RAC Program Stakeholder Engagement Meeting

Colorado Department of Health Care Policy & Financing
August 29, 2024

Panelists

Bart H. Armstrong, Esq. – HCPF

Fraud, Waste, and Abuse Division Director

Alyssa M. Gilger, CSSBB – HCPF

Recovery Audit Contract Program Section Manager

Meghan Morhauser, MBA – HCPF

Recovery Audit Contract External Communications Liaison

Tara Wingo, PMP – HMS

HMS Colorado RAC Program Director

Chantal Kalisch – HMS

HMSColorado RAC Senior Program Manager (HMS)

Agenda

- RAC Provider Advisory Board Recap

- RAC Inpatient Audit Updates & Rebilling

- Website Updates & Communications

- Upcoming Training Opportunities

- Q & A

RAC Provider Advisory Board

RAC Provider Advisory Board Meeting

What we covered:

- OSA Audit Overview

- OSA Audit Findings

- Board Questions and Responses

   o Recording of the meeting located on the RAC website

   o Follow ups from the meetings are being published

To review the agendas for the RAC Provider Advisory Board meeting visit the HCPF RAC Website

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OSA Evaluation of the RAC Program Background

- Large evaluation of the RAC program that was done in a short time

- Took place during SFY 23-24, but covered information about the program from 2011-2023

- The year prior to the evaluation, the house bill HB 23-1295, was enacted and many areas with findings had program updates already happening from the house bill requirements, thus those changes are not reflected in the evaluation report. This includes findings related to:

  - Gaps in communications
  - Transparency
  - Public facing reporting
  - More provider training

- From 2016-2021, there was 1 full time employee running the program at HCPF

  - Regardless of our lean team, we maintain quality performance and operations, such as the stakeholder meetings, communications and the advisory board, while also implementing the evaluation recommendations and the HB 23-1295 requirements

OSA Evaluation Finding 1: Audit Projects

OSA Recommendations:

- Define who should review and approve any new audit projects

- Identify the roles and responsibilities of those involved in the process

- Establish a process for distributing information

- Establish a process to hold a contractor accountable

What HCPF Committed to Do:

- All of the recommendations are being put into updated policies and procedures

- The requirements are due 12/30/2024

OSA Evaluation Finding 2: Contract Amendments

OSA Recommendations:

- Review and amend the RAC contract to update sections related to formal appeal settlements and payments to the contractor

What HCPF Committed to Do:

- Contract amendment was signed on 08/12/2024

- Amendment and option letter was published on the RAC website as of 08/28/24

OSA Evaluation Finding 3: Contract Transmittals

OSA Recommendations:

- Create policies and procedures about the use of contract transmittals

What HCPF Committed to Do:

- Write policies and procedures regarding the use of contract transmittals

- Due 08/31/2024

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OSA Evaluation Finding 4: Reviewer Credentials

OSA Recommendations:

- Update policies and procedures about the reporting related to reviewing RAC contractor clinical staff credentials

- Update monthly reporting to review current reviewer staff and roles

What HCPF Committed to Do:

- Updating reporting, policies and procedures related to this finding

- Publishing the annual URAC certification on the HCPF RAC website

- Due 09/30/2024

OSA Evaluation Finding 5: Vendor Relationships

OSA Recommendations:

- Clarify HCPF policies and procedures for verification of relationships between vendors

- Clarification to providers about roles of vendors and ensure branding is consistent

What HCPF Committed to Do:

- Updating policies and procedures related to this finding, due 12/31/2024

- Publishing external communication about HMS' role, due 10/31/2024

OSA Evaluation Finding 6: Claims Limits

OSA Recommendations:

- Clarify claims limits and publish information related to this finding

What HCPF Committed to Do:

- This recommendation has been completed and was posted to the HCPF RAC website as of 06/28/24

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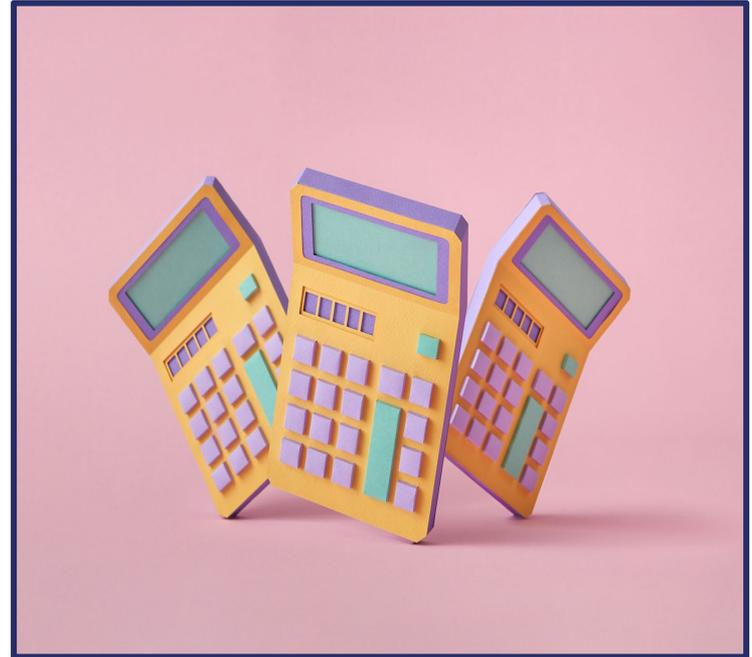
OSA Evaluation Finding 7: Provider Support

