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## Did You Know?

The new [ConnectToCareJobs website](#) connects health care employers with potential employees. Skilled Nursing Facilities, Assisted Living Residences, Intermediate Care Facilities and Residential Care Facilities can begin registration now by completing the [ConnectToCare provider survey](#). A [checklist of the registration process](#) is available.

## All Providers

### Fiscal Year 2020-2021 Provider Rate Adjustments

Health First Colorado (Colorado's Medicaid Program) provider rate decreases were approved during the 2020-2021 legislative session and are effective for dates of service beginning July 1, 2020. All rate adjustments are subject to Centers for Medicare & Medicaid Services (CMS) approval prior to implementation. The fee schedules located on the [Provider Rates & Fee Schedule web page](#) have been updated to reflect the approved 1.0% across-the-board (ATB) rate decreases. Rates will be updated in the Colorado interChange once approval is received from CMS.

Services & Supplies Approved for Across-the-Board Decreases:

- Physician and clinic services
- Dental Services
- Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services
- Family planning services
- Inpatient hospital services
- Outpatient hospital services
- Laboratory and x-ray services
- Durable medical equipment, supplies, and prosthetics
- Non-physician practitioner services
- Tobacco cessation counseling for pregnant women
- Ambulatory surgery center services
- Dialysis center services
- Physical, occupational, and speech therapy, and audiology services
- Screening, Brief Intervention, and Referral to Treatment (SBIRT) services
- Rehabilitation and behavioral health services
- Outpatient substance abuse services
- Case management services for substance abuse treatment
- Vision services
- Extended services for pregnant women
- Home & Community-Based Services (HCBS)
- Private duty nursing
- Acute and long-term home health
- Psychiatric Residential Treatment Facilities (PRTF)
- Intellectual or Developmental Disability (IDD) targeted case management
- Anesthesia services
- Laboratory and pathology services
- Targeted Case Management Transition Services

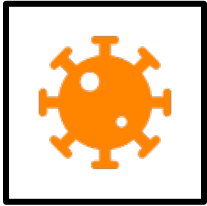


The 1.0% across-the-board decrease for HCBS waivers services does not require CMS approval. Claims with dates of service on or after July 1, 2020, will be reimbursed at a decreased rate for providers for the following waivers:

- HCBS waivers:
  - HCBS - Brain Injury (BI)
  - HCBS - Children's Extensive Supports (CES)
  - HCBS - Children's Home and Community Based Service (CHCBS)
  - HCBS - Children with Life Limiting Illness (CLLI)
  - HCBS - Children's Residential Habilitation Program (CHRP)
  - HCBS - Community Mental Health Supports (CMHS)
  - HCBS - Developmental Disability (DD)
  - HCBS - Elderly, Blind and Disabled (EBD)
  - HCBS - Spinal Cord Injury (SCI)
  - HCBS - Supported Living Services (SLS)

Updates will continue to be published when CMS approval is received.

## Help for the Uninsured During the Coronavirus (COVID-19) Pandemic



[COVID-19 testing costs for uninsured Coloradans](#) is covered. Providers treating uninsured patients with COVID-19 symptoms may submit procedure codes for COVID-19 testing.

Treatment or care for complications associated with COVID-19 for uninsured patients are not covered; however, the Health Resources & Services Administration (HRSA) has established funding to cover treatment costs for uninsured COVID-19 patients.

*Uninsured patients must have a member ID.* Providers must verify the patients' eligibility for COVID-19 benefits. These individuals must display in the Provider Web Portal as COVID-19 on the Benefit Details grid as an "EMS" Coverage type with the following Description "Emergency Medical Service-HD-EMS COVID-19 Only".

Health care providers who have provided treatment to uninsured individuals with a COVID-19 diagnosis for dates of service or admittance on or after February 4, 2020, may be eligible for claims reimbursement as long as the service(s) provided meet the established coverage and billing requirements. Visit the [Health Resources & Services Administration website](#) to learn more.

### "Lower of" Pricing Logic for Rate Increases

If rate increases are implemented, claims that were already billed with and paid at a rate lower than the new rate cannot be adjusted for the higher rate by the DXC Technology (DXC). The "lower of" pricing logic will always be used. Providers are advised to bill their usual and customary charges.

