

Provider Updates



Dear Provider,

This week, we are sharing the following provider updates — see below to learn more.

- [Sentara Health Plans Appointment Standards and After-Hours Protocol](#)
- [Cultural Competency Training](#)
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Sentara Health Plans Appointment Standards and After-Hours Protocol

Access to care is recognized as a key component of quality care. As a condition of participation, providers must provide covered services to members on a 24 hours per day, seven days a week basis, in accordance with Sentara Health Plans' standards for provider accessibility. This includes, if applicable, call coverage or other backup. Providers may also arrange an in-network

provider to cover patients in the provider's absence.

Providers must plan to refer members seeking care after regular business hours to an appropriate provider. Providers may direct the member to go to an emergency department for potentially emergent conditions, and this may be done via a recorded message.

Providers are encouraged to routinely review the appointment standards in each of the provider manuals on the [website](#). Standards may vary depending on plan type.

Cultural Competency Training

Sentara Health Plans embraces and promotes cultural humility as a foundational approach to the delivery of services. Delivering culturally competent care means providing services that are respectful, inclusive, and responsive to every individual. This includes individuals with limited English proficiency, diverse cultural and ethnic backgrounds, disabilities, pregnancy-related conditions, and those of all sexes and gender identities—encompassing sex characteristics (including intersex traits), sexual orientation, gender identity, and sex stereotypes.

To support this commitment, Sentara Health Plans encourages all providers to participate in cultural competency training. A valuable resource is available through Think Cultural Health, a training program developed by the U.S. Department of Health and Human Services. Providers can access this program via the provider education page on the Sentara Health Plans [website](#).

Providers have the flexibility to complete any cultural competency course that best fits their needs. After completing training, please complete the online [Cultural Competency Attestation Form](#), or submit an update through the provider update form on our [website](#) (under the "Other" checkbox). The provider directory will indicate which providers have completed cultural competency training.

Important Reminder: Provider Email Address Maintenance

All provider directory attestation notifications, reminders, and related communications will be sent via email through the Council for Affordable Quality Healthcare (CAQH). Providers are

responsible for ensuring their email addresses in CAQH are current and accurate. If email contact information is not current, providers may miss attestation reminders, which could lead to directory suppression for locations that are not attested within the required timeframe.

To comply with Centers for Medicare & Medicaid Services (CMS), Department of Health Services (DHS) requirements to maintain accurate provider directories—as well as the federal No Surprises Act, effective January 1, 2022—Sentara Health Plans requires all providers to verify their provider directory information at least every 90 days (quarterly).

Sentara Health Plans utilizes the CAQH portal for directory updates and attestation. CAQH will notify providers by email when directory attestation is due and when action is required to verify provider directory information.

Failure to attest every 90 days may result in further action per CMS guidelines. If a provider does not complete attestation for a specific location within the required timeframe, that location will be suppressed from the public provider directory until attestation is completed. Suppression does not mean the provider is out of network; however, members will be unable to locate the suppressed location in directory searches.

Providers must attest that the information in their CAQH profile is accurate for each listed location. Locations without a current attestation will be considered unverified and will be suppressed from the directory. Providers are strongly encouraged to regularly review and attest to their CAQH profiles to avoid any interruption in directory visibility.

Sentara Health Plans Partners With Avalon Healthcare Solutions for Laboratory Benefits Management T2015

Sentara Health Plans is partnering with Avalon Healthcare Solutions for laboratory benefits management (LBM). The commercial lines of business have been utilizing T2015 – Prescription Medication and Illicit Drug Testing in the Outpatient setting since November 4, 2021.

Effective September 23, 2026, Avalon will begin managing Prescription Medication and Illicit Drug Testing in the outpatient setting for our members with Medicaid.

