COLORADO
Department of Health Care
Policy & Financing

Provider Bulletin

Reference: B2000455

Nov. 2020

Did You Know?

It is important to ensure that employees who have left a group or clinic no longer have Provider Web Portal access for information such as revalidation, claims, eligibility and banking updates. Providers must inactivate all delegates no longer in the group by logging into the Provider Web Portal, clicking on Manage Accounts, and clicking the Add New Delegate/Office Staff tab. Scroll down to locate the applicable name and change the status to inactive. For more information, reference the Delegates – Provider Web Portal Quick Guide web page.

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All Providers

Maintaining Current Licenses

Federal screening regulations found at 42 CFR § 455.412 require providers to maintain current licenses, without limitations, throughout the term of their agreement. A license update is required when the license on file is expiring soon. To remain actively enrolled, update the license information in the Provider Web Portal by clicking Provider Maintenance and following the steps under Provider Identification Changes. **A copy of the license showing the effective and end dates must be attached.**

For more information, visit the Provider Web Portal Quick Guide: Provider Maintenance – Update License web page.

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

Updating 1099 Address in Provider Web Portal

Effective October 28, 2020, the Provider Maintenance option in the Provider Web Portal has been updated to allow providers to add, view or modify the Internal Revenue Service (IRS) 1099 form mailing address linked to the associated tax ID. Previously, providers were unable to review or update the 1099 form mailing address.

A confirmation letter will be sent to all linked provider service locations stating an update was completed. The letter will contain:

- The provider service location ID
- The user information who completed the change
- The details of the address changes made (previous and new)

Note: If multiple provider IDs share the same tax ID, and one provider changes the tax ID 1099 address, that address will change for **all** providers with that tax ID.

Provider Maintenance: Addresses Panel

Visit the Provider Maintenance – Provider Web Portal Quick Guide web page to view Address Changes for instructions on how to update an address in the Provider Web Portal.

Upcoming Update to Increase Third-Party Liability (TPL) Records for Enhanced Cost Avoidance

In November 2020, a new cost avoidance system enhancement to increase the amount of TPL (commercial) policies attached to member records will be implemented in the Colorado interChange. Providers are reminded to check eligibility on the date of service to ensure they are aware of all coverage types. These additional TPL records are verified and updated on a weekly schedule. Providers are encouraged to remind Health First Colorado (Colorado's Medicaid Program) members that any commercial health coverage needs to be declared at the time of the visit.
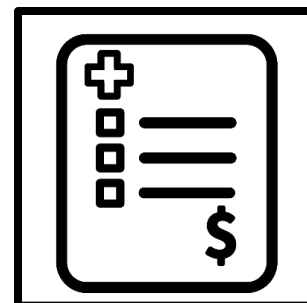
The TPL educational posters for waiting rooms mentioned in the May 2020 Provider Bulletin (B2000448) are still available to help providers and members. Contact Eujenia Renfroe at Eujenia.Renfroe@state.co.us to receive a printable copy.

Providers may update TPL on the Provider Web Portal when the health coverage is missing or recently ended. The Provider Web Portal allows providers to view third party information and Health First Colorado eligibility independent of the claims submission process. For more information, visit the Provider Web Portal Quick Guide: Adding and Updating Third-Party Liability (TPL) Information web page.

Contact the Provider Services Call Center with any questions regarding the enhancements.

Clinic, Practitioner and Outpatient Hospital Providers

Drug Acquisition Cost Survey – Physician-Administered Drugs (PADs) & Hospital Outpatient Services Drugs

Myers and Stauffer LC has been contracted by the Department of Health Care Policy & Financing (the Department) to conduct an acquisition cost survey and analysis of PADs and drugs administered or dispensed by hospitals for outpatient services. The analysis will include a review of the current reimbursement methodologies for PADs and hospital outpatient services drugs.

All clinic, practitioner and outpatient hospital providers are strongly encouraged to participate to help ensure the market conditions of providers' drug acquisition costs are reflected in the analysis. Providers will be able to submit invoices via email, mail or fax. All submitted invoice data will be kept confidential.

Survey requests were sent via postal mail on October 30, 2020. Contact the Myers and Stauffer Pharmacy Help Desk toll-free at 1-800- 591-1183 or pharmacy@mslc.com if a survey request was not received or for general questions about the survey.

Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs)

Telemedicine Policy for FQHCs and RHCs Extended Beyond COVID-19 State of Emergency for Appropriate Procedure Codes

The Colorado interChange is being updated to limit reimbursement for telemedicine visits for FQHCs and RHCs to the following procedure codes:

Telemedicine Visit Procedure Codes for FQHCs & RHCs				
76801	92524	97150	99201	H0004
76802	92526	97151	99202	H0006
76805	92606	97153	99203	H0025
76811	92609	97154	99204	H0031
76812	92610	97155	99205	H0032
76813	96101	97158	99211	H0049
76814	96102	97161	99212	H1005
76815	96110	97162	99213	H2000
76816	96111	97163	99214	H2011
76817	96112	97164	99215	H2015
90791	96113	97165	99401	H2016
90792	96116	97166	99402	Q3014
90832	96118	97167	99403	S9445
90833	96119	97168	99404	S9485
90834	96121	97530	99406	T1017
90836	96125	97532	99407	V5011
90837	96130	97533	99408	
90838	96131	97535	99409	
90839	96132	97537	99441	
90840	96133	97542	99442	
90846	96136	97755	99443	
90847	96137	97760	99451	
90849	96138	97761	G0108	
90853	96139	97763	G0109	
90863	96146	97802	G0515	
92507	97110	97803	G8431	
92508	97112	97804	G8510	
92521	97129	98966	G9006	
92522	97130	98967	H0001	
92523	97140	98968	H0002	

This update does not apply to encounters. Currently, telemedicine encounters will not be restricted to the listed procedure codes. FQHC and RHC providers are reminded UB-04 institutional claims submitted for these procedure codes must be billed with the GT modifier indicating the service(s) were provided through telemedicine.

For more information, visit the Telemedicine – Provider Information web page.

Home & Community-Based Services (HCBS) Home Care Agencies

Senate Bill (SB) 19-238 Reporting Timelines for Fiscal Year (FY) 2019-2020: Provider Web Portal Ready for Reporting

SB 19-238 requires the Department to implement an 8.1% increase in the reimbursement rate for certain HCBS benefits provided to individuals receiving Homemaker Basic, Homemaker Enhanced, Personal Care, and In-Home Support Services. The legislation requires that 100% of the increase for FY 2019-2020 be passed through to Direct Care Workers. Reporting for FY 2019-2020 will be done in the Provider Web Portal between November 1, 2020, and December 31, 2020.

Effective November 1, 2020, providers may begin reporting on the FY 2019-2020 information. Impacted providers will need to log in to the Provider Web Portal in order to submit their information. Once logged in, providers that are required to submit information will be able to access a "Senate Bill (SB) 19-238" link located under the "Provider Services" tab on the Provider Web Portal Home page. This link will only appear if an agency is required to comply based on their enrollment profile.

Part or all of the funding resulting from the increase in the reimbursement rate may be recouped if the reporting process for SB 19-238 is not completed. More information on the legislation can be viewed on the Colorado General Assembly website.

Chief Financial Officers of impacted providers will be contacted directly with additional, detailed instructions on how to submit information in the portal to comply with the legislation.

Contact the Provider Services Call Center for questions about the functionality of the Provider Web Portal. Contact the Department's Wage Passthrough email inbox at hcpf_wage_pass_through@state.co.us with questions about complying with the legislative mandate of SB 19-238 or information on what to provide in the report.
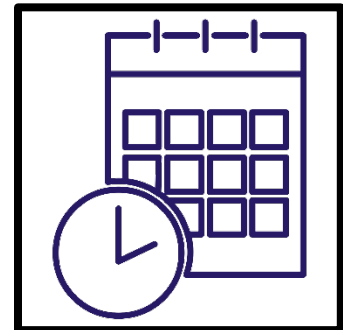
Hospice Providers

Hospice Rate Updates- Fiscal Year 2020-2021

Hospice rates have been finalized for October 1, 2020, through September 30, 2021. A 1% decrease was applied to revenue codes 650, 651, 652, 655 and 656. All rates have been loaded and reimbursement should reflect updated rates for all claims billed for dates of service on or after October 1, 2020.

Contact Victoria Martinez at Victoria.L.Martinez@hcpf.state.co.us for additional support or questions regarding rates. Contact Matt Colussi at Matthew.Colussi@state.co.us for additional support or questions regarding policy.