Not all codes are listed on the Health First Colorado Fee Schedule available on the [Provider Rates & Fee Schedule web page](#), so providers are advised to check all fee schedules which apply to their billing practices. If a code is not listed on the Health First Colorado Fee Schedule, it may be listed on a benefit-specific fee schedule.

### Provider Recruitment – New Health First Colorado Providers Needed

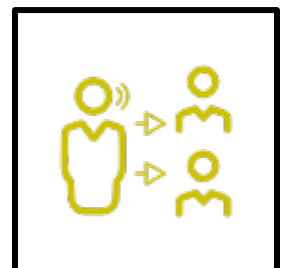
Health First Colorado providers are needed now to help treat the influx of new Health First Colorado members.

To combat the COVID-19 pandemic and the rise in member enrollment, Health First Colorado providers are encouraged to share the Department's need for more providers with other providers who may not be enrolled.

#### Enrollment Waivers

The following incentives are being offered to increase provider enrollment:

- Allowing temporary enrollment for providers during the federally designated COVID-19 emergency
- Waiving the application fee and fingerprinting process for applicable providers
- Waiving site surveys for applicable providers



## Health First Colorado Provider Benefits

- **Fast Payment:** Health First Colorado pays faster than private payers, with claims paid weekly and deposited directly into a bank account.
- **Quick and Easy Enrollment:** Online enrollment with approvals in just a few weeks.
- **Quick Customer Service:** The Provider Services Call Center answers calls in less than two minutes on average and regional provider field representatives are available to assist with more complex questions.
- **Customizable Patient Experience:** Providers have full control of the number of Health First Colorado patients seen. Providers may also choose to have the practice published in the online Provider Directory.

Visit the [Provider Enrollment web page](#) or contact the [Provider Services Call Center](#) at 1-844-235-2387, Option 2, then option 5 for enrollment assistance.

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## Revalidation

### Revalidation Testing Period Now Complete

Some providers were invited to participate in an early revalidation testing phase in exchange for feedback and recommended improvements to the process. The Department of Health Care Policy & Financing (the Department) and DXC Technology (DXC) thank these providers for their participation and feedback and have implemented changes to the process to benefit the broader provider community as they complete revalidation. Revalidation has now begun for providers who originally enrolled in 2015 and will need to revalidate in 2020. Providers can find their revalidation date on the [Provider Web Portal](#) or by contacting the [Provider Services Call Center](#) at 1-844-235-2387.



### Revalidation Application Accessible Only Through Provider Web Portal

The revalidation application is only accessible through the Provider Web Portal. This is separate from the Enrollment Portal, which is used for new applications. To resume a previously started revalidation application, do so in the Provider Web Portal. In preparation for the revalidation process, providers (even those who do not bill claims) who are not registered within the [Provider Web Portal](#) are encouraged to register in order to access and submit their revalidation application

### National Provider Identifiers (NPIs) Cannot Be Updated During the Revalidation Process

[House Bill \(HB\) 18-1282](#) requires newly enrolling and currently enrolled organization health care providers (not individuals) to obtain and use a unique, new NPI. This must be done through a provider maintenance update.

### Email Addresses to Receive Revalidation Letter

Providers are reminded to keep their contact information up to date in the [Provider Web Portal](#) to ensure receipt of their revalidation letter. The revalidation letter will be sent to the email addresses on file for mailing, service location and billing, but will only go to the primary email address on file for each of these.

## Telemedicine Services

Effective March 2020, the State Plan Telemedicine benefit coverage was greatly expanded to respond to the unique challenges faced by the COVID-19 state of emergency. Many types of providers can provide and bill for services performed via telemedicine. The Department recognizes the need to provide guidance on appropriate types of practices, to avoid any confusion when navigating these additional telemedicine flexibilities.



Telemedicine services are only reimbursable by Health First Colorado's Fee-For-Service program, physical health Managed Care plans, DentaQuest and the Regional Accountable Entities, if the services meet all of the following requirements:

1. Initiated by the member (unsolicited phone calls to members by a provider are not reimbursable);
2. Meet the same standard of care had they been provided in-person;
3. Medically necessary or necessary to support the member in the community;
4. Within the rendering provider's scope of practice;
5. Compliant with the same documentation requirements as if the service had been rendered in-person.

