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Visit carefirst.com/bluelink to view past issues of BlueLink.

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Top News

CareFirst Platform Migration Update

All Members

CareFirst BlueCross BlueShield (CareFirst) is in the final stages of a major platform upgrade that supports enrollment, eligibility and benefit information, and claims processing. We recognize the administrative impact this transition has had on providers and recently shared an update on what's been completed and what to expect next.

Read the full article.

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Available Now: Provider Directory Updates and Attestation Tool

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

We're excited to share the availability of the Provider Directory Updates and Attestation self-service tool within the CareFirst BlueCross BlueShield Provider Portal (CareFirst Direct). All providers can now take advantage of the new enhancements, allowing the ability to easily attest and update provider directory information.

Read the full articles:

- CareFirst CHPMD and DualPrime Addition Announcement
- Enhancements Now Available

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New Methods for Contacting Professional Credentialing and Enrollment

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

We've streamlined how you connect with our Professional Provider Credentialing & Enrollment team. These enhancements are designed to ensure a more efficient experience for all CareFirst participating professional providers.

To help you get resolutions faster, there are three new email boxes available to help support you.

Read the full article.

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Reminder: Member Eligibility not Determined by PCP Name on ID Card

CareFirst CHPMD, DualPrime

Primary Care Provider (PCP) information printed on the member ID card may change and may not reflect the member's current PCP assignment. Please check member eligibility through the portal as usual; members should not be turned away based on the PCP name (or absence of a PCP name) on the ID card.

Read the full article.

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Important Utilization Management Process Update

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

Electronic submission through the CareFirst Provider Portal remains the most efficient way to submit prior authorization requests. Fax submissions should be used only in rare situations when the provider portal is not available.

As shared in our April BlueLink newsletter, we've streamlined operations and enhanced efficiency when faxing forms by transitioning from our current system of more than 30 authorization request fax forms to just two forms to handle all request types along with one dedicated fax number for each line of business. The new forms can be accessed here:

- Medical Forms Page
- General Forms Page

Read the full article.

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CareFirst Administrators: Administrative Platform Transition Reminders

Commercial

CareFirst Administrators (CFA) enrollment, claims and billing is upgrading to a new platform. This transition began on November 1, 2025, with a small number of members and will continue monthly until the process is complete. Read the full article in the December 2025 issue of BlueLink.

As part of this transition, we have engaged PNC Healthcare, powered by ECHO Health, to provide electronic payment methods via their Claims Payment and Remittance service for newly transitioned members.

Please review this important information to ensure your payment and remittance preferences are up to date.

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Breaking News

Enroll Today: Electronic Payment Through Zelis

Medicare Advantage

We're pleased to announce that CareFirst BlueCross BlueShield Medicare Advantage (CareFirst) has partnered with Zelis to bring providers more efficiency and choice in how they receive claims payments and remittance information. CareFirst has transitioned its claims payment and remittance delivery from the current no-cost EFT to the no-cost CareFirst ePayment Center.

How do you enroll in CareFirst's ePayment Center?

1. Visit carefirstmedicaid-medicare.epayment.center and follow the instructions to obtain a registration code.
2. Submit your information to start enrollment.
3. Within 24–48 hours, you'll receive an email from help@epayment.center outlining the next steps to complete enrollment.

Read the full article.

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Are you In- or Out-of-Network? New Way to Verify your Network Participation

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

CareFirst offers multiple provider networks to meet the needs of our customers, members and the communities we serve. It's important to understand which networks you participate in, as this helps ensure members receive appropriate care, aren't turned away from receiving care, and have clear expectations about potential out-of-pocket costs.

Please note that being a CareFirst participating provider does not automatically include participation in every CareFirst network.

Most Common CareFirst Provider Networks Available

- CareFirst BlueChoice HMO
- CareFirst Regional Provider PPO
- BlueHPN
- BlueEssential
- Medicare Advantage (MA) PPO
- Medicare Advantage DualPrime (DSNP)
- CareFirst CHPMD
- Healthy DC

Note: This is not an all-inclusive list; however, it represents most networks available for provider participation.

