

Provider Update

NEWS FOR THE NETWORK

September 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

Update on medical record review programs

As you know, health plans conduct medical record review programs to ensure accurate billing, coding, and documentation practices and compliance with requirements. Effective Nov. 1, 2025, CarePartners of Connecticut will engage Optum to assist in medical record review as part of our claims auditing program.

If your claims are selected as part of the medical record review process, you will receive a letter from Optum requesting medical records and billing documents related to specific claims. The purpose of the review is to verify the extent and nature of the services rendered for the patient's condition and that the claim is coded correctly and documented to support the services billed.

The medical record request letter offers guidance on what documentation is needed. Please keep in mind that a provider's order must be present in the medical record to support all charges, along with clinical documentation to support the diagnosis and services or supplies billed.

The request letter also provides detailed instructions on how to submit the requested documentation. Providers will have the option of submitting the necessary files by secure internet upload through the Optum portal, mail, or fax.

It's important to submit the requested information in the timeframe noted to avoid the claim being denied due to lack of response. If the medical record review determines that a coding and/or payment adjustment is applicable, the provider will receive the appropriate claim adjudication. Providers may dispute the result of reviews, and instructions on submitting an appeal are included in the determination letter from Optum.

If you receive a medical records review request and have questions, please reach out to the Optum contact listed on the letter. We appreciate your cooperation with this program.



Using ICD-10 Z codes to track social drivers of health

Recognizing the influence of non-medical factors on overall health, it's important for providers to screen patients for social drivers of health (SDOH). Also referred to as social determinants of health, these environmental conditions — such as where people are born, live, learn, work, worship, and age — can create barriers to treatment and have a profound effect on health disparities and equity.

Given the impact of SDOH on a patient's vulnerability to illness, access to health care, and ability to adhere to medical treatment, it's crucial for care providers to identify and document SDOH as part of their daily practice — whether during patient registration, routine exams, or visits scheduled for a specific condition. As patients may not readily volunteer details about the social aspects of their lives, it's essential to develop a process to gather this data, which is vital for connecting patients to community resources and follow-up services.

To help CarePartners of Connecticut recognize members who are experiencing social problems or living with risk factors that could adversely affect their health, we encourage providers to include relevant ICD-10 Z codes when submitting claims for services. We've outlined the primary SDOH Z codes below. For a more comprehensive list of SDOH ICD-10 Z codes, please refer to our [Social Drivers of Health Quick Reference Guide](#).

The following Z codes are used to document SDOH data, such as housing, food insecurity, and lack of transportation:

- **Z55** ... Problems related to education and literacy
- **Z56** ... Problems related to employment and unemployment
- **Z57** ... Occupational exposure to risk factors
- **Z59** ... Problems related to housing and economic circumstances
 - Z59.0 ... Homelessness unspecified
 - Z59.1 ... Inadequate housing
 - Z59.41 ... Food insecurity
 - Z59.82 ... Transportation insecurity
 - Z59.86 ... Financial insecurity
- **Z60** ... Problems related to social environment
- **Z62** ... Problems related to upbringing
- **Z63** ... Other problems related to primary support group, including family circumstances
- **Z64** ... Problems related to certain psychosocial circumstances
- **Z65** ... Problems related to other psychosocial circumstances
- **Z75** ... Problems related to medical facilities and other health care

By identifying and addressing social drivers of health and helping patients understand their impact, providers can empower individuals to actively participate in their health care and take control of their well-being. To discuss concerns or make referrals for members with SDOH-related needs, call the CarePartners of Connecticut Provider Services team at 888-341-1508.

You can learn more about the importance of social drivers of health and health equity on the [World Health Organization](#) and [Centers for Disease Control](#) websites.



Metabolic monitoring for patients on antipsychotic medications

Patients taking antipsychotic medications live with an increased risk of developing health conditions including diabetes, high blood pressure, abnormal cholesterol and triglyceride levels, and obesity. Given these risks, yearly screening and ongoing metabolic monitoring are integral to the management of antipsychotics for children, adolescents, and adults.

Whether you're a primary care physician, behavioral health specialist, or prescriber, you can help ensure that patients taking antipsychotic medications are receiving annual screenings by ordering or conducting in-office point of care (POC) HbA1c or fasting glucose tests for diabetes, along with regular cholesterol monitoring. Discuss the importance of having annual blood glucose and cholesterol testing with patients when they initially start on antipsychotic medications and at follow-up visits.

If you are prescribing an antipsychotic medication as part of an inpatient behavioral health hospitalization, remember to complete metabolic testing and document baseline blood glucose levels on the discharge plan. Also, remind the patient to bring the discharge paperwork to their follow up appointment, and share discharge paperwork with the patient’s primary care physician (PCP), prescriber and any community support providers.

