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## Did You Know?

Denied claims do not need to be sent as a request for reconsideration. A denied claim should be corrected and resubmitted electronically as a new claim.

Resubmissions should not be sent on paper, even if the claim has surpassed the 365-day timely filing period or if the claim has previously denied.

Contact the [Provider Services Call Center](#) at 1-844-235-2387 with questions on how to correct denied claims, timely filing or other billing and policy concerns regarding a formal appeal.

## All Providers

### The Written Appeals Process

If all means of achieving satisfactory claim resolution through the fiscal agent, including reconsideration, have been exhausted, providers may file a written appeal with the Office of Administrative Courts. The address for the Office of Administrative Courts is listed in Appendix A available under the Appendices drop-down on the [Billing Manuals web page](#). Appeals submitted to the Office of Administrative Courts must be received within 30 days from the mailing date of the last notice of action.

### The Top Five Reasons Enrollment Applications are Returned to Providers

Half of all enrollment applications are returned to providers due to errors. Providers are encouraged to review the list below for faster application approval.

1. **Missing or Non-Matching License or Certification Attachment** - The license attachment is missing, or the effective dates or end dates provided on the application do not match the documents provided as proof of licensure/certification.  
Note: Legal entity information on the application must match the documents provided as proof of legal entity status.
2. **Answer to Supplemental Question #7 (located in the 'Other Information' section) "Do you hold all licenses and certifications as required based on your provider type?"** - Providers are encouraged to carefully read each question prior to answering. All enrolling providers must answer this question regardless of license and certification requirements for the provider enrollment type. If licenses or certifications are not required for the provider enrollment type, this question must still be acknowledged.
3. **National Plan and Provider Enumeration System (NPPES) Address Mismatch** - The address in the National Plan and Provider Enumeration System (NPPES) does not match the service location address on the application.
4. **W9 Address Mismatch** - The address entered on the W9 attachment is required to match the mail to, pay to, or service location address in the application.
5. **Supplemental Questions (located in the 'Other Information' section)**- Provider did not complete this section at all.

Visit the [Common Reasons Enrollment Applications Are Returned to Providers web page](#) for more information.

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## Provider Participation Rule Change

Section 8.130 - Provider Participation is being updated in order to provide additional guidance on the expectations of all providers. The [proposed changes](#) are linked on the [Provider Resources web page](#).

Contact Sarah Geduldig at [Sarah.Geduldig@state.co.us](mailto:Sarah.Geduldig@state.co.us) with questions and comments. Comments will be open for 30 days.

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## Hospital Providers

### General Updates

#### All Hospital Providers

#### Hospital Stakeholder Engagement Meetings

Bi-monthly Hospital Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing. [Sign up to receive the Hospital Stakeholder Engagement Meeting newsletters.](#)

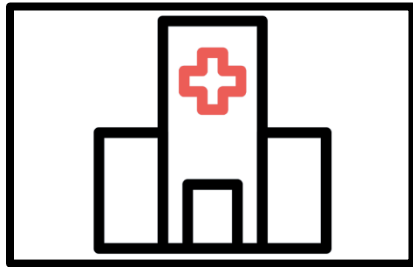
- The next Rural Hospital Engagement meeting is scheduled for [Thursday, May 6, 2021, from 2:00 p.m. - 4:00 p.m.](#) and will be hosted virtually.
- The All-Hospital Engagement meeting is scheduled for [Friday, May 7, 2021, from 9:00 a.m. - 12:00 p.m.](#) and will be hosted virtually.

Visit the [Hospital Stakeholder Engagement Meetings web page](#) for more details, meeting schedules and past meeting materials. **Calendar Year 2021 meetings have been posted.**

Contact Andrew Abalos at [Andrew.Abalos@state.co.us](mailto:Andrew.Abalos@state.co.us) with any questions or topics to be discussed at future meetings. Advanced notice will provide the Rates team time to bring additional Department personnel to the meetings to address different concerns.

### Outpatient Hospital Providers

#### Further Claim Adjustments to July 1, 2020, Rate Updates



Several claims were identified relating to the July 1, 2020, outpatient hospital rate updates which were not adjusted in the Department's previous effort. Impacted claims were adjusted during the last three weeks of April. Please note that the claims identified for adjustment exclude those that will need to be adjusted for the Drug Re-Weight update effective as of June 1, 2020. Impacted claims will be targeted for adjustments after the drug re-weight payment

policies can be accommodated.

Contact Andrew Abalos at [Andrew.Abalos@state.co.us](mailto:Andrew.Abalos@state.co.us) with any questions relating to the reprocessing of outpatient hospital claims or the Enhanced Ambulatory Patient Grouper (EAPG) payment methodology.

### Rural Health Clinics

Bi-monthly Rural Health Clinic Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing.

- The next Rural Health Clinic Engagement meeting is scheduled for [Thursday, May 6, 2021, from 12:30 p.m. to 1:30 p.m.](#) and will be hosted virtually on Zoom.