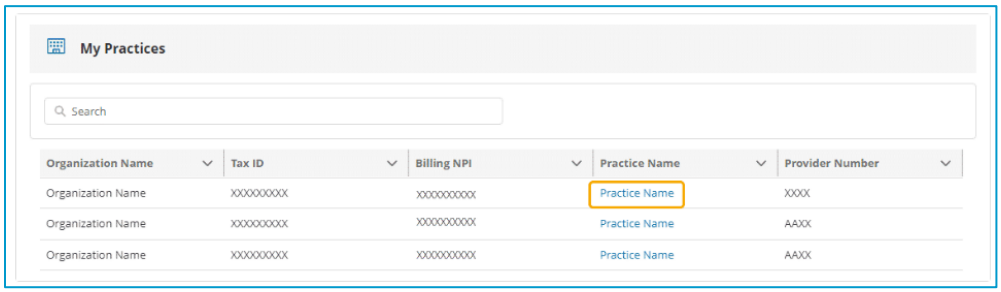
How to Determine your Network Participation

You can now identify which networks you participate in using the Provider Updates and Attestation self-service tool within the CareFirst Provider Portal (CareFirst Direct).

1. Log into CareFirst Direct
2. Select the **'Medical Provider Updates and Attestation'**



3. Select the **'Practitioner Name'**



4. Locate the **'Network Participation'** section to view the network(s) you participate with along with effective date(s)



For additional information, access the Provider Updates and Attestation tool step-by-step guide.

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Important Guidance for Providers Using Third-Party Billing Companies

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

We realize many of our participating providers contract with third-party billing companies to support their administrative needs. These companies often reach out to Provider Services, often for information or answers that are readily available through one of our self-service tools.

The link below includes important information you can discuss with third-party billing companies to ensure they can obtain what they need through our self-service options.

Read the full article.

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New Maternal Health Resources Available for Your Patients

Commercial, CareFirst CHPMD

Pregnancy is one of the most significant and complex times in our members' lives—and a time when clear information about health coverage, benefits and is especially important. To meet those needs, CareFirst BlueCross BlueShield (CareFirst) has created new, easy-to-use digital resources designed to help expectant parents get answers before they experience any barriers to care.

To support members during pregnancy, CareFirst has launched two digital, mobile-friendly experiences that offer clear, reliable guidance with no account or password required:

- For CareFirst Community Health Plan Maryland (CHPMD) members: Every Step of Your Pregnancy
- For all other CareFirst members: Your Guide to a Healthy Pregnancy and Newborn

The CHPMD site includes details about wraparound services for the Medicaid population, such as Mommy Meals and transportation assistance. Both sites provide simple, easy-to-understand guidance and tips for a healthy pregnancy and newborn care.

By sharing these resources with patients, providers can help reduce barriers to care and reinforce clinical guidance beyond the exam room, making it easier for patients to stay informed and prepared.

We encourage providers to explore the new sites and share these resources with expectant parents. Your partnership helps ensure that patients will receive the right care at the right time.

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Focus on Quality

Register Today: Risk Adjustment Office Hours

Medicare Advantage, DualPrime

CareFirst BlueCross BlueShield (CareFirst) is committed to supporting our network providers with ongoing education and other resources. Our Risk Adjustment Coding live office hours webinars - tailored for all Medicare Advantage plans including Group, Individual and DualPrime, help providers stay abreast of the latest documentation and coding for HCC and feature best practices, updates and reminders from CareFirst.

To register, click on the date of the session that works best for you and complete the registration form.

- Thursday, June 25, 12-1p.m.
- Thursday, July 23, 12-1p.m.
- Thursday, August 20, 12-1p.m.
- Thursday, September 24, 12-1p.m.
- Thursday, October 22, 12-1p.m.
- Thursday, November 19, 12-1p.m.

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Available Now: 2026 Quality Toolkit

All Providers

We are excited to announce the release of the CareFirst MY26 Quality Toolkit. This essential resource is designed to help healthcare providers get credit for the clinical work they are already doing.

The Quality Toolkit is a comprehensive guide developed by the HEDIS® Team to support providers in improving their quality measures, compliance and documentation. It includes detailed information on various quality measures, best practices, risk adjustment and more. The toolkit is organized by categories such as preventive care, chronic care, behavioral health and medication adherence, making it easy to navigate and find relevant information.

What's New for 2026?

- Refreshed quality measure and risk adjustment guidance
- Enhanced provider resources and best practices

Why Use the Quality Toolkit?

By following the best practices and recommendations in the Quality Toolkit, providers can enhance their performance on quality measures and achieve optimal scores on various programs and incentives offered by CareFirst. The toolkit provides tips and strategies for improving each measure, such as patient education, screening tools, care coordination and follow-up.