For additional guidance on telemedicine services, visit the [Telemedicine - Provider Information web page](#).

## All Providers Who Utilize eQSuite® for Prior Authorization Requests (PARs)

### Contacting the Department's Prior Authorization Vendor

Providers should first call [eQHealth Solutions](#), the Department's prior authorization vendor, or email eQHealth Solution's Provider Relations Specialist at [co.pr@eqhs.com](mailto:co.pr@eqhs.com) for prior authorization status or assistance with the PAR portal, eQSuite®.

Providers with concerns relating to eQHealth Solutions may contact [hcpf\\_um@state.co.us](mailto:hcpf_um@state.co.us)

Include the Review ID, PAR number, Medicaid ID, Ticket number, call number, etc. in the email.

## Home and Community Based Services (HCBS) Providers

### 1% Across the Board Rate Reduction Effective July 1, 2020



The Colorado General Assembly has approved a 1% across the board rate reduction for most Home and Community Based Services (HCBS) benefits. The rate reduction will affect services differently. Some providers may have to contact the member's case manager, depending on the service.

The new rates will be effective July 1, 2020, for all non-negotiable rates except for Consumer Directed Attendant Support Services (CDASS). CDASS rates will be decreased effective September 1, 2020.

- **Set Rate Services**
  - The Department will update rates in the Bridge and Colorado interChange for services with set rates, such as personal care and homemaker.
- **Post-Eligibility Treatment of Income (PETI)-Adjusted Rate Services (Alternative Care Facilities [ACF]: T2031 and Supportive Living Program [SLP]: T2033)**
  - The Department will be updating existing PETIs and Prior Authorization Request (PAR) service lines by June 30, 2020. Existing PETIs and PAR lines will be end dated for June 30, 2020, and new PETIs and PAR lines will automatically be created with the decreased rate beginning July 1, 2020.
  - Providers should verify the rate in the Provider Web Portal or contact the members' case manager after July 1, 2020, to obtain the new rate.
  - For newly enrolled or soon to be enrolled members, providers should contact the members' case manager regarding these services.
- **Negotiated Rate or Manually Priced Services**
  - These rates and service lines are not subject to the 1% rate reduction and will not be adjusted for services such as home modifications and medication reminders.
  - Providers should continue to bill the approved rate on the Prior Authorization.
- **Support Plan Authorization Limit (SPAL) for the HCBS Supported Living Services waiver (HCBS-SLS)**
  - The SPAL will also be adjusted to reflect the rate decrease.
  - Providers should consult the HCBS Fee Schedule effective July 1, 2020, available on the [Provider Rates and Fee Schedule web page](#) under the HCBS Rate Schedule drop-down for more information.
- **Overall Waiver Spending Limits for the HCBS Supported Living Services (HCBS-SLS) and Children's Extensive Supports (HCBS-CES) waivers**
  - The overall spending limit will be adjusted to reflect the rate decrease.
  - Providers should consult the HCBS Fee Schedule effective July 1, 2020, available on the [Provider Rates and Fee Schedule web page](#) under the HCBS Rate Schedule drop-down for more information.

Providers are encouraged to review the HCBS Fee Schedule effective July 1, 2020, available on the [Provider Rates & Fee Schedule web page](#) under the HCBS Rate Schedule drop-down.

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## **Home Health Providers**

### **Temporary Suspension of Prior Authorization Request (PAR) Requirements**

PAR requirements are being suspended for Pediatric Long-Term Home Health and Private Duty Nursing as of July 1, 2020, until approximately September 30, 2020, if not later. PARs do not need to be submitted to the Department's prior authorization vendor, eQHealth Solutions, for dates of service beginning July 1, 2020.

Though the prior authorization requirements are temporarily suspended, providers should continue to provide and bill for only medically necessary and ordered services in accordance with state law.\*

Failure to comply with medical necessity and benefit limitations in the regulations below may result in compliance monitoring, including prospective and post-payment reviews of claims and recovery of any identified overpayment in accordance with state law.\*\*



Additional guidance will be issued through the provider bulletin before the PAR requirements suspension ends. Information will also be posted on the [ColoradoPAR website](#).