Visit the [Rural Health Clinic Engagement Meeting web page](#) for more details, meeting schedules and past meeting materials. **Calendar Year 2021 meetings have been posted.**

Contact Erin Johnson at [Erin.Johnson@state.co.us](mailto:Erin.Johnson@state.co.us) with any questions or topics to be discussed at future meetings. Advanced notice will provide the Rates team time to bring additional Department personnel to the meetings to address different concerns.

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## Maternity Care Providers

### **Billing Changes for Twin or Other Multiple Births**

Effective May 1, 2020, the method of billing for twins or other multiple infant deliveries must be indicated by using modifier 59 and not modifier 22. Billing guidelines for multiple deliveries remain the same, as noted on the [Obstetrical Care Billing Manual web page](#). These guidelines include the requirement and continued use of Modifier XU, associated with National Correct Coding Initiative (NCCI) edits.

Below are the revised billing guidelines for twins (or multiple infant) deliveries, as found on the [Obstetrical Care Billing Manual web page](#).

### Billing for Multiple Infants

To avoid claim denials and National Correct Coding Initiative (NCCI) edits on claims involving the delivery of multiple infants, additional information is required.

**For Cesarean Deliveries:** Bill only one CPT code and only one (1) unit for the complete cesarean delivery, regardless of the number of babies delivered. Whether reporting for a global delivery (59510 or 59618), delivery only (59514 or 59620), or delivery including post-partum care (59515 or 59622) only one cesarean procedure (with one incision) is being performed. Use the most accurate/complete procedure code which describes the antenatal care, delivery history, current delivery type, and any postnatal care provided for the current pregnancy.

**For Vaginal Deliveries:** Bill multiple infants using the guidelines outlined below:

For the first infant (Baby A), use the most accurate and complete vaginal delivery diagnostic and procedure code. Choose the procedure code which best describes all services provided and considers delivery history, current delivery type, prenatal care and postnatal care. Bill one unit of service for Baby A.

For the additional infant (Baby B), bill this infant on a separate line using one of the following delivery-only codes: 59409 or 59612. Choose the code associated with the delivery history and delivery type you used for Baby A.

Include modifier 59 in the first position for Baby B. Use the delivery date as the date of service.

### For Vaginal Deliveries followed by a Cesarean Delivery:

**For a Vaginal Delivery of the first infant (Baby A):** Use either code 59409 or 59612 "vaginal delivery only" for Baby A. Include modifier 59 in the first position for Baby A. Bill only one (1) unit of service.

**For Cesarean Delivery of the second infant (Baby B):** Use the most accurate/complete global cesarean procedure code that describes the antenatal and/or postnatal care or delivery only care provided for the current pregnancy. Use one of the following codes for Baby B: global delivery (59510 or 59618), delivery only (59514 or 59620), or delivery including post-partum care (59515 or 59622). Choose the Cesarean code associated with the same delivery history you used for Baby A: (59510 or 59515 with 59409) OR (59618, 59620 or 59622 with 59612). Bill one (1) unit of service for Baby B. Each infant should be listed on a separate line. Use the delivery date as the date of service.

**NCCI Edit Requirements:** A second modifier XU is required for NCCI edits when the following code combinations are billed: 59410 with 59409, 59610 with 59612 or 59614 with 59612.

NCCI edits do not allow procedure code 59514 to be combined or billed with codes 59400, 59409 or 50410.



# Physician-Administered Drugs (PAD) Providers

## Prior Authorization Update

A select number of physician-administered drugs (PADs) will be subject to prior authorization (PA) requirements no earlier than July 1, 2021.

After implementation, providers should ensure that any Health First Colorado member due to receive any of the following PADs have an approved PA on file prior to administration.

Drug Class	HCPCS	Drug Name
Bone Resorption Inhibitor Agents	J0897	Prolia
		Xgeva
Immune Globulin Agents	J1459	Privigen
	J1556	Bivigam
	J1557	Gammaplex
	J1561	Gammaked
		Gamunex
		Gamunex-C
	J1566	Gammagard S/D
	J1568	Octagam 5%, 10%
	J1569	Gammagard Liquid
	J1572	Flebogamma DIF
	J1599	Asceniv
Panzyga		
Monoclonal Antibody Agents	J0517	Fasenra
	J1300	Soliris
	J1745	Remicade
	J2182	Nucala
	J2357	Xolair

Drug Class	HCPCS	Drug Name
	J2786	Cinqair
	J3380	Entyvio
Multiple Sclerosis Agents	J2323	Tysabri
	J2350	Ocrevus
Neuromuscular Agents	J0585	Botox
	J0586	Dysport
	J0587	Myobloc
	J0588	Xeomin

All PAD PA procedures and clinical criteria can be found on [Appendix Y: Physician Administered Drug Medical Benefit Prior Authorization Procedures and Criteria](#).

Keystone Peer Review Organization (Kepro) will offer various training sessions to providers within the coming months. Additional information will be sent via email, newsletters, monthly provider bulletins and posted to the [ColoradoPAR: Health First Colorado Prior Authorization Request Program](#) and [Physician Administered Drug Provider Resources](#) web pages.