Support and Resources

CareFirst BlueCross BlueShield is committed to supporting providers in their journey to improve the health of their members and communities. For more information on how to improve medication adherence and other quality measures, including helpful videos and guides, visit the Learning and Engagement Center's Quality Improvement section.

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Noteworthy Stories

Care Support and Management Programs Offer Additional Assistance to Members

Care support programs are an important benefit available to eligible CareFirst members and can be a valuable complement to the care you provide. As a reminder, members may receive outreach from one or more of the below programs*.

- **Thyme Care (for cancer support):** Helps members with any type of cancer diagnosis by finding in-network oncologists, arranging transportation to appointments, understanding symptoms and treatment plans, and learning more about their illness using a web-based app. *(Commercial non-risk members)*
- **Somatus (for chronic kidney disease):** Offers care management to help slow disease progression and ease transition to dialysis. Assists with meal planning, medication questions and transportation to appointments via a dedicated care line and patient portal. *(Commercial, Medicare Advantage, DualPrime and CareFirst CHPMD members)*
- **Omada (diabetes virtual care):** Provides personal health coaching, personalized care plans and diabetes care supplies for members with documented A1C levels of 8% or

higher. *(Commercial members)*

- **Chamber (for heart health):** Guides members with heart health concerns through personalized care and care plans, assistance with medications, lifestyle changes, and coordination with current doctors and specialists. *(Commercial non-risk members)*
- **Sword (for joint and muscle health):** Three offerings to assist members in reducing pain and increasing movement: *(Commercial members)*
  - *Bloom* can help with pelvic health at all stages of a woman's life.
  - *Move* can reduce risks of chronic pain or injury by helping members with situational pain.
  - *Thrive* can help members alleviate chronic pain and avoid ER visits and surgeries.
- **Carelon (for palliative care):** Helps members with advanced or end-stage disease through care plans to manage symptoms, ease pain and stress, and enhance quality of life. *(Commercial, Medicare Advantage, DualPrime and CareFirst CHPMD members)*

Eligibility is based on health risks, claims data and plan enrollment. Members may receive outreach via letter, email and/or text messaging. Information about health and wellness programs also can be found on the CareFirst member website.

CareFirst Care Management

Could your patient(s) benefit from working with a care manager? If yes, please complete this short Care Management eForm and we will respond to your request within two business days. Additional information is available within these provider FAQs.

Our Care Management team provides individualized support for CareFirst members with chronic or high-risk health concerns. Care Management has proven to decrease cost of care and admissions/readmissions/ED Visits while contributing to quality and HEDIS measures and gaps in care closure.

** Thyme Care, Somatus, Omada, Chamber, Sword, and Carelon are independent companies providing care management services to eligible CareFirst BlueCross BlueShield members.*

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Reminder: Medical Records Requests in Progress

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

Each year, CareFirst retrieves medical records from our network providers to fulfill various regulatory requirements and audits. We recognize large medical requests can be time-intensive and labor-intensive to your practices, so we hope this reminder is helpful in allowing you to coordinate requests across initiatives and vendors. As always, thank you for your partnership.

View the Record Retrieval Calendar: Click here to access the calendar and note the various vendors that may reach out on behalf of CareFirst. Very few practices will be impacted by all retrieval efforts.

Read the full article.

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Atlas Systems Outreach to Providers Underway

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

As a reminder, CareFirst BlueCross BlueShield (collectively, "CareFirst") has a contract with a third-party vendor, Atlas Systems, to assist in assessing the accuracy and completeness of our online provider directory. Your office may receive a call as we conduct this important outreach.

Important Note: These calls are legitimate and not a scam.

Read the full article.

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Administrative Support

Federal Employee Program (FEP): Member Reconsiderations Process Reminder

Commercial

Providers who wish to appeal **to CareFirst** regarding medical drug prior authorization decisions from Novologix must use the member reconsideration process. If a decision has already been appealed and denied by Novologix, any further appeal must be made by the member.

Providers can still assist in this process by working with the member to complete an Authorized Representative Designation Form, which authorizes the provider to act on the member's behalf. This form is available on *FEPBlue.org* > *Get Support and Resources* > *Claim Forms.*

Submission Instructions

Once the authorized representative form has been submitted and approved, providers can submit member reconsiderations using one of the following methods:

- Fax (Reconsiderations Only): 301-470-5755
- Mail: Send to the standard correspondence address

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Enter and Check Prior Authorization Status Electronically

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

Providers can use the CareFirst Provider Portal (CareFirst Direct) to verify eligibility and benefits, check claim status, verify prior authorization requirements, submit and check the status of prior authorization requests electronically, and more for all their patients who are CareFirst members.

