

Independent Provider Network Collaborative

June 6, 2025

Presented by: Amy Austin



COLORADO
Department of Health Care
Policy & Financing

Agenda

- Communications Update
- Policy Update
- Billing and Coding Update
- ACC Phase III Update
- Legislative Update
- Q&A

**Reminder: Please share questions/comments in chat function*

Communications Update

- Visit the Behavioral Health webpage:
<https://hcpf.colorado.gov/behavioral-health>
- Sign up for Office Hours & Forums via the calendar on the landing page
□ *Note: Monthly IPN Office Hours*
- Sign up for the [Health First Colorado Behavioral Health Updates](#) newsletter
- Sign up for [Provider Bulletins](#)

The screenshot shows the Colorado Department of Health Care Policy & Financing (HCPF) website. The header includes the HCPF logo, the text "COLORADO Department of Health Care Policy & Financing", a search bar, and a navigation menu with links: Home, For Our Members, For Our Providers, For Our Stakeholders, and About Us. Below the header, a breadcrumb trail reads "Home > For Our Stakeholders > Behavioral Health". The main heading is "Behavioral Health". On the left, there are two link lists: "HCPF Links" (including 1115 Waiver, ACC Phase III, Becoming a Medicaid Behavioral Health Provider, Billing, Calendar, CCBHC, Crisis Services, Email Us, BH Policies, Resources, SUD Continuum, Transportation, and Youth) and "Partner Links" (including BHA and 988/Crisis Line). The main content area features a section titled "Behavioral Health Continuum of Care" with a paragraph explaining its importance. Below this is a section titled "About BHIC" with a paragraph describing its role. At the bottom, there is a grid of six colored boxes representing different services: Safety Net and Crisis Services, Residential and Inpatient Services, Population-based Services, Integrated Care, Outpatient Services, and Community Based Services.

Behavioral Health

HCPF Links

- [1115 Waiver](#)
- [ACC Phase III](#)
- [Becoming a Medicaid Behavioral Health Provider](#)
- [Billing](#)
- [Calendar](#)
- [CCBHC](#)
- [Crisis Services](#)
- [Email Us](#)
- [BH Policies](#)
- [Resources](#)
- [SUD Continuum](#)
- [Transportation](#)
- [Youth](#)

Partner Links

- [BHA](#)
- [988/Crisis Line](#)

Behavioral Health Continuum of Care

A strong behavioral health system is vital to making sure every Coloradan can access the behavioral health care they need when they need it. The Department of Health Care Policy & Financing (HCPF) is working with other state agencies, advocates and stakeholders to enhance the behavioral health continuum of care. Behavioral health includes mental health and substance use issues.

About BHIC

The Health First Colorado (Colorado's Medicaid program) and Child Health Plan Plus (CHP+) Behavioral Health Initiatives and Coverage (BHIC) office governs HCPF's specific behavioral health policies, benefits, special projects and strategies. The office also ensures that HCPF is fully aligned and engaged to support the Colorado Behavioral Health Administration (BHA) and its vision. This includes implementing elements of federal and state legislation while ensuring that HCPF continues to improve the behavioral health care access, quality, equity and service provided to Medicaid and CHP+ members.

Safety Net and Crisis Services

Residential and Inpatient Services

Population-based Services

Integrated Care

Outpatient Services

Community Based Services

Policy Updates

Updated Peer Support Policy

Effective July 1, 2025 HCPF is limiting the providers that can bill for services delivered by a Peer Support Professional to the following provider types:

- Comprehensive Safety Net Providers - PT 78 / ST 887
- Substance Use Disorder (SUD) Continuum - PT 64 / ST 371
- Recovery Support Services Organizations - PT 89 / ST 889

Services that are reimbursable when delivered by Peer Support Professionals, and billed by above provider types include:

- H0038: Self-Help/Peer Services
- H0023: Behavioral Health Outreach Service

Peer Support Professionals in Team-Based Treatment

As part of a multidisciplinary team, Peer Support Professionals may continue to participate in the delivery of team-based services when employed by Comprehensive Safety Net providers (PT 78/ST 887) or Substance Use Disorder (SUD) Continuum providers (PT 64)

For a list of team-based treatments that can involve a Peer Support Professional, please visit the [Updated Peer Support Policy](#) webpage.