\*10 Code of Colorado Regulations (CCR) 2505-10, Section 8.520 (Home Health Services) and 10 CCR 2505-10, Section 8.540 (Private Duty Nursing Services)

\*\*10 CCR 2505-10, Section 8.076 (Program Integrity)

Contact eQHealth Solutions Customer Service Line at 888-801-9355. Email [hcpf\\_UM@state.co.us](mailto:hcpf_UM@state.co.us) with any unresolved issues.

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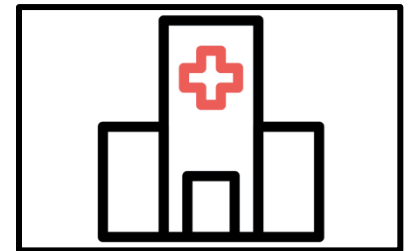
## Hospital Providers

### General Updates

#### Inpatient Hospital Providers

##### Separation of Mother's Delivery & Newborn Birth Claims

Inpatient claims with a To Date of Service (TDOS) of July 1, 2020, and later, will no longer require hospitals to bill a mother's delivery and services provided to newborns during the mother's inpatient stay under a single combined claim. For additional information on reasons for the change, review meeting materials on the [Hospital Stakeholder Engagement Meeting web page](#).



##### All Patients Refined Diagnosis Related Groups (APR-DRG) Weight Table Available for Review

The Department presented the budget-neutral change to the APR-DRG Weight Table and table of *estimated changes* in expected payments for all in-state hospitals. The tables are available for review under the Friday, March 6, 2020, Hospital Stakeholder Engagement Meetings section on the [Hospital Stakeholder Engagement Meeting web page](#). Recording of the meeting and summary of the meeting are also available for review.

Contact Diana Lambe at [Diana.Lambe@state.co.us](mailto:Diana.Lambe@state.co.us) for further information or with questions.

#### Inpatient Hospital Per Diem Reimbursement

##### Department Staff Update

Elizabeth Quaife has resigned from the Department effective June 11, 2020. Contact Andrew Abalos at [Andrew.Abalos@state.co.us](mailto:Andrew.Abalos@state.co.us) with questions or concerns.

#### All Hospital Providers

##### Bi-Monthly Hospital Stakeholder Engagement Meetings

The Department will continue to host bi-monthly Hospital Engagement meetings to discuss current issues regarding payment reform and operational processing. The next meeting is scheduled for **Friday, July 10, 2020**, and will be hosted virtually. Visit the [Hospital Stakeholder Engagement Meeting web page](#) for more details. **Calendar Year 2020 meetings have been posted.**

[Sign up to receive the Hospital Stakeholder Engagement Meeting newsletters.](#)

Visit the [Hospital Stakeholder Engagement Meeting web page](#) for more details, meeting schedules and past meeting materials.

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**

#### **Outpatient Cost Settlement Update**

In response to the COVID-19 pandemic, the Department paused outpatient hospital cost settlements. However, the Department will begin resuming normal processes for hospitals mid-July. Hospitals which have recently had their cost reports finalized for periods prior to the implementation of the Enhanced Ambulatory Patient Grouping methodology should expect demand letters from the Department around this time.

Contact Andrew Abalos at [Andrew.Abalos@state.co.us](mailto:Andrew.Abalos@state.co.us) with questions or concerns.

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## **Hospital Transformation Program (HTP) Update**

### **Hospital Workgroup Meetings**

HTP hospital workgroups reconvened virtually on June 18, 2020, to discuss updated program components and the HTP portal development.



### **Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) Board meeting**

The CHASE Board meeting took place [via webinar](#) on Tuesday, June 23, 2020, at 3:00 p.m. Additional information about the board, as well as meeting materials, can be found on the [Colorado Healthcare Affordability and Sustainability Enterprise \(CHASE\) Board web page](#).

### **Community Advisory Council**

A Community Advisory Council meeting was held on Friday, June 26, 2020. The agenda and previous meeting notes can be found on the [HTP Community Advisory Council web page](#).