Hospital Providers

General Updates

Outpatient EAPG Hospital Providers

Colorado interChange Update - 3M™ Enhanced Ambulatory Patient Grouping (EAPG) - Claims Editing Solution

Effective October 1, 2020, the 3M™ EAPG solution within the Colorado interChange has been updated to increase the accuracy of outpatient hospital claims [Type of Bill (TOB) 13X] review and adjudication based on State and Federal policies. Previously, multiple EAPG return codes were mapped to a single edit and Explanation of Benefits (EOB) code. With the update, each EAPG return code was mapped to a single edit and EOB code.

Appendix R, available on the Billing Manuals web page, was updated with the new EAPG outpatient hospital claim EOB codes and descriptions.

Contact the Provider Services Call Center with any questions related to the outpatient hospital EAPG claims editing solution.

Inpatient All Patients Refined Diagnosis Related Groups (APR-DRG) Hospital Providers

Draft Inpatient Base Rate Methodology
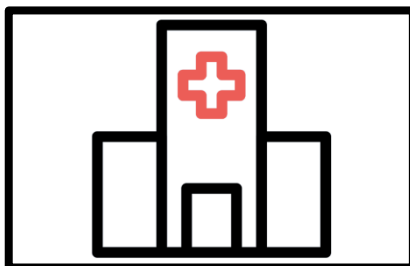
A new Inpatient Base Rate methodology is being created to replace the current methodology which relies heavily on Medicare Base Rates. The first version was presented during the September 2020 Hospital Stakeholder Engagement Meetings. A revised version will be presented during the upcoming November Hospital Stakeholder Engagement Meetings. See below for information on day and time of meetings.

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. Sign up to receive the Hospital Stakeholder Engagement Meeting newsletters.

- The next Rural Hospital Engagement meeting is scheduled for **Thursday, November 5, 2020 from 2:00 p.m. - 4:00 p.m. MT** and will be hosted virtually.
- The All-Hospital Engagement meeting is scheduled for **Friday, November 6, 2020 from 9:00 a.m. - 12:00 p.m. MT** and will be hosted virtually.

Visit the Hospital Engagement Meeting web page for more details, meeting schedules and past meeting materials. **Calendar Year 2020 meetings have been posted.**

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

Rural Health Clinic (RHC) Providers

Bi-Monthly Rural Health Clinic Stakeholder Engagement Meetings

The Department will continue to host bi-monthly Rural Health Clinic Engagement meetings to discuss current issues regarding payment reform and operational processing. The next meeting is scheduled for **Thursday, November 5, 2020 at 12:30 p.m. MT, and will be hosted virtually.** Visit the Rural Hospital and Rural Health Clinics web page for more details, meeting schedules and past meeting materials. **Calendar Year 2020 meetings have been posted.**

Contact Erin Johnson at ErinK.Johnson@state.co.us with any questions or topics to be discussed at future meetings. Advance notice will provide the Rates team time to bring additional Department personnel to the meetings to address different concerns.

Outpatient Hospital Therapy Services Billable Via Telemedicine

Hospital providers are reminded that the only telemedicine services outpatient hospitals are allowed to bill for are Physical Therapy (PT), Occupational Therapy (OT) and Speech Language Pathology (SLP).

Hospital providers are not an allowable provider type to bill procedure code Q3014 (telemedicine originating site facility fee). Allowable providers are listed in the Telemedicine Billing Manual.

Services which may be rendered via telemedicine are outlined in the Telemedicine Billing Manual and Telemedicine – Provider Information web page.

Contact Janna Leo at Janna.Leo@state.co.us with policy questions.
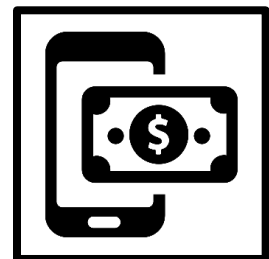
Managed Care Providers, Federally Qualified Health Centers (FQHC), Primary Care Medical Providers (PCMP)

Capitation Recoupments for Deceased Members

Federal and state law requires recovery of paid capitation and claim payments for deceased members. Effective October 2020, any capitations paid between the actual date of death (DOD) and when the date is updated in the Colorado Interchange will be recouped. Managed care plans will be notified in the X12N 834 file of members disenrolled with a reason of death.

Automated recoupments will be initiated one month following the posting of date of death in the Colorado interChange. For example, if a DOD of May 20, 2020, is received for a member on October 12, 2020, capitations will be recouped for June 2020 - October 2020 on October 15, 2020.

Providers participating in the Alternate Payment Methodology blended forms of capitation and fee-for-service will be included next year in this new recoupment process.

