



**CHANGE IMPACTING CERTAIN  
CIGNA & FLORIDA BLUE MEMBERS**

**Purpose of this communication:**

- To notify CareCentrix network DME providers that, effective January 1, 2020, CareCentrix and its network providers will not arrange certain non-life sustaining services for certain Cigna and Florida Blue members.

**What do I need to know?**

- Effective January 1, 2020, CareCentrix and its network providers will not arrange certain non-life sustaining services for those Cigna and Florida Blue members who (1) have aged cost share balances greater than one hundred eighty (180) days from the initial patient invoice date; (2) are in the deductible phase of their coverage; and (3) who have failed to pay the outstanding balances or arrange for payment or a payment plan. As of January 1, 2020, such non-life sustaining services (the "Services") include PAP and PAP supplies only.
- Impacted patients and their treating providers will be notified in writing at least sixty (60) days in advance of the date CareCentrix will cease arranging the Services for such patients, unless the outstanding balance is paid or a payment plan is arranged.
- For any dates of service on or after the date CareCentrix ceases arranging the Services for these Cigna and Florida Blue members:
  - Providers must not submit a request for such Services to CareCentrix through the Provider Portal: HomeBridge<sup>SM</sup> or otherwise.
  - Any claim submitted for such Services will be administratively denied, and the provider is prohibited from billing the patient for such Services.
  - If the patient subsequently pays the outstanding balance or arranges for payment or a payment plan and CareCentrix resumes coordinating the Services for the patient, the Provider may submit a reconsideration for previously denied claims with dates of service on or after the date CareCentrix ceased arranging non-life sustaining services. The reconsideration of a claim will be processed and paid in accordance with the terms of the Provider Agreement, Provider Manual, and the patient's health plan.
- This does not affect any other services, including life-sustaining services, required by these patients.

**What do I need to do?**

- Encourage your patients to timely pay CareCentrix for their cost share balances or establish a payment plan with CareCentrix.
- Review the Provider Manual posted at [www.carecentrixportal.com](http://www.carecentrixportal.com) and the attached Frequently Asked Questions (FAQ) document attached.

**Thank you in advance for your cooperation and continued partnership. If you have any questions, please reach out to your dedicated Network Management representative for assistance.**

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## Non-Life Sustaining Services and Certain Cigna and Florida Blue Members FREQUENTLY ASKED QUESTIONS (FAQS)

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**Q: When is this change effective?**

**A:** January 1, 2020

**Q: Which health plan /patients are impacted?**

**A:** Cigna and Florida Blue members who have aged cost share balances greater than 180 days from the initial patient invoice date, who are in the deductible phase of coverage (i.e., where the patient is 100% percent financially responsible for the service rendered), and who have not paid their outstanding balances or arranged for payment or a payment plan with CareCentrix.

**Q: What does “non-life sustaining service” mean?**

**A:** As of January 1, 2020, “non-life sustaining service” means PAP and PAP supplies only. Additional non-life sustaining services may be added in the future, and if so, providers will be notified. For a complete list of the impacted PAP and PAP supply codes, go to the Provider Portal: HomeBridge<sup>SM</sup> ([www.carecentrixportal.com](http://www.carecentrixportal.com)). After logging into the secure portal, go to the Patient tab and click Suspension of Services Reference Materials.

**Q: What does “payment plan” mean?**

**A:** An agreement between CareCentrix and the patient to make monthly payments toward the outstanding balance over an agreed upon term. Patients are encouraged to contact CareCentrix at 866-441-4169 to establish a payment plan.

**Q: How does the patient’s deductible impact the suspension of non-life sustaining services?**

**A:** Non-life sustaining services will only be suspended for patients with aged cost share balances, who failed to pay the outstanding balance or arrange for payment or a payment plan AND who are in the deductible phase of coverage (i.e., where the patient is 100% percent financially responsible for the service rendered). Once the patient has met their deductible, CareCentrix and its network providers will resume arranging the non-life sustaining services.

