CarePartners of Connecticut MEDICARE ADVANTAGE

Provider Update

NEWS FOR THE NETWORK

July 2026

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

Change in denial process for lack of prior authorization

CarePartners of Connecticut is offering a reminder of the change we previously announced pertaining to claim adjudication for ancillary and supporting services when they are billed in connection with services that require prior authorization and that authorization is not obtained, **as the change is now in effect**.

As we shared in previous issues of *Provider Update*, **effective for dates of service beginning July 1, 2026**, if a claim is denied due to lack of prior authorization, untimely authorization, or failure to meet medical necessity criteria, any related ancillary or supporting services or procedures associated with the denied service, whether billed on the same claim or on separate claims, will also be denied. This includes medications used to support the procedure requiring prior authorization.

Ambulance services as well as the reading of lab/pathology and radiology reports are excluded from this updated denial process. ◆

Reminder: Annual wellness visit covered by calendar year

We're committed to supporting our members in maintaining their optimal health, as well as working with our provider partners to further that common goal. Annual wellness visits are vital to this effort, offering an opportunity for providers and members to collaborate on preventive care and detect and address health issues early, and empowering members to take charge of their health.

As a reminder, CarePartners of Connecticut uses a calendar year (Jan. 1 through Dec. 31) for coverage of annual wellness visits. This means that a member can schedule a wellness visit fewer than 365 days after their previous visit, so long as the visits are in different calendar years (see example below).

Date of wellness visit	Previous wellness visit	Coverage
April 2, 2027	Nov. 16, 2026	Covered visit
Dec. 31, 2027	Jan. 1, 2027	Not covered due to being in same calendar year

We encourage providers to schedule annual wellness visits with members who are overdue for these important check-ins. ◆

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.

At a minimum of every 90 days, providers should make sure to review and verify the accuracy of their information displayed in our Harvard Pilgrim Health Care and Tufts Health Plan provider directories (including practice location, phone number, hours of operation, ability of each individual provider to accept new patients, and any other information that affects the content or accuracy of the directories).

Reporting changes

Changes to data should be reported via the CAQH Provider Data Portal for individual practitioners who have implemented it.

Report any contractual affiliation changes — such as a provider leaving or joining a contracted provider group or practice — to Harvard Pilgrim and/or Tufts Health Plan by:

- Submitting a Provider Change Form to Harvard Pilgrim's Provider Processing Center for Harvard Pilgrim products by email at PPC@point32health.org, ***or***;
- Submitting a Medical or Behavioral Health Provider Information Form to provider_information_dept@point32health.org for Tufts Health Plan products.

If Point32Health identifies potentially inaccurate provider information in the directories, 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.

Attestation for facilities

As a reminder, for contracted facilities, confirmation of your directory data should be submitted using the recently updated facility attestation functionality available on Harvard Pilgrim's secure provider portal, HPHConnect, or on Tufts Health Plan's secure provider portal (available as of June 1, 2025). These online forms allow facilities to confirm that their information is accurate every 90 days to avoid directory suppression. For step-by-step instructions on how to complete the facility attestation forms, please refer to the updated Harvard Pilgrim Completing the Provider Data Attestation for Facilities User Guide and Tufts Health Plan Secure Provider Portal User Guide.

Additional information

For additional information, please refer to the updated Directory Accuracy and Suppression of Unverified Provider Information policy for Harvard Pilgrim Commercial plans, as well as the Directory Accuracy and Suppression of Unverified Provider Information sections recently added to the Providers sections of our Tufts Health Plan Commercial, Senior Products, and Public Plans Provider Manuals. ◆

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**
Dermatology	7/1/2026	Minor administrative updates for accuracy and clarity Updated billing guidelines for additional clarity on reporting procedures performed multiple times during the same session.
Emergency Department Services	7/1/2026	Minor administrative updates for accuracy and clarity
Telehealth/Telemedicine	7/1/2026	Minor administrative updates for accuracy and clarity
Nutritional Counseling	7/1/2026	Minor administrative updates for accuracy and clarity

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.