

March 2025 Third Party Changes of Significance

MISSISSIPPI MEDICAID

Magnolia Health Plan Notice to Providers. March 14, 2025

“You may have recently received a letter from Magnolia Health Plan with information regarding an upcoming claims recoupment for project numbers 574360310 and/or 577431021 related to members who were not eligible at the date of the service. **We plan to pause this recoupment and work with the Division of Medicaid to coordinate the recoupment and potential repayment of these claims under another payor.**

There is **no need** for providers to **appeal** these claim recoupments.

We will also be including more information in our weekly Provider email blasts, so please watch for upcoming information.

To sign up for Magnolia’s email blast, visit our website at www.magnoliahealthplan.com/providers/email-sign-up.html

If you have any questions, or need additional information regarding this issue, please contact your provider relations representative, or Provider Services at 866.912.6285.”

CMS, NOVITAS, RAILROAD MEDICARE

Treasury Department: CTA Reporting Rule Only Applies To Foreign Companies Now. AOA First Look. March 13, 2025

“The U.S. Department of the Treasury announced that, with respect to the Corporate Transparency Act, not only will it no longer enforce any penalties or fines associated with the beneficial ownership information (BOI) reporting rule under the existing regulatory deadline, but also it will no longer enforce any penalties or fines against U.S. citizens or domestic reporting companies or their beneficial owners.

The Treasury Department will further issue a proposed rulemaking that will narrow the scope of the rule to foreign reporting companies only. The Treasury Department takes this step in the interest of supporting hardworking American taxpayers and small businesses, and ensuring that the rule is appropriately tailored to advance the public interest.

Access [AOA practice resources on the CTA](#) and stay-up-to-date on developments.”

CHAMPVA Claims: Enroll in Direct Deposit to Avoid a Payment Pause. CMS. March 14, 2025

“If you take patients under the Civilian Health and Medical Program of VA (CHAMPVA), you must set up electronic funds transfer (EFT) to get your claims paid.

You may have questions about making the required move. We have answers.

Is Switching to EFT Required or Optional? Getting paid by EFT is a federal [requirement](#). It is not optional.

What’s in it for Me? By enrolling in EFT payment, you help ensure CHAMPVA claim payments are secure, efficient, and compliant with federal mandates while safeguarding Veteran family members’ access to benefits.

How Do I Enroll? Visit the VA Financial Services Center (FSC) [Customer Engagement Portal](#) and complete the Payment Account Setup webform to enroll.

Who Do I Call for Help with the Webform? Call the FSC help desk at 877-353-9791.

About CHAMPVA

[CHAMPVA](#) is a health care program for qualified spouses, widows(ers), and children of eligible Veterans.

Through CHAMPVA, VA shares the cost of certain health care services and supplies with eligible beneficiaries.

More Information:

- [CHAMPVA – Information for Providers](#) webpage
- [U.S. Department of Veterans Affairs](#) webpage”

<https://www.cms.gov/training-education/medicare-learning-network/newsletter/2025-03-13-mlnc#fedpartners>

Congress Extends Telehealth Flexibilities: 5 Notes. Naomi Diaz. Becker's Payer Health IT. March 17, 2025

“Congress has [passed](#) a federal spending bill that extends telehealth provisions through Sept. 30, 2025. [Sec. 2207. Extension of certain telehealth flexibilities.]

Passed on March 15, the bill extends key telehealth provisions initially expanded during the COVID-19 pandemic and introduces additional measures to broaden access to virtual care under Medicare.

Here are five key telehealth-related elements of the bill:

1. The bill removes geographic and originating site restrictions, allowing patients to receive telehealth services from various locations, including their homes, regardless of where they live. [ending September 30, 2025]
2. It expands the range of healthcare practitioners authorized to provide telehealth services. [ending September 30, 2025]
3. Federally qualified health centers and rural health clinics will remain eligible to furnish telehealth services. [ending September 30, 2025]
4. The legislation delays the implementation of in-person visit requirements for mental health services delivered via telehealth. [implements Oct 1, 2025]
5. The bill maintains the authorization of audio-only telehealth services and extends the use of telehealth for hospice care recertification. [ending September 30, 2025] ...”

https://www.beckershospitalreview.com/telehealth/congress-extends-telehealth-flexibilities-5-notes.html?origin=PayerE&utm_source=PayerE&utm_medium=email&utm_content=newsletter&oly_enc_id=5767J801653418J

Wording on Page 91 <https://www.congress.gov/119/bills/hr1968/BILLS-119hr1968ih.pdf>

Railroad Medicare: E/M Services Initial and Established Office or Other Outpatient Visits Webinar: April 15, 2025. Railroad Medicare-Palmetto GBA. March 24, 2025

“Event Date: 04-15 12:00 PM EDT - 1:00 PM EDT

Railroad Medicare is offering an updated and revised presentation regarding 'Evaluation and Management (E/M) Services - Initial and Established Office or Other Outpatient Visits.' We encourage everyone billing for these E/M services (including those who attended our last webcast) to join us for this event. Please plan to attend this event.”