OSA Recommendations:

- Updated reporting, policies and procedures for HCPF & HMS items including:
  - Communication logs and response times
  - Publishing end of audit reports and provider education
  - Update monthly reporting

What HCPF Committed to Do:

- All of the recommendations are being put into updated policies, reporting and procedures

- The requirements are due between 08/30/24 - 06/30/25
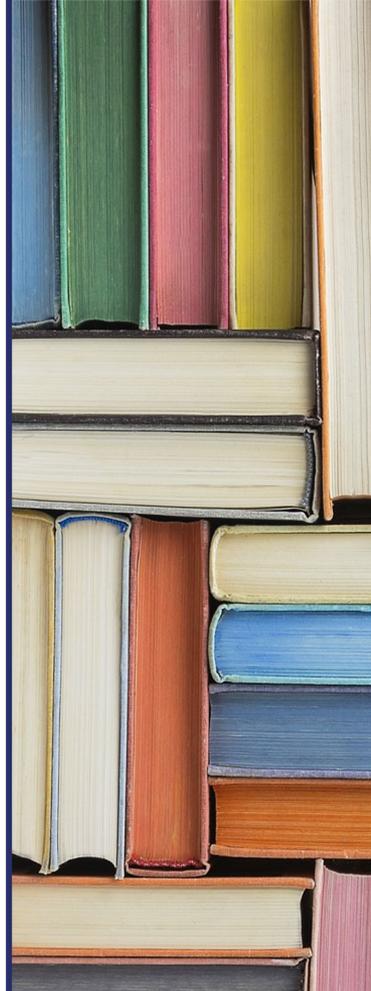
Last RAC Provider Advisory Board Meeting in 2024

Quarter 4

Thursday, December 12, 2024 8am

- Register here in advance

All Board meetings are open to the public for viewing. Registration links can also be located on the HCPF RAC webpage

Any changes to times, dates, or website information will be communicated via email communications, provider bulletins & through associations

Inpatient Audit Updates & Rebilling

RAC Inpatient Audit Claims Re-billing Updates

- Inpatient audits were halted for audit findings related to inpatient vs. outpatient earlier this year
- Communications were sent out to give information related to re-starting the audits
  - RAC-0005 RAC Inpatient Audit Updates, June 2024
  - RAC-0006 RAC Inpatient Audit Updates, July 2024
  - RAC-0007 RAC Inpatient Audit Updates, August 2024

- With the ability to re-bill inpatient claims as outpatient now programmed in the claims system we have resumed these audits
- We will be reviewing the training next
- We will also publish training and any manuals or recordings to support providers

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HMS Rebilling Process

Recovery Audit Rebilling Process

Purpose

1 **Understanding what is a rebill**

Understand the difference between an adjustment and a rebill.

2 **How to rebill**

Provide an overview of the rebill process.

3 **Resolution**

Ensure your questions and concerns are addressed, and you have contact information for questions and support.

Inpatient Repricing Limitations

For medical claims identified as an overpayment in this audit there is no way to determine the outpatient reimbursement of claims billed as inpatient initially, thus re-pricing is not an option. This is because the claims system reimburses inpatient on a prospective basis using All Patient Refined Diagnosis Related Groups (APR-DRG) methodology. By contrast, outpatient services are reimbursed using the Enhanced Ambulatory Patient Grouping (EAPG) methodology. Calculating outpatient reimbursement is highly discretionary because providers can choose to bill for different procedures, CPT codes and ICD's. As a result, it is unknown exactly what outpatient services a provider would have chosen when billing an outpatient claim.

The only way to accurately determine what a provider would have billed and what their reimbursement would have been is to have the provider bill the services identified in the LOC(level of care) audit under the EAPG methodology through the claims system. This is the most accurate way for providers to get correct payment for services provided to Health First Colorado members.

Accordingly, HCPF is implementing the following changes to ensure that providers who receive an overpayment demand for claims identified through a LOC audit can receive the corrected value of those claims for any allowable services provided to Health First Colorado clients as if they were provided in the correct setting, such as observation or other outpatient setting.

This is not an adjustment

- Adjustments can be made on inpatient claim to inpatient claim when making corrections to diagnosis codes or services provided. When doing a claim adjustment, an inpatient claim cannot be changed to an outpatient claim. The inpatient claim must be voided prior to the rebilling of an outpatient claim.
- Adjustment claims that result in a refund back to the Department are not subject to timely filing edits. However, if an adjustment creates an increase to the providers payment and it is processed outside of timely filing requirements the claim would be subject to timely filing edits.
- For the above reasons, a rebill cannot be processed as a claim adjustment. The original claim must be voided, and a new claim submitted.