Access the On-Demand Training – CareFirst Essentials section of the Learning and Engagement Center for step-by-step guides and FAQs.

Read the full article.

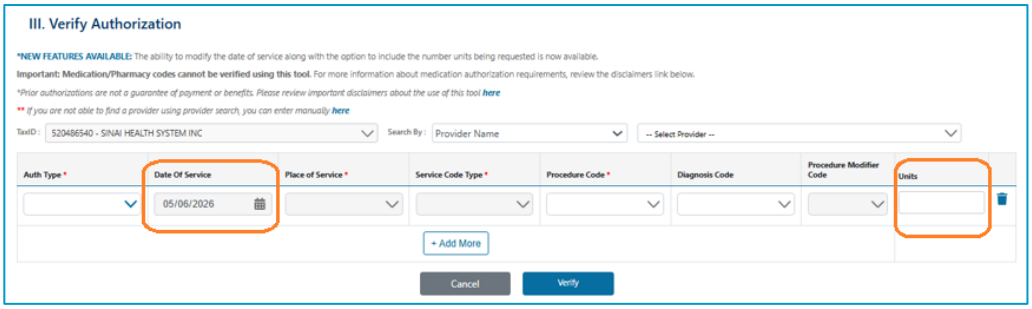
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Enhancements Available on the Prior Authorization Lookup (PAL) Tool

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

Two enhancements have been made to the PAL tool to help you verify prior authorization requirements. You now can:

1. Modify the date of service for your verification requests
2. Add the specific number of 'units' being requested



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Coming Soon: Interactive Voice Response System Upgrade

We are pleased to let you know that we will be upgrading our Provider Service Interactive Voice Response (IVR) system later this year to enhance your experience and improve access to information and support.

This upgrade is designed to deliver a more efficient, user-friendly experience with improved functionality. New features will include:

- Enhanced call routing to help connect you more quickly to the right resource
- Streamlined menu options for easier navigation
- Improved self-service capabilities for faster access to common information

- Better system performance and reliability
- Updated functionality designed to support a smoother provider experience

We are committed to making this transition as seamless as possible and will share additional details, including timing and any important updates, as the implementation date approaches.

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Payment Policy Database Updates

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

In consideration of current industry standards and to align with CareFirst's mission to provide affordable healthcare, CareFirst has made an update to the following Payment Policies in the online Payment Policy Reference Manual:

- **PP CO 600.05 Modifiers Policy –** effective May 1, 2026, language related to modifier 25 has been updated to remove language that is no longer applicable. Detailed information can be found in the History section of the policy.
- **PP CO 002.02 Coding Validation –** effective May 1, 2026, clarifying details and examples of common flags and validation have been added to the policy. Detailed information can be found in the History Section of the policy. This update does not change existing logic.
- **PP CO 014.02 Consultation Services –** effective May 1, 2026, language related to another policy PP CO 010.01 has been included in this policy as a cross reference. Detailed information can be found in the History Section of the policy. This update does not change existing logic.

Place of Service (POS) Assignment Updates

We remind providers to review the Payment Policy PP CO 200.02 Telemedicine Services – Professional, as there were revisions made effective December 31, 2025, to clarify definitions for POS 02 and 10 to ensure appropriate claims submission.

Reference to that updated POS assignment grid can be found here.

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Medical Policy Updates

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

Our Healthcare Policy department regularly reviews medical policies and procedures based on new evidence and technological advances. You can review Healthcare Policy Updates on our Medical Policy webpage.

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Are You Up to Date on Best Practices and Quality Standards?

Commercial, Medicare Advantage, CareFirst CHPMD, DualPrime

From recommending preventive care options for your patients to managing day-to-day office operations, the clinical resources on our provider website offer valuable time-saving tools. Use these resources to help support your treatment plan for patients with chronic diseases and those in need of preventive services.

CareFirst's Quality Improvement Council reviews our clinical resources annually and adopts nationally recognized guidelines and best practices to make sure you are updated when information changes.

Access the Quality Standards and Best Practices resource for more information.