Discontinuation of Behavioral Health Outpatient State Directed Payments

Effective July 1, 2025, HCPF will no longer set directed payments for outpatient behavioral health services, except those for Mobile Crisis Response services and Opioid Treatment Programs (OTPs).

Directed payments for services in a bedded facility will remain in place until June 30, 2026.

Billing and Coding Updates

- A new edition of SBHS Billing Manual is published each quarter
 - A Change Tracking Log is published with each edition
 - Next edition will be published **July 1st**
- Please bookmark and look at:
<https://hcpf.colorado.gov/sbhs-billing-manual>
- Also note the Behavioral Health Policies, Standards, and Billing References webpage: <https://hcpf.colorado.gov/bh-policies>

National Correct Coding Initiative (NCCI) Edits

Beginning July 1, 2025, HCPF is requiring RAEs to implement all NCCI edits. CMS created the NCCI to reduce improper payments stemming from incorrect coding and billing practices. NCCI prevents reimbursement for inappropriate combinations of CPT codes. The following are the three types of NCCI Edits:

- **Add-on Code (AOC)** edits ensure add-on codes are not billed without a primary procedure code.
- **Medically Unlikely Edits (MUEs)** prevent inappropriate payments when services are reported with an unusually high number of units of service.
- **Procedure to Procedure (PTP)** edits prevent code pairs that should not be reported together on the same date of service.

NCCI Edits - Example

- For example, for a 45 minute psychotherapy session with a member (procedure code 90834) the Practitioner Services' MUE Value is 2. This means that providing two services to the same date and same member is allowed, but anything over two is denied. The MUE Adjudication Indicator is 3 which means it is a Date of Service Edit, so the edit looks at how many of the same services were done on the same date.
- Visit CMS' [NCCI for Medicaid](#) website for more information on NCCI edits

Behavioral Health Group Practices Provider Type Guidance

HCPF created Provider Type 77 - Behavioral Health Group, effective January 1, 2024 to create more network specificity for group practices who deliver behavioral health services. Many group providers are currently enrolled with Medicaid as a Non-Physician Practitioner Group (PT 25) or a Clinic Practitioner (PT 16). The PT 25 and PT 16 enrollments do not allow HCPF to differentiate between providers who primarily deliver behavioral health services, compared to those who primarily deliver medical services or integrated care.

Behavioral Health Group Practices Provider Type Guidance, cont.

Therefore, HCPF issues the following guidance for behavioral health group practices:

- All newly enrolling Medicaid providers that only deliver behavioral health services must enroll as PT 77 - Behavioral Health Group.
- Current Medicaid providers enrolled as PT 25 or PT 16 that only provide behavioral health services must re-enroll as a PT 77 upon revalidation or when making an update to their enrollment.