Please be sure to use the following approved CPT codes when billing for screenings:

Test	CPT Code
Glucose	80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951
HbA1c	83036, 83037
LDL-C	80061, 83700, 83701, 83704, 83721
Cholesterol tests other than LDL	82465, 83718, 84478, 83722

Close collaboration among primary care providers, behavioral health specialists, and prescribers is crucial when treating patients who are taking antipsychotic medications. We encourage providers to use CarePartner’s of Connecticut’s [Coordination of Care Check List](#) — or a checklist of your own — to document and share provider contacts and communicate patient diagnoses, treatments, and other information beneficial to the development of an integrated care plan. Encourage patients to review and update medication lists, as needed, with their PCP, and document instructions for metabolic testing on the medication list.

At CarePartners of Connecticut, we appreciate your commitment to closing gaps in patient care and share your dedication to ensuring that members taking antipsychotic medications receive the continuum of care they need for improved overall health.



Promoting the flu vaccine

The flu season runs from October through April each year, and the Centers for Disease Control and Prevention (CDC) notes that September and October are good times for patients to vaccinate against the flu.

Providers play a vital role in informing patients about protecting themselves against the flu and making healthy decisions about scheduled vaccinations. You are trusted to address any misconceptions and engage patients in their health, including vaccination safety and efficacy.

Flu shots are covered for CarePartners of Connecticut members at \$0 cost share (billed under Part B) at retail pharmacies or in doctors’ offices.

The CDC continues to recommend that patients ages six months and older, including pregnant women, receive a flu vaccine every year, with rare exceptions. Flu vaccination provides important protection from influenza and its complications, with the [CDC reporting](#) that in the 2023-2024 flu season alone, the flu vaccine prevented an estimated 9.8 million illnesses, 4.8 million medical visits, 120,000 hospitalizations and 7,900 influenza-related deaths in the United States.

The CDC has a robust [Influenza website](#) that provides valuable information about vaccination, infection control, prevention, treatment, and diagnosis of seasonal influenza — including [Information for Health Professionals](#) and [Influenza ACIP Vaccine Recommendations](#) pages.



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's [language interpretation services](#) 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](#).



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
Outpatient Facility	9/1/2025	New Outpatient Facility Payment Policy replaces the Outpatient Payment Policy and the Ambulatory Surgical Center Payment Policy.
Maximum Units	9/1/2025	Minor administrative edits.
Surgery	9/1/2025	Minor updates to Additional Resources section.
Limited Services	9/1/2025	Minor updates to Additional Resources section.
Laboratory and Pathology	9/1/2025	Minor administrative edits.
Dialysis	9/1/2025	Minor updates to Additional Resources section.
Chiropractic	9/1/2025	Updated to include information on non-reimbursable items/services.



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.

Updates to existing prior authorization programs		
Drug/MNG	Policy and additional information	Eff. date
Abecma (idecabtagene vicleucel)	Removal of language stating that Abecma is only available through a restricted Risk Evaluation and Mitigation Strategy (REMS) program. Clarification of limitation related to immunosuppressive therapy to note that this limitation applies if the therapy is likely to interfere with T cell function.	9/1/2025
Breyanzi (lisocabtagene maraleucel)	Removal of language stating that Breyanzi is only available through a restricted Risk Evaluation and Mitigation Strategy (REMS) program. Clarification of limitation related to immunosuppressive therapy to note that this limitation applies if the therapy is likely to interfere with T cell function.	9/1/2025
Carvykti (ciltacabtagene autoleucel)	Removal of language stating that Carvykti is only available through a restricted Risk Evaluation and Mitigation Strategy (REMS) program. Clarification of limitation related to immunosuppressive therapy to note that this limitation applies if the therapy is likely to interfere with T cell function.	9/1/2025
Kymriah (tisagenlecleucel)	Removal of language stating that Kymriah is only available through a restricted Risk Evaluation and Mitigation Strategy (REMS) program. Clarification of limitation related to immunosuppressive therapy to note that this limitation applies if the therapy is likely to interfere with T cell function.	9/1/2025
Tecartus (brexucabtagene autoleucel)	Removal of language stating that Tecartus is only available through a restricted Risk Evaluation and Mitigation Strategy (REMS) program. Clarification of limitation related to immunosuppressive therapy to note that this limitation applies if the therapy is likely to interfere with T cell function.	9/1/2025
Yescarta (axicabtagene ciloleucel)	Removal of language stating that Yescarta is only available through a restricted Risk Evaluation and Mitigation Strategy (REMS) program. Clarification of limitation related to immunosuppressive therapy to note that this limitation applies if the therapy is likely to interfere with T cell function.	9/1/2025



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.