Rebilling Process

1. The provider must notify HMS they want to rebill within 30 days of receiving an overpayment audit finding letter.
2. Providers must indicate which claims they will be rebilling through the HMS Colorado RAC Provider Portal.
3. Rebilled claims must be submitted within 60 days of provider notifying HMS they would like to rebill.
4. HCPF's claims processing system, the Medicaid Management Information System (MMIS) interChange, will process the void of the claim which will be initiated by the request to rebill a claim from a provider.
5. Providers will have to look up the voided ICN using a remittance advice (RA) in order to rebill the new outpatient claim.
6. Providers must submit a clean outpatient claim within 60 days from the void in order to be paid for the new outpatient claim.

Access Provider Portal to Indicate Rebilling

- Click Claims

- Utilize the Search bar to search for Claims utilizing one of the following:

  - Claim Number, Patient Name, Provider Name / NPI or Case ID / Client Case Number

- Click on Claim No. to open specific claim

Access Provider Portal to Indicate Rebilling

- Utilize the "Intent to Rebill" toggle button to initiate the void of the inpatient claim.
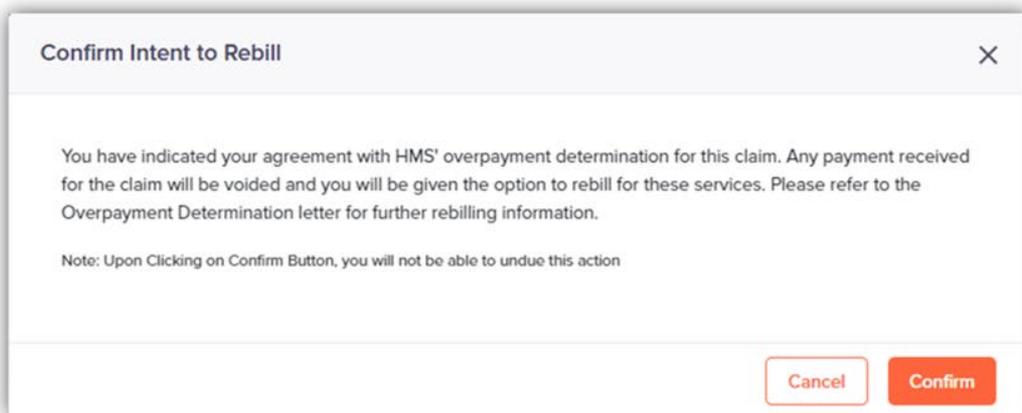
Intent to Rebill Information Icon

Hover over information icon to display information about the "Intent to Rebill" toggle button
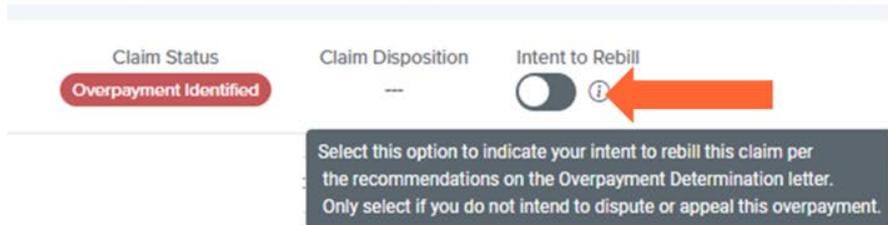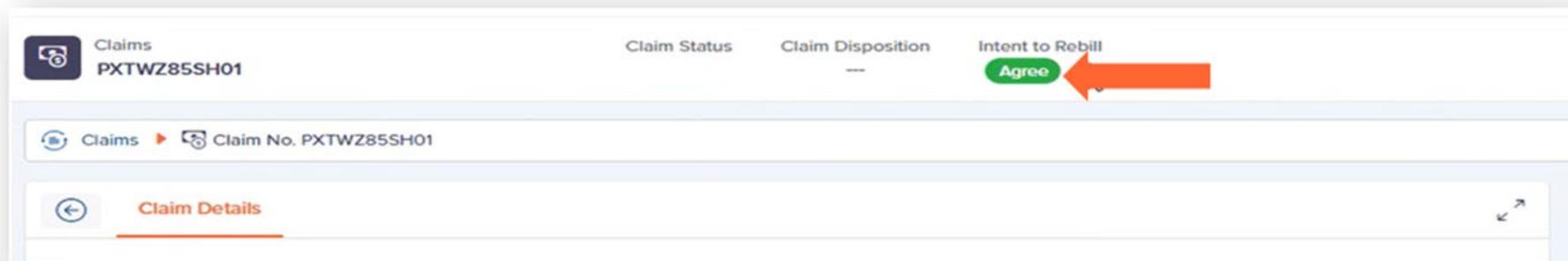

Confirm rebilling

After clicking the "Intent to Rebill" toggle button, a message confirming that you would like to rebill will pop up.