Email hcpf_bhbenefits@state.co.us with any questions

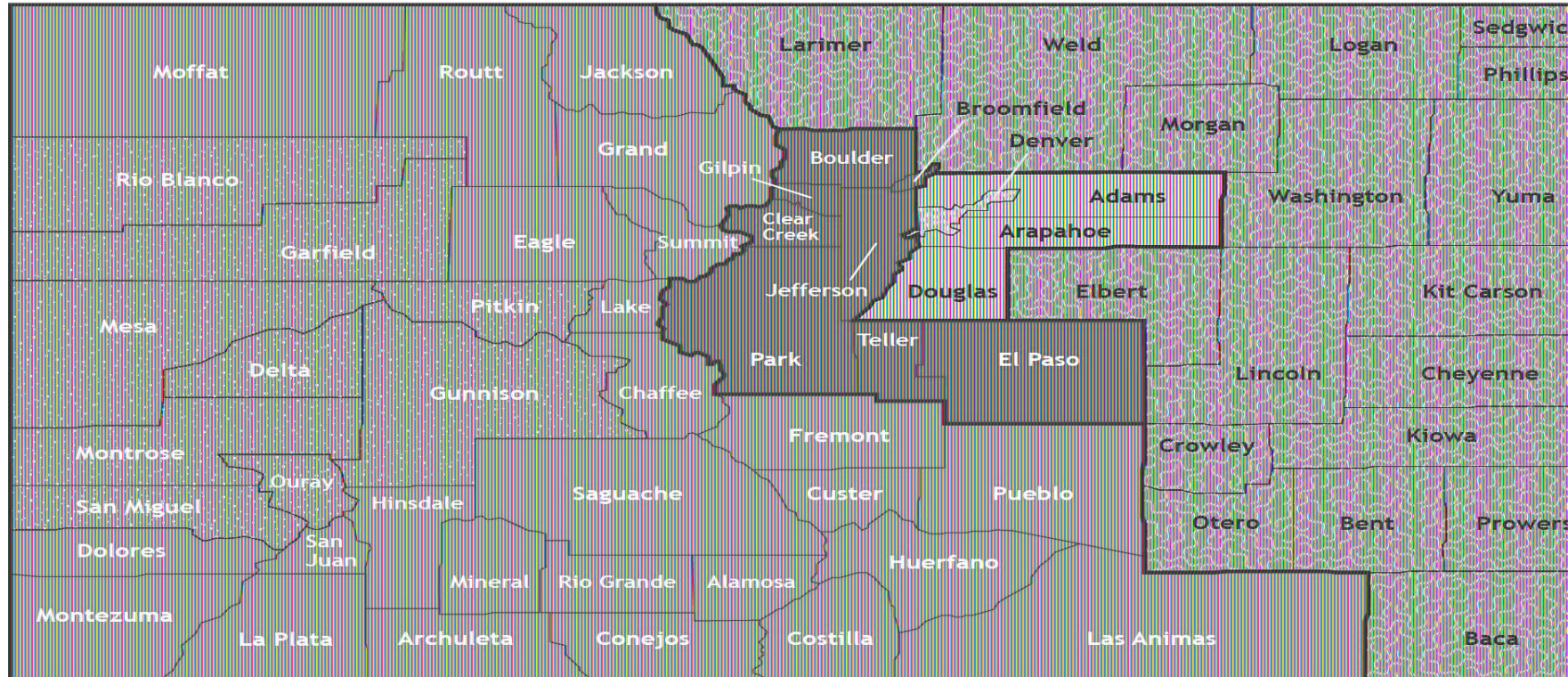
Terminating SUD Provider Specialty Type 64/477

On July 1, 2024, new Specialty Types (ST) were added under PT 64 (Substance Use Continuum) to align with BHA Endorsements. Providers should no longer be enrolled with ST 477.

All SUD providers who currently have an ST 477 enrollment must submit a maintenance request through the Provider Portal to modify your Specialty Type to align with your BHA Endorsement for level of care.

Email hcpf_sudbenefits@state.co.us with any questions.

ACC Phase III Update



Note: These regions align with Behavioral Health Administrative Service Organizations (BHASOs).

ACC Phase III Change Management Process



What is it?

- No matter how much you prepare, no change process is ever perfect.
- The Change Management Process includes:
 - ▢ Clear guidance for member transitions.
 - ▢ Daily oversight to identify and address issues as they arise.
 - ▢ Stakeholders will play a key role in helping us understand on-the-ground concerns.



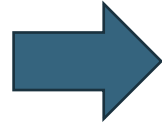
Member Transition Process

- 1 Current RAEs that cover counties that are changing in Phase III are working together to:
 - Identify members at-risk for hospitalization, currently admitted to inpatient treatment, or recently discharged from inpatient treatment.
 - Provide a list of these members to HCPF and/or the Phase III RAEs at the beginning and end of June.
 - Collaborate with members, providers and other stakeholders in their region as necessary to ensure a successful transition.
- 2 ACC Transition of Care policy outlines the service authorization and reimbursement for members who change RAEs on July 1.
- 3 Current RAEs must inform all members receiving active care coordination about the transition.