Stakeholders are encouraged to visit the [Colorado Hospital Transformation Program web page](#) and read past editions of the HTP Newsletter and HTP communications in [the online archives](#). Contact Hospital Relations and Communication Manager Courtney Ronner at [Courtney.Ronner@state.co.us](mailto:Courtney.Ronner@state.co.us) with any questions.

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## **Inpatient Hospital Review Program (IHRP) Suspended**

The Inpatient Hospital Review Program (IHRP) was suspended as of April 1, 2020, due to the COVID-19 pandemic. Prior Authorization Requests (PARs) are not required for in-state, inpatient admissions on or after April 1, 2020. This suspension was previously announced in the [April 2020 Provider Bulletin \(B2000447\)](#). The Department will resume IHRP in the future but will ensure appropriate time for planning, training and resuming normal operations prior to requiring a PAR for an admission. The IHRP Joint Operating Committee meetings held by the Department on a monthly basis are also suspended and will resume prior to the restart of IHRP.



Please note that PARs are still required for all non-emergent out-of-state inpatient admissions as well as all surgical procedures requiring a PAR, as noted in the current Health First Colorado Fee Schedule available on the Provider RATES & Fee Schedule web page. Contact [hcpf\\_UM@state.co.us](mailto:hcpf_UM@state.co.us) with any questions or concerns about IHRP.

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## **Laboratory, Physician Services and Hospital Providers**

### **Replace Current Procedural Terminology (CPT) Codes With Healthcare Common Procedure Coding System (HCPCS) Codes**

Beginning July 1, 2020, there will be a 30-day public comment period pertaining to the [closing of CPT codes 80320-80377 and the opening of HCPCS codes G0480-G0483](#).

It is anticipated that CPT codes 80320-80377 will no longer be billable, effective for dates of service on or after September 1, 2020. They will be replaced with codes G0480-G0483.

Contact Justen Adams at [Justen.Adams@state.co.us](mailto:Justen.Adams@state.co.us) for more information.

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## **Non-Emergent Medical Transportation (NEMT) Providers**

### **Broker Expansion**

Effective July 1, 2020, IntelliRide will be taking over the management of the NEMT benefit across the state of Colorado.

NEMT is a benefit the Department provides to Health First Colorado (Colorado's Medicaid program) members who do not have any other mode of transportation to covered medical appointments.

Existing transportation providers enrolled to provide NEMT services outside of the current IntelliRide Service area, or providers in the current service area looking to expand business should email [us.join\\_our\\_network@transdev.com](mailto:us.join_our_network@transdev.com) to complete the process of joining the network.

**Once enrolled with IntelliRide, trips billed for July 1, 2020, or later must be billed through IntelliRide for reimbursement, instead of billing directly through the fiscal agent or county administrators. Any trips completed before July 1, 2020, should be billed using current processes.**



Historically, the benefit has been administered differently throughout the state. The nine Front Range counties are managed by an NEMT broker, and all others are administered by other state designated entities. Expanding management of the NEMT benefit to one statewide broker will help improve customer service to both members and county partners. By moving to a single statewide vendor, the state is better able to ensure more consistent, streamlined operations and infrastructure, including improved access for members and reduced administrative burden for counties.

IntelliRide is contracted to do the following:

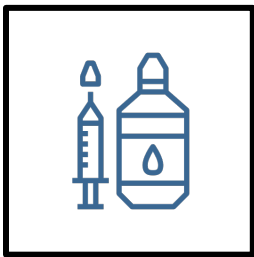
- Credential transportation providers, including vehicle inspections and driver background checks as required to join the network
- Conduct ongoing provider training for providers that are new to delivering NEMT Services
- Schedule rides to Health First Colorado covered services for members who are eligible for NEMT
- Process reimbursement for members who are eligible for person mileage reimbursement under NEMT
- Coordinate out-of-state transportation for members once approved, when services are not available in Colorado
- Field and resolve complaints, and address with providers as needed (including retraining or disenrolling)

Contact [NEMT@state.co.us](mailto:NEMT@state.co.us) for additional information or with questions regarding the broker expansion.