<https://www.palmettogba.com/palmetto/sharedData.nsf/eventsRedirect?OpenAgent&code=EVMFPDUBRM2TGB0415%5ERailroad%20Medicare>

OTHER

Link for April 2025 ICD-10-CM Changes

No significant changes for eye care in the April 2025 ICD-10-CM release. However, each provider should review.

https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Publications/ICD10CM/2025-Update/

Ambetter From Magnolia Health Dual Enrollment Issues. Magnolia Health. March 14, 2025

“Some Marketplace enrollees are being enrolled in Marketplace plans without their knowledge or consent.

What Should Providers Know:

This is an industry problem which is not isolated to Ambetter or Mississippi. Ambetter from Magnolia Health will investigate all complaints related to unauthorized plan switches, or unauthorized enrollments.

Cases of dual enrollment are not always fraud:Some enrollments are at the request of the member.

Ambetter is working with CMS to report suspicious activity and broker fraud.

Where can members report alleged Dual Enrollment Fraud:

Members who are not aware of their Marketplace coverage should contact the Marketplace carrier to disenroll/cancel the policy. After disenrollment/cancellation of the policy, the member should contact the Office of Recovery at (601) 359-6095 with the termination date and reference number provided by the Marketplace.

What should Providers do once the erroneous Ambetter Enrollment is canceled:

Providers should rebill the claim once the updates are completed in MESA.

If you have additional questions, please contact the Office of Recovery at (601) 359-6095.

Refer to the following articles from CMS and the Mississippi Division of Medicaid: [CMS Statement on System Changes to Stop Unauthorized Agent and Broker Marketplace Activity](#)

Marketplace Policies and Medicaid Coverage: <https://www.cms.gov/newsroom/press-releases/cms-statement-system-changes-stop-unauthorized-agent-and-broker-marketplace-activity>

Ambetter From Magnolia Health Introducing Availity Editing Services. March 14, 2025

“As previously communicated, in a continuous effort to make it easier to do business with us Ambetter from Magnolia Health is introducing Availity Editing Services (AES). Centene is partnering with Availity to return rejection messages on its behalf via AES messages. AES services will now begin March 26, 2025.

AES can identify a claim error upfront and return a message to you for correction before sending the claim on to the plan to be adjudicated. You should review edit messages for potential corrections to the suggested claim line(s). If you make updates to the claim, this may help the claim process correctly the first time, preventing errors, improving payment accuracy, and claims adjudication turnaround time. If, after reviewing the message, you find it does not apply, please resubmit the claim as-is and this will allow a bypass of the edit in cases where it may not be applicable. ...”

<https://mailchi.mp/c639737cfe5d/pooscgsvfh-35809?e=6d63e1c4a4>

8 Drugs Now in Shortage. Alexandra Murphy. Beckers Hospital Review. March 4, 2025

“... [Bacitracin ophthalmic ointment](#): Padagis US announced a shortage of the 3.5-gram presentation of Bacitracin ophthalmic ointment. The shortage is due to the discontinuation of its manufacture and the estimated duration of the shortage is unknown. ...”

[https://www.beckershospitalreview.com/pharmacy/8-drugs-now-in-shortage-](https://www.beckershospitalreview.com/pharmacy/8-drugs-now-in-shortage-5.html?origin=PayerE&utm_source=PayerE&utm_medium=email&utm_content=newsletter&oly_enc_id=5767J8016534I8J)

[5.html?origin=PayerE&utm_source=PayerE&utm_medium=email&utm_content=newsletter&oly_enc_id=5767J8016534I8J](https://www.beckershospitalreview.com/pharmacy/8-drugs-now-in-shortage-5.html?origin=PayerE&utm_source=PayerE&utm_medium=email&utm_content=newsletter&oly_enc_id=5767J8016534I8J)

Don't Wait: Submit Your Saved My Practice Profile Changes. United Health Care. March 1, 2025

“To improve your [My Practice Profile](#) experience and reduce data errors, saved changes will now be retained for 14 days.