Once "Confirm" is selected, this will trigger the electronic void of the inpatient claim.
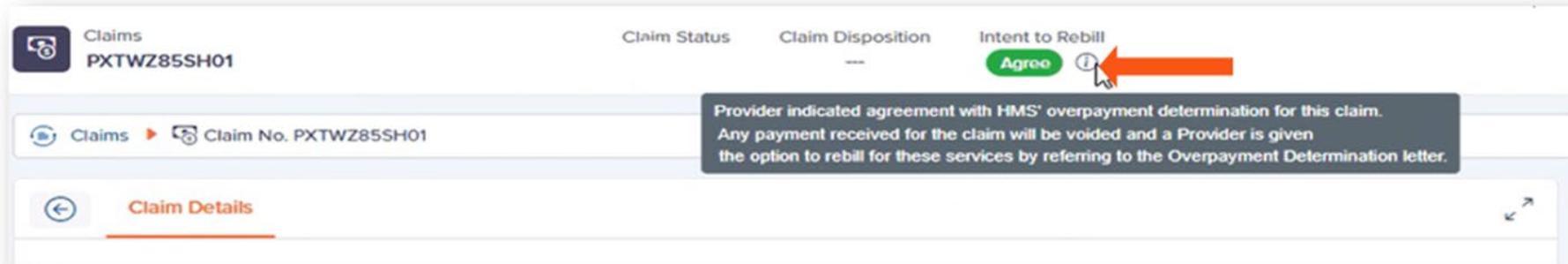
Submit Rebill Request to HMS

Once rebilling is initiated, the toggle button will disappear and Intent to Rebill will now display "Agree".

The information message will also change, indicating that the claim is being voided and the Provider is now given the option to rebill.

Obtain the voided ICN

- View your weekly remittance advice (RA), 835 or proprietary software

- The voided ICN will start with 56 (region code)

- The claims system "MMIS" maintains a link between the paid and voided claim

- **The voided ICN is REQUIRED for the rebill**

Reference Health First Colorado Beginner Billing Training: Institutional Claims (UB-04)

- For more information about ICN makeups, region codes, and how to pull your remittance advice- See the pages titled remittance in the training

Submit a clean outpatient claim

- You will need to submit an outpatient claim consistent with any other outpatient claim that is billed in accordance with the services rendered to the Health First Colorado member and with the medical records that substantiate those services

- You may submit a rebill Electronically through the Fiscal Agent's (Gainwell Technologies) Provider Web Portal (free of charge). This is the claims system used for all provider billing which is called "interChange".

  - The claims system is web based and is interactive and using this method a provider will receive an immediate response with claim the claim' status

- You can also electronically use a batch vendor, clearinghouse or software to rebill

YOU MUST INCLUDE THE VOIDED ICN IN BOX 64A OF UB04 FORM, OR CORRESPONDING ELECTRONIC BOX

- On the claims system "interChange" portal the corresponding field is entitled "Previous Claim ICN"

- For any other electronic submission through another vendor/software, please contact the vendor for questions regarding the mapping for box 64A

Enter the voided ICN into the Previous Claim ICN field. (Not the original ICN)

What Happens After a Rebill is Submitted?

- Once you resubmit the claim through the MMIS, this will be processed through MMIS, not HMS.

- For any questions regarding the claim processing of the rebilled claim please contact the MMIS Provider Services team at 1-844-235-2387.

- The status of the rebilled claim can be monitored through your normal claims processing procedures, and payment will be made in the same standard process that you have set up within the claims system.
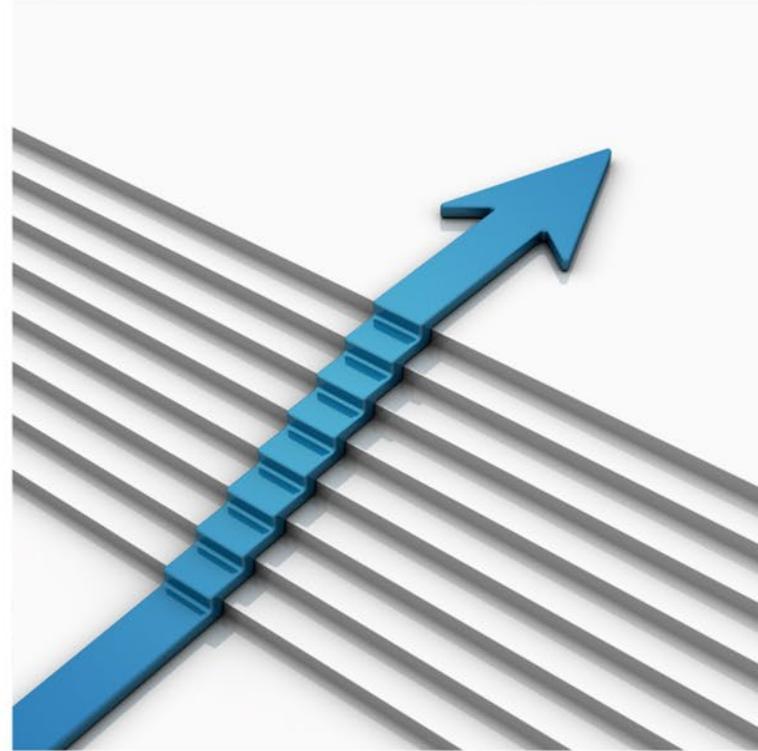
What if I don't choose to rebill a claim?