Payment Policy Updates

- **Medicare Dual-Eligible Special Needs (D-SNP) Billing and Coding Policy - New (#5004)** - Effective date August 10, 2026
- **Sexually Transmitted Infection Testing Policy - Retired (#4072)** - Effective date September 8, 2026
- **Laboratory Service Payment Policy (#4390) Medicaid and (#4396) Commercial** - Effective date September 9, 2026
- **Retirement of Select Medicare Payment Policies** – To align with the (CMS) standards and eliminate duplicative or potentially conflicting guidance, the following Medicare payment policies will be retired.
 - **Always Therapy Modifiers Payment Policy (#4061)** – August 10, 2026
 - **Dialysis (#4404)** - Effective August 10, 2026
 - **Drug Testing Payment Policy (#4064)** - Effective August 10, 2026
 - **KX Modifier Payment Policy (#4060)** - Effective August 10, 2026
 - **Laboratory Services Payment Policy (#4389)** - Effective September 8, 2026
 - **Modifier FS Split Shared Visit (#4075)** - Effective August 10, 2026
 - **Modifier 25 Payment Policy (#4367)** - Effective August 10, 2026
 - **Modifier 57 Payment Policy (#4370)** - Effective August 10, 2026
 - **Repeat Admission (#3999)** - Effective August 10, 2026
 - **Robotic Assisted Surgery Payment Policy (#3827)** - Effective August 27, 2026

Authorization and Medical Policy Updates

[Visit our website](#) to view the most recent authorization and medical policy updates.

Upcoming Educational Opportunities

New Provider Orientation

This webinar introduces Sentara Health Plans to newly contracted providers as well as those seeking a refresher. This session delivers an in-depth overview of our key resources, self-service tools, and core operational processes to support an efficient and successful working relationship.

To register, please visit sentarahealthplans.com.

Lunch & Learn: Provider Website Tour – Provider Orientation Part 2

Take a break and join us for a 30-minute interactive session showcasing our newly designed provider website, built to make doing business with us easier, faster, and more efficient. You'll learn how to:

- Navigate the redesigned provider website with confidence
- Quickly locate the tools and guidance you need to conduct business smoothly
- Get answers quickly on your own without having to call for assistance

Bring your questions and curiosity. We're here to help you get the most out of the new online experience and all the resources available to you.

To register, please visit sentarahealthplans.com.

Claims Brush-Up

Join us for a 30-minute interactive session, designed to keep you informed on the latest claims trends, operational updates, and process changes. This is your opportunity to get quick, essential updates and ask questions directly to our experts.

To register, please visit sentarahealthplans.com.

Provider Quality Learning Collaborative

During this webinar, we will highlight key updates, review quality and value-based care measures, identify areas of opportunity that we are prioritizing, and walk through member support resources, programs, and initiatives. We will also share provider focused tools designed to support your care gap closure efforts.

August 5 Session: This session is designed for behavioral health and other providers and their staff interested in learning how a provider is achieving success in reducing avoidable emergency room (ER) admissions. You will hear how this fellow provider has relieved ER strain by providing quicker access to care with a crisis walk-in center.

To register for either session, please visit sentarahealthplans.com.

Appeals, Reconsiderations, and Contestment Processes

This training session is designed to help you navigate submission of reconsiderations and appeals. We will review differences in appeals submission processes and requirements by plan type, as well as related self-service resources available on the provider website.

To register, please visit sentarahealthplans.com.

Let's Talk Behavioral Health

Stay ahead in the rapidly evolving behavioral health sector with this comprehensive session developed to keep professionals informed, prepared, and ready for what's next. Whether you're a provider, administrator, or stakeholder, this session will equip you with the knowledge and tools to make informed decisions and successfully partner with us.

To register, please visit sentarahealthplans.com.

Did You Know?

Payment policies serve as a guide to assist with accurate claim submission. You can find the place of service codes in our payment policies, for all lines of business, in Availity under the Resources tab.

Sincerely,
Sentara Health Plans

[Register for upcoming provider webinars](#)
[View current policy and operations changes](#)