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## **Pharmacy and All Medication-Prescribing Providers**

### **Nasal Atomizer Billing**



Healthcare Common Procedure Coding System (HCPCS) code A4210 (Nasal atomizers (MAD140) for use with midazolam vial) can be billed by a pharmacy as a professional claim. The nasal atomizer is the MAD140 Intranasal Mucosal Atomization Device with 3 ml syringe and vial adapter included. If a diagnosis code is required, use the appropriate diagnosis code for the individual patient.

The nasal atomizer dispensed limit is up to a total of fifteen (15) per year. A prior authorization is not required.

Contact the [Provider Services Call Center](#) at 1-844-235-2387 with any billing questions.

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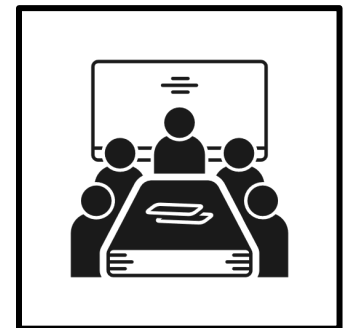
## **Pharmacy and Therapeutics (P&T) Committee Meeting**

Tuesday, July 14, 2020

1:00 p.m.-5:00 p.m.

303 E 17th Ave (meeting to be held virtually, not in person)

Agenda and meeting information can be found on the [Pharmacy and Therapeutics \(P&T\) Committee web page](#).



# Physical, Occupational and Speech Therapy Providers

## Guidelines for Early Intervention (EI) Therapy Providers

EI physical, occupational and speech therapy providers are reminded of the following guidelines regarding Health First Colorado coverage of EI therapies. All EI therapy providers are expected to follow these guideline.

EI therapy services shall be provided to meet the developmental needs of an eligible infant or toddler and the needs of a parent or other caregivers to achieve the outcomes identified in the Individualized Family Service Plan (IFSP). IFSP ordered therapies must be:

- Based on appropriate peer-reviewed, evidence-based practices, to the extent which is practical. This includes coaching the caregivers on the identified strategies.
- Related to functional outcomes and developmentally appropriate practices to support participation in everyday routines, activities and places.
- Provided in the natural environments of the child and family to the maximum extent appropriate.



The following information is regarding Prior Authorization Requests (PARs) and claims.

- The approved IFSP shall qualify as meeting the standard for medically necessary services (pursuant to SB 07-004).
- Providers must attach the approved IFSP to the PAR submission which substantiates the procedure codes and number of units requested.
- Claims may be billed for units of service up to, but not exceeding, the number of units approved on the PAR for EI therapy services.

Contact Beth Cole at [Beth.Cole@state.co.us](mailto:Beth.Cole@state.co.us) with additional questions regarding the EI Colorado Program. Contact Gina Robinson at [Gina.Robinson@state.co.us](mailto:Gina.Robinson@state.co.us) for more information related to Health First Colorado.

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## Physician-Administered Drug (PAD) Providers

### Quarter 3 Rate Updates 2020

The PAD rates for the third quarter of 2020 have been updated. The new rates are effective July 1, 2020, and are posted to the [Provider Rates & Fee Schedule web page](#) under the Physician Administered Drug Fee Schedule drop-down section.

Contact Emily Ng at [Emily.Ng@state.co.us](mailto:Emily.Ng@state.co.us) with any questions about PAD rates.

# Provider Billing Training Sessions

## July and August 2020 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 UB-04 and 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 - Schedule and Signup drop-down section.

Specialty training sessions provide more training for that particular provider specialty group. Providers are advised to attend a UB-04 or CMS 1500 training session prior to attending a specialty training. For a preview of the training materials used for specialty sessions, visit the [Provider Training web page](#) and open the Billing Training - Schedule and Signup 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.

## July 2020

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

## August 2020

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. MT	14	15
16	17	18	19	20	21	22
23	24	25	26	27 <a href="#">Beginner Billing Training: Institutional Claims (UB-04)</a> 9:00 a.m. - 11:30 a.m. MT	28	29
30	31					

**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@dxc.com](mailto:co.training@dxc.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
<b>Independence Day Friday, July 3 (observed)</b>	State Offices, DentaQuest, DXC 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.



# **DXC Contacts**

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