- Providers have the choice to rebill when they receive their initial notice (letter) with an overpayment determination resulting from a RAC inpatient audit

- If a provider decides to rebill some claims before an informal reconsideration, but also would like to submit other claims for the informal reconsideration they are allowed to choose which claims from the same case/letter that they want to route to each phase of an audit.

- Any claims that are rebilled are no longer an overpayment and cannot be in an informal reconsideration request or a formal appeal.

- Once a claim is in formal appeal it will go through the legal appeal process and cannot be rebilled since the formal appeal is being reviewed by the court.

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For additional information regarding Rebilling reference:

- Beginning Billing Workshop (colorado.gov)
- General Provider Information Manual | Colorado Department of Health Care Policy & Financing
- Provider Web Portal Quick Guide: Submitting an Institutional Claim | Colorado Department of Health Care Policy & Financing
- HMS CO RAC Website
- HCPF General Document (colorado.gov)

Moving healthcare forward.

Thank you for attending and we look forward to working together.

hms.com

Website Updates & New Resources

RAC Upcoming Communications Changes

- The HCPF RAC email will be converting to a request form

- This will feed into a ticket system to track external requests & communication

- This will allow for:

  - More swift communications

  - Transparency of when follow-ups occurred

  - Reporting and metrics to give expectations of response times

  - Many requests have nothing to do with RAC

    - We will be able to route those requests more efficiently

RAC Communications Process

In order to prepare for the change-over HCPF will be:

- Sending out quick guides & training materials

- Communicating via:

  - The RAC provider advisory board
  - Email blasts
  - Published materials on the HCPF RAC website
  - Stakeholder engagement
  - Through associations

This change will be over the course of the next 3-6 months
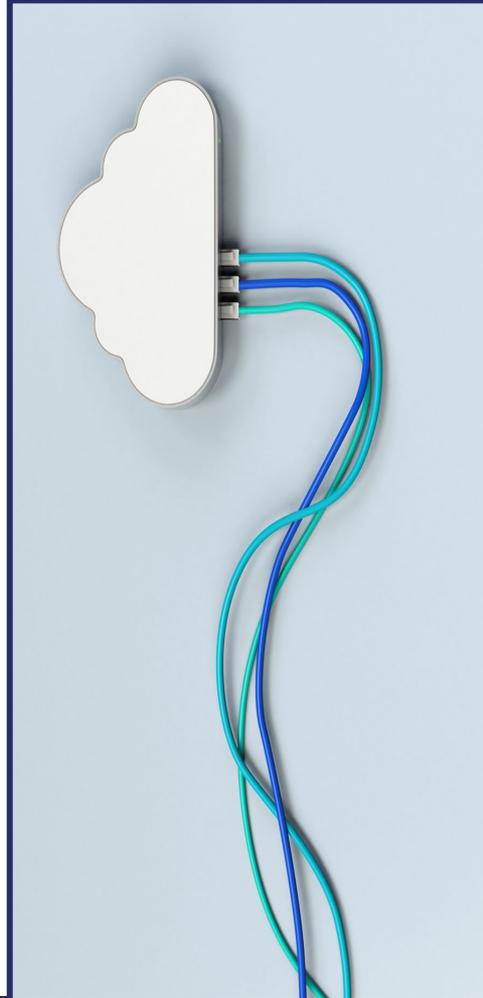
RAC Provider Portal Resources & Updates

Providers can get much more information and resources from this portal & training for the HMS RAC Portal is already published. HCPF will work on creating quick guides for routine requests from providers. In the portal you can:

- Access all Providers in your network

- Review all letters

- Find specific letters and claims quickly utilizing the search functions

- Filter out all letters that need medical records without having to sort through paper copies

- Attach medical records and documentation immediately to claims

- Track the status of claims in a RAC audit

- Communicate with HMS RAC provider services

- Update your mailing address and contact information

- Access reports that export to excel to make them easier to filter and sort

- View reporting through the new Provider Scorecards

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RAC Webpage Changes: Organization

We have completed HCPF RAC webpage updates to clean up and organize information based on stakeholder feedback

The main webpage now has links to separate HCPF web pages related to:

- The RAC Provider Advisory Board
- The RAC Stakeholder Engagement Information

Click on the new green buttons to toggle between pages

RAC Webpage Changes: Contact

We have moved information related to contacts to the upper part of the website to help providers easily locate this information

HMS Contacts

HMS Colorado RAC Provider Services Team
Call (877) 640-3419, available M-F 8:00 a.m. to 5 p.m. (MST) for requests related to:

- Exit Conference Requests
- HMS Colorado RAC Provider Portal Questions
- Address Updates in the HMS RAC Provider Portal
- Claim/Review Status (Audit) Questions

Email CORAC@HMS.com for requests related to:

- Providing a Password for a CD or DVD
- HMS Escalations

Medical Records Submission	Informal Reconsideration Request Submission
HMS - Colorado Recovery Audit Services 5615 High Point Drive Mail Stop 200-CO Irving, TX 75038	HMS - Colorado Recovery Audit Services Informal Reconsideration Request 5615 High Point Drive< Stop 200-CO Irving, TX 75038

For questions about HMS letters regarding commercial or other coverage, call HMS Third-Party-Liability (TPL) Provider Relations at 1-877-262-7396.