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Government Programs Corner

Take Advantage of Self-Service Tools for Common Requests

Medicare Advantage, CareFirst CHPMD, DualPrime

As part of our ongoing commitment to improving efficiency and ensuring timely support, our provider service team will be putting a stronger emphasis on self-service options beginning July 1, 2026, for claims, eligibility and prior authorization inquiries. Click the link below to learn more about these self-service tools and additional resources.

Read the full article.

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Take Note: Maryland Medicaid Transitioning to MPRIME

CareFirst CHPMD

Maryland Medicaid will transition from its online Electronic Provider Revalidation and Enrollment Portal (ePREP) to the Maryland Provider Registration and Information Management Enterprise (MPRIME) portal in October 2026. For more information or questions, go to https://health.maryland.gov/mmcp/provider/Pages/mprime.aspx or email mdh.mprimegolive@maryland.gov.

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Kidney Health Evaluation for Patients with Diabetes: HEDIS Measure

CareFirst CHPMD

CareFirst Community Health Plan ranks among the top four MCOs for HEDIS performance in evaluating kidney health for people with diabetes. There is clear opportunity to improve early identification and intervention of CKD in this population and for all at-risk patients.

The Kidney Health Evaluation for patients with diabetes (KED) HEDIS measure is the percentage of patients aged 18-85 years of age with diabetes (type 1 or 2) who received a kidney health evaluation defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ration (uACR) during the measurement year.

Accurate assessment of uACR requires both the quantitative urine albumin test and urine creatinine test within four or fewer calendar days of each other.

To satisfy HEDIS requirements both tests need to be ordered together, performed and properly billed:

CPT code 82043: Quantitative urine albumin test

- CPT code 82570: Urine creatinine test

Documentation and testing methods that do *not* qualify because they are considered semi-quantitative and do not meet measure criteria:

- Point-of-Care (POC) urine albumin tests
- Urine protein-to-creatinine ratio (uPCR) tests.
- CPT code 82044 or CPT code 84156

Measure Exclusions:

- ESRD
- Dialysis
- Palliative Care/Hospice
- Frailty in patients 81 years or older
- I-SNP or LTC residents 66 years or older

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Important Reminder: Maryland Medicaid Behavioral Health Benefit Information

CareFirst CHPMD

For Behavioral health primary and specialty services, please refer to the Maryland Department of Health (MDH) policies below. Behavioral health claims submitted to CareFirst in violation of these policies will be denied, in compliance with MDH policy and procedures.

MDH Behavioral Health Codes Information

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DualPrime Provider Resources Website Sunset

DualPrime

DualPrime providers should note that the content currently available on the Provider Resources page will be integrated into provider.carefirst.com to create a more streamlined experience and make it easier to find what you need in one place.

As part of this transition, providers should begin using the CareFirst Provider website, provider.carefirst.com, as the central destination for resources and updates.

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Rare and Expensive Case Management (REM) Program

CareFirst CHPMD

The Rare and Expensive Case Management (REM) Program is a Maryland Medicaid benefit administered by the Maryland Department of Health (MDH). It provides specialized care coordination for members with rare, catastrophic or high-cost medical conditions that require complex, long-term management.

Read the full article.

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Attention Maryland Medicaid Providers: HIV Reporting Form

CareFirst CHPMD

Providers participating in Maryland Medicaid must notify the Maryland Department of Health – using the link below – of patients with an HIV diagnosis. This will ensure beneficiaries receive appropriate resources to help manage their care. Access the Maryland Confidential Morbidity Report (DHMH 1140) - HIV Only form for instructions and points of contact for any questions.

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Important Reminder for Providers: CMS Registration Requirement

CareFirst CHPMD

As a reminder, providers must be registered with the Centers for Medicare & Medicaid Services (CMS) to be paid for services rendered to Medicare patients.

The Provider Enrollment, Chain, and Ownership System (PECOS) is a web-based platform

managed by CMS that facilitates the enrollment process for Medicare providers and suppliers. PECOS streamlines provider enrollment, allowing providers and credentialing staff to efficiently manage and submit Medicare enrollment information electronically.

Review the PECOS Fact Sheet.

The PECOS database can be found here.

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Complete the 2026 Mandatory Model of Care Training Attestation Today!

DualPrime

All providers who see CareFirst BlueCross BlueShield Advantage DualPrime (HMO-SNP) members **must** complete their mandatory Model of Care training upon enrollment in our network, and then annually each year after. Attestation for the annual training may be done at the practice level and takes less than 10 minutes.