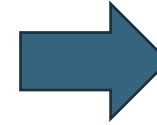
How Will it Work?



Stakeholders complete an online form to notify us of an issue from the implementation of Phase III.



HCPF investigates each issue.



HCPF provides resolution. Issues with broad impact will be kept on a running log on the ACC webpage.

Where to find more information

- Form and issues log will be posted on the [ACC webpage](#).
- Subscribe to the [“Accountable Care Collaborative Program Updates” newsletter](#) to be notified as soon as it’s posted.

Legislative Updates

HCPF Legislative Agenda - 11 Bill Highlights

Final details available soon: CO.gov/HCPF/legislator-resource-center

- [HB25-1003 Children with Complex Health Needs](#) - merges waivers (**Signed!**)
- [HB25-1033 Medicaid Third-Party Liability Payments](#) - supports payer of last resort (**Signed!**)
- [HB25-1213 Updates to Medicaid](#) - includes single state agency provision for HB24-1038 (**Signed!**)
- [SB25-226 Continuation of the Complementary and Integrative Services Waiver](#) (**Signed!**)
- **R-16 Financing Reductions:** Repeals outdated cash funds, moves to an enterprise to alleviate budget challenges
 - [SB25-228 Enterprise Disability Buy-In Premiums](#) (**Signed!**)
 - [SB25-264 Cash Fund Transfers to General Fund](#) (**Signed!**)
 - [SB25-270 Enterprise Nursing Facility Provider Fees](#) (**Signed!**)

HCPF Legislative Agenda - Highlights

Final details available soon: CO.gov/HCPF/legislator-resource-center

- [SB25-292 Workforce Capacity Development Center](#): Outlines structure and purpose of Workforce Center, includes a reporting requirement. (**Signed!**)
- [SB25-294 Reinstate Managed Care Carve Out for Child Welfare](#): Postpones move of residential treatment from the child welfare block to behavioral health capitation/the RAEs (**Signed!**)
- [SB25-308 Medicaid Waiver Reinvestment Cash Fund](#): Creates a cash fund for dollars designated to 1115 waiver programs such as Health Related Social Needs and Reentry services. (**Signed!**)
- [SB25-314 Recovery Audit Contractor Program](#): Aims to improve program efficiency and balance the need for accountability with a reasonable level of administrative burden (**Signed!**)

HCPF Budget Agenda - Highlights

Final details available soon: CO.gov/HCPF/legislator-resource-center

- [SB25-206](#) The Long Bill
 - HCPF's FY 2025-26 budget is \$18.2B Total Fund and \$5.5B General Fund
 - 33% of State GF budget
- In tough budget year, HCPF programs avoided large cuts; next year will be more challenging as one time budget actions will not be available to JBC next year to fill budget gaps.
 - Highlights included:
 - Across-the-board rate increases 1.6%
 - Funding to implement ACC Phase III (R-6)
 - Increases for County Administration and CBMS innovations (R-7)



Bills Impacting HCPF

- Lowered administrative burden
 - [HB25-1213](#): Updates to Medicaid
 - [HB25-1162](#): Eligibility Redetermination for Medicaid Members
- Supported hospitals and providers
 - [SB25-078](#): Nonprofit Hospital Collaborative Agreements
 - [SB25-290](#): Stabilization Payments for Safety Net Providers
 - [HB25-1288](#): Support for Federally Qualified Health Centers
 - [HB25-1328](#): Implement Recommendations Direct Care Worker Stabilization Board
- Improved access to benefits
 - [SB25-183](#): Coverage of Pregnancy Related Services
 - [SB25-084](#): Medicaid Access to Parenteral Nutrition



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Questions?



Next IPN Collaborative
September 5, 2025
1-2:30 PM

hcpf_bhbenefits@state.co.us



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