RAC Team Contact Information

Email hcpf_corachcpf@state.co.us for requests related to:

- Payment Plans
- Offset Requests
- Financial Questions

Emails for specific requests will be updated in the next 3-6 months with an email blast sent. The website will be updated once the information is received.

Use the Questions, Comments & Suggestions Form if you:

- Have feedback, complaints or suggestions regarding the RAC program
- Have provider training or provider education requests or suggestions
- Want to submit a test case for HCPF and HMS to review
- Have areas of Medicaid you believe the RAC should focus on
- Want to submit agenda items for the next stakeholder meeting
- Want to submit agenda items for consideration of the RAC provider advisory board
- Want to communicate anything related to the RAC program to HCPF

RAC Webpage Changes: Memos & Emails

We have consolidated the communications into one area and re-named links to more easily identify the content of the communication

RAC Audit Updates & Program Communications

2023

- RAC-0001 RAC Inpatient/Outpatient Rebilling Updates, September 2023
- RAC-0002 Office of the State Auditor's Provider Survey, October 2023

2024

- RAC-0003 Automated Audit Updates, May 2024
- RAC-0004 Claims Limits & Provider Tiers, June 2024
- RAC-0005 RAC Inpatient Audit Updates, June 2024
- RAC-0006 RAC Inpatient Audit Updates, July 2024
- RAC-0007 RAC Inpatient Audit Updates, August 2024

To receive RAC communications via email, please refer to the Colorado RAC Stakeholder Contact List Request Form.

RAC Webpage Changes: Reports & Contracts

We published the RAC contract in June of 2023, however, we have added more information related to the HB 23-1295 bill, the OSA evaluation, recordings and legislative publications

Colorado RAC & Medicaid Resources

Legislative Bills, Reports & Audits

- Colorado House Bill HB23-1295
- OSA Evaluation of the RAC Program Report & Agency Responses
- Legislative Audit Committee Hearing Recording (June 2024)

State Plan Amendments

RAC State Plan Amendment (SPA), CO16-0003

RAC Contract

- RAC Contract & Statement of Work, C22-169632
- RAC Contract Amendment & Option Letter, 2024

RAC Webpage Changes: Rules & Reporting

We have published links to the Medicaid program rules for colorado, federal regulations and quarterly reporting in the last year

Colorado Medicaid Program Rules

- Medicaid Program Rules, Program Integrity (10 CCR 2505-10 8.000)
- Medicaid Program Rules (Volume 8)
- Colorado Revised Statutes (CRS) 25.5 Health Care Policy and Financing

Federal Regulations

- Code of Federal Regulations, 42 CFR Chapter IV Subchapter C, Medical Assistance Programs (State Medicaid Rules)
- Code of Federal Regulations, 42 CFR Part 455, Program Integrity: Medicaid
- Code of Federal Regulations, 42 CFR Part 455, Subchapter F, Medicaid RAC Rules
- RAC Final Rules, 76 FR 57807eg

RAC Quarterly Reporting

June 2024 Quarterly Report

RAC Webpage Changes: Memos & Emails

We have added links to HCPF reports, national scorecards from the Centers for Medicare and Medicaid Services (CMS) and from the Government Accountability Office (GAO) and will continue to add resources

HCPF Reports

Health Care Policy & Financing Cost-Shift Analysis Reporting

Medicaid.gov Reports

- Medicaid & CHIP National Scorecards
- Medicaid State Profiles

Government Accountability Office Reports

Recovery Audit Contractor Program, June 28th, 2023

RAC Webpage Changes: Memos & Emails

We have added a whole section dedicated to the Office of the State Auditors (OSA) evaluation of the RAC Program and anyone can review progress and due dates

Office of the State Auditor RAC Evaluation Updates

- Finding 1: Audit Projects, Due December 2024
- Finding 2: Contract Amendment, Completed August 12, 2024
- Finding 3: Contract Transmittals, Due August 2024
- Finding 4: URAC and Credentials Reporting, Due September 2024
- Finding 5: Mergers & Acquisitions
  - 5.1: Policies and Procedures, Due December 2024
  - 5.2: Communication to Providers, Due October 2024
- Finding 6: Claims limits and Tiers, Completed June 28th, 2024
- Finding 7: Provider Outreach, Support and Education
  - 7.1: RAC Vendor Updates of Provider Communication Timeline Reporting, Due December 2024
  - 7.2: RAC Vendor Updates to Reporting of Communications Logs, Due August 2024
  - 7.3: Updates to Communications Plan and End of Audit Reporting, Due December 2024
  - 7.4: Updates to Reporting Related to Educational Activities, Due December 2024
  - 7.5: HCPF Updates to Tracking Provider Communications, Due June 2025