Read the full article.

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CareFirst CHPMD Monthly and Quarterly Formulary Updates: Pharmacy Benefit

CareFirst CHPMD

CareFirst CHPMD posts monthly and quarterly formulary updates in its website's *Drug List (Formulary) Updates* section. CareFirst Community Health Plan Maryland - Drug List (Formulary) Updates | CareFirst BlueCross BlueShield

Major formulary changes effective May 1, 2026:

- Added to the formulary:
  - Misoprostol 100 and 200 mcg tablets
  - Rilpivirine 25 mg tablet (generic of Edurant)
- Removed from the formulary:
  - Edurant 25 mg tablet (brand name)

Major formulary changes effective June 1, 2026:

- Added to the formulary:
  - Estradiol vaginal cream 0.01%

To reduce costs for your patients, please recommend formulary agents first.

For a non-formulary drug, providers can submit prior authorization to CVS Caremark and provide supporting notes for why the member is unable to use the formulary agent(s). Documentation is required for approval, including the name of medication(s) tried and reason for treatment

failure, inadequate treatment response, intolerance, contraindication, and/or adverse effect, whichever are applicable. Prior authorizations can be submitted electronically via CoverMyMeds, by fax or by phone.

If the provider would like to do a Peer-to-Peer review, they can call the CVS Caremark CareFirst CHPMD Prior Authorization line for specialty drugs at 1-866-814-5506 or non-specialty drugs at 1-877-418-4133. A Peer-to-Peer review is only allowed PRIOR to an appeal being requested. Appeals are processed by the Plan; guidance is included in the adverse determination (denial) letter.

Pharmacy Benefit Prior Authorizations:

Providers have 14 calendar days to submit additional documentation for prior authorization requests if the initial information is not received within 24 hours. Please ensure all supplemental documentation is submitted directly to CVS Caremark, fax number 1-855-762-5205, instead of submitting an appeal to CareFirst CHPMD.

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Events

Registration Available for 2026 Provider Live Webinars

We will have several live webinars available for you to attend in 2026. Please register for those that apply to you by clicking on the links below.

Skilled Nursing Facility Webinar

- June 10, from 10-11 a.m.

Professional Quarterly Webinars

- September 16, from 10-11 a.m.
- September 17, from 1-2 p.m.

Did you miss our latest professional quarterly webinar? Check it out here!

Hospital Quarterly Webinars

- September 22, from 10-11 a.m.
- September 23, from 1-2 p.m.

Did you miss our latest hospital quarterly webinar? Check it out here!

Behavior Health Provider Quarterly Webinar

- June 17, from 1-2 p.m.
- September 17, from 10-11 a.m.

Did you miss our latest behavioral health quarterly webinar? Check it out here!

- ***Live Webinar Opportunity through Maryland Addiction Consultation Services (MACS):***
  - Medetomidine Intoxication and Withdraw – June 22, from 12-1 p.m.

(This webinar is hosted by a third party and is not affiliated with CareFirst. Any views, opinions, or information shared during the webinar are solely those of the hosting organization and presenters.)

CareFirst CHPMD and Advantage DualPrime Quarterly Webinars

- September 8, from 2-3 p.m.
- September 9, from 10-11 a.m.

Did you miss our latest CareFirst CHPMD and Advantage DualPrime quarterly webinar? Check it out here!

Substance Use Disorder Facilities (SUD)

- October 14, from 10-11 a.m.

When you click a link, a registration form should appear. Fill out all the fields on the form and submit your registration.

Once the registration is submitted, you will receive an auto-generated confirmation email from no-reply@zoom.us. This confirmation email will include a link to the webinar. You will use this link to join the webinar on the date and time selected (indicated in the email).

Need help registering? Check out this interactive guide!

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CareFirst Holiday Closings in 2026

- Juneteenth: Friday, June 19
- Independence Day (Observed): Friday, July 3
- Labor Day: Monday, September 7
- Veterans Day: Wednesday, November 11
- Thanksgiving Day: Thursday, November 26
- Day after Thanksgiving: Friday, November 27
- Christmas Day: Friday, December 25

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Stay Connected with the Latest Information from CareFirst

Are you and your staff receiving CareFirst Provider News and our BlueLink Newsletter via email? If not, take a minute and sign up here.

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