Contact the Health First Colorado contract manager for questions regarding this project.

Refer to the [Colorado interChange Health Plans System Meeting web page](#) for more information.

Non-Emergent Medical Transportation (NEMT) Providers

Final Reminder to Bill through Intelliride

NEMT providers must enroll and submit claims to the transportation vendor IntelliRide. Claims submitted directly to Colorado interChange will be denied. This information was originally published in the [July 2020 Provider Bulletin (B2000450)](#).

Contact Intelliride at 1-855-489-4999 for enrollment, scheduling trips or claims assistance.

Contact Ryan Dwyer at Ryan.Dwyer@state.co.us with questions related to policy.
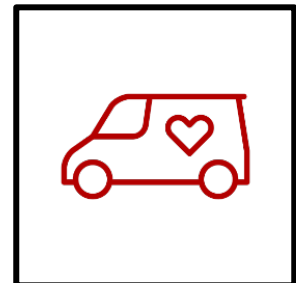
Obstetric Care Providers, Nurse Midwives, Clinics

Maternity Bundled Payment Program Goes Live

Obstetric care providers can participate in the Department's recently launched Maternity Bundled Payment Program. The bundled payment covers all prenatal care, care related to labor and delivery and postpartum care for the parent. The Department will offer upside-only during the pilot program's first year, which begins November 1, 2020. Participating obstetric care providers receive shared savings if an episode remains within the designated threshold and quality goals are met.

Refer to the Maternity Bundled Payment Program Specifications for more information. Contact Trevor Abeyta, program lead, at Trevor.Abeyta@state.co.us to participate.

Pharmacy Providers

Pharmaceutical Rate Methodology

Note: On October 1, 2020, a system issue was identified pertaining to the new pharmaceutical rate methodology where claims that should have paid at the brand National Average Drug Acquisition Cost (NADAC) rate incorrectly paid at the generic NADAC rate. This system issue had a minimal impact on pharmacy providers and was fixed on October 2, 2020. Magellan reprocessed affected claims for pharmacy providers on October 7, 2020, to reflect the correct brand NADAC rate payment amount.

The pharmaceutical rate methodology was updated on October 1, 2020, to include NADAC and Maximum Allowable Cost (MAC) rates. The new methodology is as follows:

- The allowed ingredient cost shall be the lesser of Average Acquisition Cost (AAC), NADAC, Usual and Customary Charge (U&C) or Submitted Ingredient Cost. If AAC and NADAC are not available, the allowed ingredient cost shall be the lesser of MAC, U&C or Submitted Ingredient Cost.
- Clotting factor drugs will be excluded from the above methodology and the allowed ingredient cost shall be the lesser of Submitted Ingredient Cost, U&C or Wholesale Acquisition Cost (WAC).

Visit the Provider Rates & Fee Schedules web page under the Pharmacy Rate List drop-down section for more information regarding AAC, NADAC and MAC rates.

Contact Kristina Gould at Kristina.Gould@state.co.us with any questions.

Pharmacist-Administered Adult Vaccines

Pharmacies submitting claims for vaccine administration are encouraged to review the Immunization Benefits Billing Manual for billing procedures. Pharmacies are reminded to ensure the following:

- The Ordering Provider (prescriber) is listed.
- The pharmacy National Provider Identifier (NPI) is listed as the Billing Provider.
- The pharmacist administering the immunization is listed as the Rendering Provider.

Bill with a place of service code of 01 if the vaccine is administered in the pharmacy. Bill the claim through the Provider Web Portal on the correct account (clinic contract, not supply contract). Refer to the Immunization Benefits Billing Manual for more information.

Total Annual Prescription Volume (TAPV) Survey

Myers and Stauffer LC completed the TAPV survey of pharmacy providers as of October 31, 2020. The prescription volume information submitted by most pharmacy types will be used to determine the dispensing fee tier for the 2021 calendar year. Pharmacies which meet the regulatory definition of a Government or Rural Pharmacy will have the dispensing fee determined by pharmacy type (per 10 CCR 2505-10, Sections 8.800.1 and 8.800.13).

Pharmacies that are not a Government or Rural Pharmacy, and did not submit a TAPV form to Myers and Stauffer LC, may contact the Pharmacy Section at hcpf_Colorado.SMAC@state.co.us with any questions regarding the survey.