RAC Webpage Changes: National RAC Information and Provider Resources

National RAC State Program Links and Resources

HCPF has partnered with other states to create a National Medicaid RAC quarterly Meeting starting in November 2023. We will be updati

Online Provider Training and Resources

HMS Training Resources	Department Training Resources
• HMS Provider Portal Training Video • HMS Colorado RAC FAQ • HMS RAC 101 Provider Training Slide Deck • HMS Colorado Medicaid RAC website • Provider Scorecard Training Guide	Department Billing Training Calendar

HMS Colorado RAC Training Dates and Registration Links

• CO RAC 101 Complex Training
  ○ 10/15/2024 10am-11am MST Registration Link
  ○ 12/10/2024 2:30pm-3:30pm MST Registration Link
• CO RAC 101 Automated Training
  ○ 9/10/2024 2pm-3pm MST Registration Link
  ○ 11/19/2024 11am-12pm MST Registration Link

- We will be adding more content about the National RAC Program as we start to create reporting surrounding national program rules and trends with our state partners

- We will continue to add and update Provider training and resources as they become available

- Use the Questions, Comments & Suggestions Form if you want to submit ideas, updates or have suggestions about the content available on the HCPF RAC webpage

Colorado RAC Website: Resources

HMS and HCPF have been working together to link information across both websites, however, most information has been available for years on the HMS Colorado RAC website

HMS has links to the HMS RAC provider portal, training guide, and the NEW portal scorecard training

Resources & Informational Documentation

Inpatient Claims Tiers and Limits

Hospice Tiers and Limits

Physician Administered Drugs Tiers and Limits

Current Automated

New HMS Branding Coming Soon

Resources

- HCPF Website
- HMS Provider Portal
- HMS Provider Portal Training Guide
- HMS Provider Scorecard Training Guide

Colorado RAC Website: Webinars and Training

HMS has published slide decks for their training for Hospice audits, automated audits, as well as complex audits under their resources tab on the HMS Colorado RAC website

- CO RAC HMS Audit Process
  - Clinical Retrospective Review Process, Hospice (PowerPoint)
    - Clinical Retrospective Review Process, Hospice (Webinar)

- CO RAC Automated Audit Process
  - RAC Automated Process (PowerPoint)

- CO RAC Complex Audit Process
  - RAC Complex Process (PowerPoint)

Colorado RAC Website: Training & FAQs

Upcoming Training

CO RAC 101 Complex Training

- 8/14/2024 1pm-2pm MST
  Registration Link
- 10/15/2024 10am-11am MST
  Registration Link
- 12/10/2024 2:30pm-3:30pm MST
  Registration Link

CO RAC 101 Automated Training

- 9/10/2024 2pm-3pm MST
  Registration Link
- 11/19/2024 11am-12pm MST
  Registration Link

HMS has published provider portal links to help new users, has provided the Colorado RAC FAQs & publishes all training links and registration materials

- HMS Provider Portal—New Users Click Here
- Colorado RAC FAQs

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Colorado RAC Website: Limits & Audits

HMS has published all of the tiers and claims limits for providers, including previous limits and provided instructions and expectations for exit conferences, submitting medical records and informal reconsideration processes

Inpatient Claims Tiers and Limits

Hospice Tiers and Limits

Physician Administered Drugs Tiers and Limits

Current Automated

Previous Limits

Exit Conference Process (Optional for Providers)

Medical Record Submission

Informal Reconsideration Process

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Colorado RAC Website: Current Audits

HMS has published all current audits we cycle through and that are approved with the summary of the audit and a summary of the basis of an overpayment finding for both complex and automated audits

Scenario Name	Description
Automated review of inappropriate use of modifier 57	An audit of a facility's medical claims containing Evaluation and Management (E&M) services rendered to clients during a global surgical period for a minor procedure. Under the Health First Colorado fee schedules and the National Correct Coding Initiative (NCCI), surgical procedures are considered minor if no preoperative period is required, and the postoperative period is no more than 10 days. In addition, E&M services that are related to the minor surgical procedure are already included in the surgical package and should not be separately billed to the Health First Colorado program.
Automated review of incorrect billing of patient demographic information	An audit of Health First Colorado claims that were billed for services rendered to patients and contained American Medical Association (AMA) Current Procedural Terminology (CPT) codes that are specific to a patient's age and/or gender. Per AMA CPT guidelines, providers are required to use codes that assign an age range and/or gender when using specific medical service codes. HMS found that facilities incorrectly billed CPT codes that did not match the patient's age and/or gender based on data maintained by the Health First Colorado program, and therefore, was paid for services that were not accurately reported.
Automated review of durable medical equipment (DME) rentals in excess of purchase price	An audit of Professional DME Provider claims to determine whether durable medical equipment (DME) rented to Health First Colorado clients were billed properly and did not exceed the purchase price of the DME. Health First Colorado rules limit DME rental claims from exceeding the purchase price of certain DME equipment.
Automated review of Evaluation and Management code billed within the global post-operative days (0, 10, or 90) of a surgical code without a modifier 24, 25 or 57 being appended to the E&M code.	An audit of a facility's medical claims containing Current Procedural Terminology (CPT) Evaluation and Management (E&M) services rendered to Health First Colorado clients during a global post-operative (post op) period for a medical or surgical procedure. Post op periods are indicators of how long the recovery for surgeries will be—either a 0-10-day post op period for a minor procedure or a 90-day post op period for a major procedure.