All other PAD questions can be directed to [HCPF\\_PAD@state.co.us](mailto:HCPF_PAD@state.co.us).

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## Pharmacies and All Medication-Prescribing Providers

### **Drug Utilization Review (DUR) Update - Pharmacy Claims Edit for Concomitant Opioid and Oral Buprenorphine-Containing MAT Therapy**

Effective June 1, 2021, pharmacy claims for opioid medications will require entry of National Council for Prescription Drug Programs (NCPDP) Drug Utilization Review (DUR) rejection codes at point of sale when submitted for members currently receiving an oral buprenorphine-containing product indicated for treatment of opioid use disorder. Based on the type of pharmacist intervention that occurs upon clinical evaluation of the medication combination, entry of the following NCPDP DUR codes will be accepted to override the rejected claim:

- **Reason for Service Code:** DD - Drug Interaction
- **Professional Service Code:** MA - Medication Administered, M0 - Prescriber Consulted, P0 - Patient Consulted, or R0 - Pharmacist Consulted Other Source

- **Result of Service Code:** 1A - Filled as is, false positive, 1B - Filled prescription as is, 1C - Filled with different dose, 1D - Filled with different directions, 1F - Filled with different quantity, or 1G - Filled Rx with Prescriber Approval.

Providers may contact the Magellan Rx Management Pharmacy Call Center at 1-800-424-5725 for questions or assistance with pharmacy claims processing.

## Physicians, Physician Assistants, and Nurse Practitioners

### Lead Poisoning Survey



The Childhood Lead Poisoning Prevention Program, a program administered by the Colorado Department of Public Health and Environment (CDPHE), is conducting a brief survey of health care providers in Colorado.

Physicians, physician assistants, and nurse practitioners who primarily oversee childhood health screenings or visits are invited to participate in the survey to help improve public health.

The survey includes questions about provider experiences to help identify barriers to screening children for blood lead poisoning and **should take about 5-6 minutes to complete.**

**The first 20 qualified respondents will receive a \$200 Visa gift card.**

**All responses to the survey will be kept strictly confidential and will not be associated with individual participants.** CDPHE will follow-up and share the results of the survey upon request.

The survey link can be found below and will be open for responses until June 7, 2021. Questions about the survey can be directed to [Brandon@SE2Communications.com](mailto:Brandon@SE2Communications.com).

[START THE SURVEY](#)

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## Provider Billing Training Sessions

### May and June 2021 Provider Billing Webinar-Only Training Sessions

Providers are invited to participate in training sessions for an overview of Health First Colorado billing instructions and procedures. The current and following months' workshop calendars are shown below.

**Who Should Attend?**

Staff who submit claims, are new to billing Health First Colorado services, or need a billing refresher course should consider attending one or more of the following provider training sessions.

The institutional claims (UB-04) and professional claims (CMS 1500) training sessions provide high-level overviews of claim submission, prior authorizations, navigating the [Department's website](#), using the [Provider Web Portal](#), and more. For a preview of the training materials used in these sessions, refer to the Beginner Billing Training: Professional Claims (CMS 1500) and Beginner Billing Training: Institutional Claims (UB-04) available on the [Provider Training web page](#) under the Billing Training - Resources drop-down section.

For more training materials on navigating the Provider Web Portal, refer to the Provider Web Portal Quick Guides available on the [Quick Guides web page](#).

**Note:** Trainings may end prior to 11:30 a.m. MT. Time has been allotted for questions at the end of each session.



## May 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1
2	3	4	5	6	7	8
9	10	11	12	13 <a href="#">Beginner Billing Training: Professional Claims (CMS 1500)</a> 9:00 a.m. - 11:30 a.m. <a href="#">MT</a>	14	15
16	17	18	19	20 <a href="#">Beginner Billing Training: Institutional Claims (UB-04)</a> 9:00 a.m. - 11:30 a.m. <a href="#">MT</a>	21	22
23/30	24/31 <b>Memorial Day</b>	25	26	27	28	29

## June 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10 <a href="#">Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m. - 11:30 a.m. MT</a>	11	12
13	14	15	16	17	18	19
20	21	22	23	24 <a href="#">Beginner Billing Training: Institutional Claims (UB- 04) 9:00 a.m. - 11:30 a.m. MT</a>	25	26
27	28	29	30			

### Live Webinar Registration

Register for a live webinar by clicking the title of the desired training session in the calendar above and completing the webinar registration form. An automated response will confirm the reservation. For questions or issues regarding webinar registration, email [co.training@gainwelltechnologies.com](mailto:co.training@gainwelltechnologies.com) with the subject line "Webinar Help." Include a description of the issue being experienced, name and contact information (email address and phone number), and the name and date of the webinar(s) to be attended. Allow up to 2-3 business days to receive a response.

## Upcoming Holidays

Holiday	Closed Offices/Offices Open for Business
<p align="center"><b>Memorial Day</b> Monday, May 31</p>	<p>State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be closed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.</p>

## Gainwell Technologies Contacts

**Provider Services Call Center**  
1-844-235-2387

**Gainwell Technologies Mailing Address**  
P.O. Box 30  
Denver, CO 80201