The [My Practice Profile](#) tool on the UnitedHealthcare Provider Portal lets you view, update and attest to the care provider demographic information UnitedHealthcare members see for your organization.

What this means for you

Submit your saved changes promptly to ensure the best support and accurate data for your practice and our members. Starting mid-March, any changes not submitted within 14 days will be lost. You have the option to submit updates without reviewing and/or attesting to your profile.

Reminder: You have the option to submit updates without reviewing and/or attesting to your entire profile.

We're here to help. You can find more details in our [My Practice Profile interactive guide](#), or connect with us through chat 24/7 in the [UnitedHealthcare Provider Portal](#).”

<https://www.uhcprovider.com/en/resource-library/news/2025/submit-saved-mpp-changes.html?cid=em-provider-news-2025nnb2-Mar25>

Improve Patient Satisfaction Through Cultural Competency. United Health Care. March 1, 2025

“Sharing the race, ethnicity, written and spoken languages and cultural competency training of health care professionals is crucial to patients' well-being. If you're a roster manager, by including this information in your roster template, you help patients connect to health care professionals at your practice.

Please refer to our quick reference guide for instructions on [how to submit health equity identifiers in roster templates](#).

Closing gaps in care

Enabling patients to make informed decisions on their health care offers several benefits:

- **Enhanced patient-provider matching.** Patients can choose health care professionals who share their cultural background or speak their language, leading to better communication and understanding.
- **Improved trust and rapport.** When patients see that health care professionals have cultural competency training, they're more likely to feel respected and understood. This helps foster trust and build stronger relationships.
- **Reduced health care disparities.** Access to culturally competent care helps address and reduce disparities in health care outcomes among different racial and ethnic groups.
- **Increased patient satisfaction.** Patients who feel their cultural and linguistic needs are met are more satisfied with their health care, leading to better adherence to treatment plans and overall health outcomes.
- **Elevated safety and quality of care.** Clear communication reduces the risk of misunderstandings and errors, helping ensure safer and more effective care.

Questions? We're here to help.

Connect with us through chat 24/7 in the [UnitedHealthcare Provider Portal](#)."

<https://www.uhcprovider.com/en/resource-library/news/2025/highlight-cultural-competency-mpp.html?cid=em-provider-news-2025nnb2-Mar25>

SSI Clearinghouse Users Can Send Unsolicited Attachments Electronically. United Health Care. March 1, 2025

"Learn more about EDI 275 transactions and see the list of clearinghouses that support unsolicited claim attachments."

<https://www.uhcprovider.com/en/resource-library/edi/edi-transactions.html?cid=em-provider-news-2025nnb2-Mar25>

Ozempic Is Making Some Patients Go Blind: 'Will Ozempic Survive This? We'll See'. Sarah Caesar. MedLink Daily. March 10, 2025

"New research has found that GLP-1 drugs like Ozempic may potentially lead to serious vision problems, including blindness.

A recent paper published by Harvard researchers in *JAMA Ophthalmology* suggested that people who take semaglutide are more than four times as likely to develop a blindness-causing condition called nonarteritic anterior ischemic optic neuropathy (NAION), which is, essentially, a stroke in the eye."

Hathaway JT, Shah MP, Hathaway DB, et al. [Risk of nonarteritic anterior ischemic optic neuropathy in patients prescribed semaglutide](#). *JAMA Ophthalmology*. 2024;142(8):732-739.

Sullivan T. [Popular prescription weight loss drugs linked to uncommon blinding condition](#) [press release]. Mass General Brigham Mass Eye and Ear. July 3, 2024.

https://www.mdlinx.com/article/ozempic-is-making-some-patients-go-blind-will-ozempic-survive-this-we-ll-see/skp5GSFyBAVvSZrIYwg2X?show_order=1&utm_campaign=reg_daily-alert_250312_daily-nl-am-v4_registered-users-a180_other&utm_source=iterable&utm_medium=email

Cigna: What's New in the Provider Newsroom?. Cigna Provider Newsroom. March 21, 2025

2025 Clinical, Reimbursement, And Administrative Policy Updates – February Planned medical policy updates

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Policy name	Update	Effective date
Bilateral Procedures (M50)	We will reimburse bilateral procedure codes billed with modifier 50 at 150 percent of the fee schedule or other allowed amount. The claim line will be administratively denied when modifiers LT or RT are billed instead of modifier 50.	March 15, 2025, for dates of service on or after this date.

https://static.cigna.com/assets/chcp/secure/pdf/resourceLibrary/clinReimPolsModifiers/Modifier_50_Bilateral_Procedures.pdf

<https://providernewsroom.com/cigna-healthcare/2025-clinical-reimbursement-and-administrative-policy-updates/?brand=cigna-healthcare>

Access digital ID cards for your patients on CignaforHCP.com. March 13, 2025

“Over the past year, Cigna Healthcare has transitioned to digital customer ID cards to enable real-time updates for patient benefit plans and other important information...”

