Connecticut. For questions about EFT, providers can email Payspan at providersupport@payspanhealth.com, or call 877-331-7154. ♦

Medical drug program updates

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)	Eff. date	Policy & additional information
Bendeka (bendamustine)	10/1/2025	Prior authorization will be required for Bendeka (J9034), approved by the FDA in December 2025 for the treatment of chronic lymphocytic leukemia and non-Hodgkin lymphoma. Bendeka will be a non-preferred bendamustine product within the Medicare Part B Step Therapy Medical Necessity Guideline .
Posfrea (palonosetron)	10/1/2025	Prior authorization will be required for Posfrea (J2468), approved by the FDA in March 2016 for the treatment of chemotherapy-induced nausea and vomiting in adults and postoperative nausea and vomiting in adults. Posfrea will be a non-preferred antiemetic within the Medicare Part B Step Therapy Medical Necessity Guideline .
Medicare Part B Step Therapy	7/1/2025	Prior authorization is now required for Opuviz (Q5153), approved by the FDA in May 2024 for the treatment of neovascular (wet) age-related macular degeneration, macular edema following retinal vein occlusion, diabetic macular edema, and diabetic retinopathy. Opuviz will be a non-preferred retinal disorder product within the Medicare Part B Step Therapy Medical Necessity Guideline.
Targeted Immunomodulators – Skilled Administration	7/1/2025	Prior authorization is now required for the following FDA-approved Stelara biosimilars Imuldosa (Q5098), Otulfi (Q9999), Pyzchiva (Q9996, Q9997), Selarsdi (Q9998), Steqeyma (Q5099), Wezlana (Q5137, Q5138), and Yesintek (Q5100).
Vyalev (foscarbidopa/foslevodopa)	7/1/2025	Prior authorization is now required for Vyalev (J7356), approved by the FDA in October 2024 for the treatment of motor fluctuations in adults with advanced Parkinson's disease.



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.