**Q: How will I be notified when one of my patients is impacted?**

**A:** Providers will receive at least 60 days advance notice via email. The email will be sent to the email address(es) registered on the Provider Portal: HomeBridge<sup>SM</sup> for those users associated with the provider branch location that has recently serviced the patient.

**Q: How will I know if a patient (new or existing) is impacted?**

**A:** The Provider Portal: HomeBridge<sup>SM</sup> contains a searchable list of patients with the effective date.

**Q: Where on the Provider Portal can I find the list of impacted patients?**

**A:** After logging into the secure Provider Portal: HomeBridge<sup>SM</sup>, go to the “Patients” tab at the top of the screen. You will have the option to view your patients by “Suspension Notifications” or by downloading a comprehensive list of your patients when you select “Download Suspension List”.

**Q: What should I do if notified that my patient is impacted?**

**A:** Providers should encourage impacted patients to contact CareCentrix to make payment or arrange for payment or a payment plan with CareCentrix.

**Q: Should I stop providing all services?**

**A:** No. This only impacts the non-life sustaining services defined above. Providers should continue to provide all other covered home care services required by the patient in accordance with the terms of their Provider Agreement and the Provider Manual.

**Q: What should I do if I have an existing service request form (SRF) or service authorization form (SAF) to provide the non-life sustaining services defined above with dates of service after the patient’s suspension of services effective date?**

**A:** Discontinue rendering the non-life sustaining services to the patient on or after the suspension date.

**Q: What happens if the patient pays?**

**A:** CareCentrix and its providers will resume arranging the non-life sustaining services required by the patient.

**Q: Will I be notified if the patient pays?**

**A:** Yes. Providers will be notified by email when a patient's suspension status changes.

**Q: Can I request reimbursement for claims previously denied due to the patient's suspension status if/when I am notified that the patient is reinstated?**

**A:** Any such claims for dates of service on or after the date CareCentrix ceased arranging non-life sustaining services may be submitted as a reconsideration and will be processed and paid in accordance with the terms of the Provider Agreement, Provider Manual, and the patient's health plan.

**Q: Will a resubmitted claim be rejected for duplicate?**

**A:** Yes. If a previously denied claim is resubmitted with no changes it will be rejected as a duplicate. Providers are encouraged to file a reconsideration for any denied claims where the patient has been reinstated.

**Q: If notified, do I need to register a service /submit another authorization request to continue rendering services?**

**A:** Yes.

**Q: What if the patient cannot pay their balance in full?**

**A:** CareCentrix offers interest-free payment plans with terms up to 18 months depending on the balance.

**Q: What if I provide one of the non-life sustaining services defined above to a patient who is subject to suspension and bill CareCentrix?**

**A:** The claim will be denied with the Claim Adjustment Reason Code (CARC) **A1 256: "Service not payable per managed care contract"** and Remittance Advise Remark Code (RARC) **N59: "Please refer to your provider manual for additional program and provider information"**.

**Q: Does this change impact claims with dates of service prior to the patient's suspension date?**

**A:** No.

**Q: Can I be paid for services rendered after the patient's suspension date?**

**A:** This only affects the non-life sustaining services defined above. All other services are not affected and claims for such services will be processed and paid, in accordance with the terms of the Provider Agreement, Provider Manual and the patient's health plan.

**Q: How do I respond to patients calling me regarding their suspension of services?**

**A:** Please encourage the patient to call CareCentrix at 866-441-4169 to pay their outstanding balance or to arrange for payment or establish a payment plan.

**Q: I was not notified of the suspension of services and now my claim is denied. What can I do?**

**A:** If you believe the claim was denied in error, you may request a reconsideration through normal processes in accordance with the terms of your Provider Agreement, Provider Manual and the patient's health plan.

**Q: Can I still submit requests for services on the portal for patients who are within their deductible phase of coverage and have been identified for future suspension of non-life sustaining services?**

**A:** Yes. However, requests for any non-life sustaining services as defined above with dates of service on or after the suspension date will not be accepted.

**Q: What should I do if a patient who is subject to suspension of non-life sustaining services is renting a PAP device?**

**A:** Monthly rentals of the PAP device on or after the suspension effective date will not be payable so long as the patient remains subject to suspension of such services.