Physician Services

Changes to Coding Guidelines for Evaluation and Management (E/M) Services

Effective January 1, 2021, Health First Colorado is aligning E/M coding with changes adopted by the Centers for Medicare & Medicaid Services (CMS) and the American Medical Association (AMA) Current Procedural Terminology (CPT) Editorial Panel for office/outpatient E/M visits. These updates will impact the fee-for-service benefits and benefits offered under a Managed Care Entity.

The guidelines retain five (5) levels of coding for established patients while reducing the number of levels to four (4) for office/outpatient E/M visits for new patients. The code definitions are revised.

The changes revise the times and medical decision-making process for all of the codes and require performance of history and exam only as medically appropriate.

The revised guidelines can be found on the AMA website.

Contact Dana Batey at Dana.Batey@state.co.us or Morgan Anderson at Morgan.Anderson@state.co.us with any questions.

Substance Use Disorder (SUD) Clinic Providers

Upcoming Provider Enrollment for SUD Benefit Expansion

Effective January 2021, residential and inpatient SUD services will be covered services for Health First Colorado members. Providers will need to contract with the Regional Accountable Entities (RAEs) and enroll with Health First Colorado to submit claims for these services. It is anticipated that on November 5, 2020, providers will be able to enroll under new specialty provider types associated with those services.

Reminders

- Providers must be enrolled as a Substance Use Disorder (SUD) - Clinic (provider type 64) and also enroll under a specialty provider type(s) associated with the American Society of Addiction Medicine (ASAM) level of care at which they are licensed by the Office of Behavioral Health. The specialty types by ASAM levels are as follows:

ASAM Level	Specialty Type
3.1	871
3.3	872
3.5	873
3.7	874
3.2WM	875
3.7WM	876

- Providers interested in offering residential and inpatient SUD services through Health First Colorado starting in January should contact the RAEs to begin the contracting and credentialing process now.
- Providers should reach out to the Managed Service Organizations (MSOs), as room and board will be paid through these entities.

Additional Resources

- A revision to the Uniform Service Coding Standards manual, located on the Behavioral Health Rate Reform web page, will include pages outlining the new SUD residential

and inpatient treatment and withdrawal management services that will be billable effective January 2021.

- Visit the Provider Maintenance – Provider Web Portal Quick Guide web page to view Adding a Specialty for instructions on how to add a specialty in the Provider Web Portal. Providers will need to attach a copy of their license and state the number of beds in their facility.
- Visit the Ensuring a Full Continuum SUD Benefits web page for up-to-date information about the benefit and sign up for updates on SUD benefits. A Frequently Asked Questions document can be found on that page.
- Refer to the September 2020 Provider Bulletin (B20000452) to read the SUD Benefit Expansion article.

Provider Billing Training Sessions

November and December 2020 Provider Billing and ClaimsXten™ 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.

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.

ClaimsXten™ Training Sessions

The ClaimsXten™ training sessions will be conducted by Gainwell Technologies during the month of November.

See the training session schedule below. Providers are encouraged to visit the Provider Training web page for the latest updates and information on the ClaimsXten™ training session schedule as dates and times are subject to change.

Note: Time has been allotted for questions at the end of each session.

November 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2 ClaimsXten™ Training 2:00 p.m.-3:00 p.m. MT	3	4	5	6	7
8	9	10	11 ClaimsXten™ Training 2:00 p.m.-3:00 p.m. MT **Veterans Day**	12 Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m. – 11:30 a.m. MT	13	14
15	16	17	18	19 Beginner Billing Training: Institutional Claims (UB-04) 9:00 a.m. – 11:30 a.m. MT	20	21
22	23	24 ClaimsXten™ Training 2:00 p.m.-3:00 p.m. MT	25	26 **Thanksgiving Day**	27	28
29	30					

December 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10 Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m. – 11:30 a.m. MT	11	12
13	14	15	16	17 Beginner Billing Training: Institutional Claims (UB-04) 9:00 a.m. – 11:30 a.m. MT	18	19
20	21	22	23	24 **Christmas Eve**	25 **Christmas Day**	26
27	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 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
Veterans Day **Wednesday, November 11**	State Offices 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. DentaQuest and Gainwell Technologies will be open.
Thanksgiving **Thursday, November 26**	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.
Black Friday **Friday, November 27**	State Offices and the ColoradoPAR Program will be closed. The Member Contact Center will remain open. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks. DentaQuest and Gainwell Technologies and will be open.
Christmas Eve **Thursday, December 24**	State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be open.
Christmas Day **Friday, December 25**	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.