Sidebar navigation:
- Overview
- Resources & Informational Documentation
- Inpatient Claims Tiers and Limits
- Hospice Tiers and Limits
- Physician Administered Drugs Tiers and Limits
- Current Automated
- Previous Limits
- Exit Conference Process (Optional for Providers)
- Medical Record Submission
- Automated Scenarios
- Complex Scenarios
- Informal Reconsideration Process

New HMS Branding Coming Soon

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Colorado RAC Website Resources

HMS has mirrored our quarterly reporting as well as all contact information, should providers use this website in lieu of the HCPF RAC website

New HMS Branding Coming Soon

Contact Information

- HMS Provider Services (available M-F 8:00 a.m. to 5 p.m. Mountain Time): (877) 640-3419.
- Colorado RAC Provider Email

Inquiry Type	Appropriate Contact	Contact Information
Exit Conference Request	HMS Provider Services	1-877-640-3419
Questions about HMS Provider Portal	HMS Provider Services	1-877-640-3419
Rebilling Help	Gainwell Provider Services	1-844-235-2387
Address updates in HMS Provider Portal	HMS Provider Services	1-877-640-3419
Claim/Review Status Questions	HMS Provider Services	1-877-640-3419
Providing a Password for a CD or DVD	HMS Provider Services	CORAC@hms.com
HMS Escalations	HMS RAC Account Management	CORAC@hms.com
Medical Records Address	Mailed to HMS	HMS – Colorado Recovery Audit Services 5615 High Point Drive Mail Stop 200-CO Irving, TX 75038
Informal Reconsideration Request	Mailed to HMS	HMS – Colorado Recovery Audit Services Informal Reconsideration Request 5615 High Point Drive Stop 200-CO Irving, TX 75038
Medical Record Extension Requests	Mailed to HMS	HMS – Colorado Recovery Audit Services Medical records Extension Request 5615 High Point Drive Stop 200-CO Irving, TX 75038
For questions about HMS letters regarding commercial or other coverage	TPL Provider Relations	1-877-262-7396

Website navigation (left panel): Overview; Resources & Informational Documentation; Inpatient Claims Tiers and Limits; Hospice Tiers and Limits; Physician Administered Drugs Tiers and Limits; Current Automated; Previous Limits; Exit Conference Process (Optional for Providers); Medical Record Submission; Automated Scenarios; Complex Scenarios; Informal Reconsideration Process; Quarterly Reports; Contact Information

Provider Training Opportunities

Colorado Provider Training Opportunities

hms® Colorado RAC Training:

Complex Colorado RAC Audit Training

Tuesday, October 15, 2024 10am-11am MST
Tuesday, December 10, 2024 2:30pm-3:30pm MST

Automated Colorado RAC Audit Training

Tuesday, September 10, 2024 2pm-3pm MST

Tuesday, November 19, 2024 11am-12pm MST

   HMS RAC trainings are scheduled monthly and always available online at your convenience on the HMS Colorado RAC Website

Provider Billing Training:

Beginner Billing: Institutional Claims
Thursday, September 5, 2024 9:00am-11:00am MST

Beginner Billing: Professional Claims
Thursday, September 12, 2024 9:00am-11:30am MST

   Provider Billing Training is scheduled monthly and registration and information can be found on the HCPF Provider Resources webpage

Provider Resources

Medicaid claims billing training:

- [HCPF claims billing training](#)
- [Provider quick guides](#)

Claims denials, client eligibility, provider enrollment and billing questions:

- Gainwell Provider Services (Not HMS): 1-844-235-2387 (M-F 7:00 a.m. - 5:00 p.m.)

Policy and Benefits Clarifications:

- [Provider Billing Manuals](#)
- [Provider Bulletins](#)
    - ➤ Policy/Program Staff are listed in the billing manuals and bulletins (online)

Help from [HCPF Provider Field Representatives](#):

- Technical assistance for the Provider Web Portal
- Provider enrollment
- Billing and claims
- Electronic Data Interchange
- Understanding and reconciling the remittance advice

Upcoming Colorado RAC Stakeholder Meetings

RAC Stakeholder Meetings

- Wednesday, November 13, 2024 12pm-1pm MST

- Wednesday, February 12, 2025 12pm-1pm MST

- Wednesday, May 14, 2025 12pm-1pm MST

- Wednesday, August 13, 2025 12pm-1pm MST

Q & A