<https://providernewsroom.com/cigna-healthcare/digital-id-cards-are-here/?brand=cigna-healthcare>

Health Care Services Corporation Acquisition Of Cigna Healthcare Medicare Business Complete. March 19, 2025

“On March 19, 2025, The Cigna Group announced the completion of the sale of its Medicare and CareAllies businesses to Health Care Service Corporation (HCSC). ...”

<https://providernewsroom.com/cigna-healthcare/health-care-services-corporation-acquisition-of-cigna-healthcare-medicare-business-complete/?brand=cigna-healthcare>

Digital Correspondence On The Cigna For Health Care Professionals Website. March 11, 2025

“Effective the second quarter of 2024, Cigna Healthcare began leveraging the power of technology and data for digital claim and precertification correspondence in the Messaging...”

<https://providernewsroom.com/cigna-healthcare/correspondence-center-faq/?brand=cigna-healthcare>

Webinar Schedule for Digital Solutions. January 14, 2025

“You’re invited to join interactive, web-based demonstrations of the Cigna for Health Care Professionals website (CignaforHCP.com). Learn how to navigate the site and perform time-saving...”

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SECOND QUARTER 2025							
Topic	Date	Meeting time in U.S. time zones				Length	Meeting Number
		Eastern	Central	Mountain	Pacific		
CignaforHCP.com Overview	Tuesday, April 1	12:00 PM	11:00 AM	10:00 AM	9:00 AM	60 min	2537 165 4970
Eligibility and Benefits	Thursday, April 3	1:00 PM	12:00 PM	11:00 AM	10:00 AM	60 min	2532 368 9843
Checking Claim Status and Clear Claim Connection	Monday, April 7	1:00 PM	12:00 PM	11:00 AM	10:00 AM	60 min	2537 424 0931

Online Appeals and Claim Reconsiderations	Wednesday, April 9	1:00 PM	12:00 PM	11:00 AM	10:00 AM	60 min	2538 728 7869
Online Remittance Reports and Requesting a Fee Schedule	Tuesday, April 15	12:00 PM	11:00 AM	10:00 AM	9:00 AM	45 min	2537 662 8145
Message Center: Digital Claim & Precertification Correspondence	Thursday, April 17	1:00 PM	12:00 PM	11:00 AM	10:00 AM	60 min	2530 104 1238

And MORE...

<https://providernewsroom.com/cigna-healthcare/webinar-schedule-for-digital-solutions/?brand=cigna-healthcare>

<https://providernewsroom.com/category/cigna-healthcare/administrative-tips-cigna-healthcare/>

<https://providernewsroom.com/category/cigna-healthcare/digital-tools-and-provider-website/>

<https://providernewsroom.com/category/cigna-healthcare/>

INTERESTING CASE AND TOPICS

Surgeons Implant Teeth In Patients' Eyes To Restore Vision. Andrew Paul. Popular Science. March 5, 2024

"The rare 'tooth-in-eye' surgery was performed in Canada for the first time."

[https://www.popsci.com/science/eye-in-tooth-](https://www.popsci.com/science/eye-in-tooth-surgery/?utm_source=join1440&utm_medium=email&utm_placement=newsletter&user_id=66c4c7b2600ae15075a6ab)

[surgery/?utm_source=join1440&utm_medium=email&utm_placement=newsletter&user_id=66c4c7b2600ae15075a6ab](https://www.popsci.com/science/eye-in-tooth-surgery/?utm_source=join1440&utm_medium=email&utm_placement=newsletter&user_id=66c4c7b2600ae15075a6ab)
[be](#)

Volunteers Revive Pre-Trump CDC Website. Angrej Singh. Axios. March 6, 2025

"A team of volunteer archivists has recreated the Centers for Disease Control website, called [RestoredCDC.org](https://restoredcdc.org), as it appeared the day President Trump was inaugurated."

<https://www.axios.com/.../cdc-website-restored-trump-health>