

Provider Bulletin

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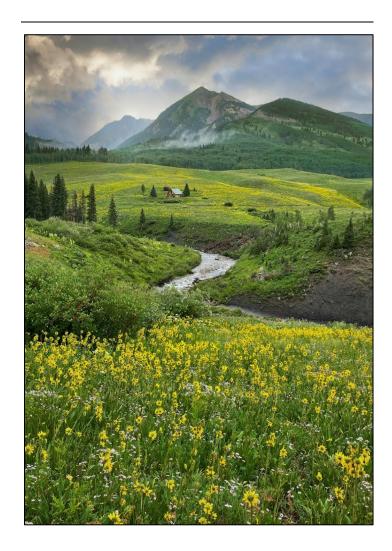
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Did You Know?

The <u>Provider Revalidation Dates Spreadsheet</u> is updated and posted once a week on the <u>Revalidation web page</u>. Providers must revalidate every five (5) years and the revalidation date is listed for all Health First Colorado (Colorado's Medicaid program) providers. The information on the spreadsheet can be used to verify active enrollment for any billing, rendering and Ordering, Prescribing and Referring (OPR) provider.



All Providers

Electronic Data Integration (EDI) Vendor Transition

Electronic Data Integration (EDI) functionality, including batch processing and trading partner enrollment, will transition from the Medicaid Management Information System (MMIS) operated by Gainwell Technologies to a new module operated by Cotiviti (formerly Edifecs).

What does this mean for providers?

The EDI transition will only affect trading partners who submit batch transactions for providers. Providers will need to ensure that the clearinghouse or billing agent is aware of these changes and in compliance before implementation.

What is staying the same?

- Providers may still use the <u>Provider Web Portal</u> to submit individual claims, maintain enrollment, verify individual eligibility and more.
- Providers will still contact the <u>Provider Services Call Center</u> with any questions about claims, the Provider Web Portal or EDI.
- Optum agents have access to the EDI systems and have been trained to assist providers with questions about EDI.
- Trading partners will retain the same trading partner IDs.

What is changing?

- Existing trading partners will need to test and sign a new agreement.
- New Secure File Transfer Protocol (SFTP) credentials will be issued.



The new EDI transition is scheduled to be implemented in the late summer of 2026, with phased implementations starting in 2025.

More detailed information will be shared in future Provider Bulletins.

Refer to the <u>Electronic Data Interchange (EDI) Support web page</u> and <u>Colorado Medicaid Enterprise Solutions (CMES) Transition web page</u> for more information.

Providers and trading partners are encouraged to sign up for targeted communications.

Gun Violence Prevention Resources

The Colorado Department of Public Health and Environment (CDPHE) Office of Gun Violence Prevention has provided resources on gun violence prevention. The office's "Let's Talk Guns, Colorado" bilingual statewide campaign is designed to reduce firearm injuries and deaths through education and open dialogue. This comprehensive initiative provides essential resources for healthcare providers, care coordinators and community members to address gun violence prevention in their work with clients and families.

The campaign website at LetsTalkGunsColorado.com (available in English and Spanish at ColoradoHablemosdeArmas.com) offers valuable tools including safe firearm storage best practices, guidance on reporting lost or stolen firearms, information about Extreme Risk Protection Orders (ERPOs) and access to mental health and substance use treatment resources. For Health First Colorado providers and Regional Accountable Entities (RAEs), these resources can support conversations with clients about firearm safety, particularly when addressing mental health concerns or substance use issues.

With firearm injury deaths in Colorado exceeding deaths from motor vehicle crashes, opioid overdoses or colon cancer, these resources provide critical support for professionals working to protect vulnerable populations. Colorado's Extreme Risk Protection Hotline (855-999-3776) is available 24/7 to provide information about ERPOs when there are concerns about someone's access to firearms.

Contact Molly Siegel, Director of the Office of Gun Violence Prevention, at Molly.Siegel@state.co.us for more information.

Pharmacy Benefit Management System (PBMS) Transitioning

The Department is transitioning components of its Pharmacy Benefit Management System (PBMS) from Prime Therapeutics (formerly Magellan) to MedImpact. Implementation is planned for October of 2025 and February of 2026.



What providers should know:

- The Opioid Risk module is not changing and will continue to be managed by OpiSafe.
- MedImpact will implement and manage four (4) new PBMS modules:
 - The core PBMS (February 2026)
 - o Rebate (October 2025)
 - Preferred Drug List (October 2025)
 - Real-Time Benefit Tool (February 2026)
- Contact information for the PBMS, including the call center phone number, fax number and the mailing address for paper claims will change. Information will be provided closer to the transition date. The information will be on the <u>Provider Contacts web</u> page.
- The Bank Identification Number/Processor Control Number (BIN/PCN) for pharmacy claim submission will remain the same. Pharmacies will continue to submit their claims as usual.

Why is the PBMS vendor changing?

Prime Therapeutics' contract expires this winter, and the Department is required by state and federal regulations to solicit competitive bid proposals from vendors on a regular basis.

Through a competitive bid process, the Department selected MedImpact to implement <u>four</u> (4) of the five (5) PBMS modules.

Visit the Colorado Medicaid Enterprise Solutions Transition web page for more information.

Rural Provider Sustainability Community of Practice



A Rural Provider Sustainability Community of Practice is being launched in response to feedback from the spring Rural Home and Community-Based (HCBS) Provider Listening Sessions. The goal of this quarterly meeting is to bring together Long-Term Services and Support Program (LTSS) providers, rural advocates, case managers, care coordinators and other rural service partners to connect, share resources and discuss common challenges and solutions. It will be held quarterly on the second Monday of each quarter, beginning on Monday, September 8, 2025.

Rural Provider Sustainability Community of Practice

Monday, September 8, 2025, 1:00 p.m. - 2:30 p.m. MT

Google Meet joining info:

Video call link

Or dial: (US) +1 321-586-0975 PIN: 227 662 884#

More phone numbers

Complete the <u>Rural Provider Sustainability Community of Practice Topic Request Form</u> to submit a topic for consideration at an upcoming Rural Provider Sustainability Community of Practice.

Contact <u>HCPF_ruralsustainability@state.co.us</u> or visit the <u>Rural Provider Sustainability web</u> page for more information.

All Providers Who Utilize the ColoradoPAR Program

What is the ColoradoPAR Program?

The ColoradoPAR Program is a third-party, fee-for-service Utilization Management (UM) program administered by Acentra Health, Inc. Visit the <u>Colorado Prior Authorization Request Program (ColoradoPAR) web page</u> for more information about the ColoradoPAR Program.

Long-Term Home Health (LTHH) Prior Authorization Request (PAR) Resumption Information

Go-Live for Prior Authorization Requests (PARs) of Registered Nurses (RNs) and Certified Nursing Assistant (CNA) Services is August 1, 2025.

There will be an additional step needed to meet the PAR requirements for Long-Term Home Health (LTHH) Certified Nursing Assistant (CNA), LTHH Registered Nurse (RN) and Private Duty Nursing (PDN):



Skilled Care Acuity Assessment and Nurse Assessor

- The Skilled Care Acuity Assessment will be completed by Telligen (the Nurse Assessor vendor), and the associated Recommendation letter will be required when submitting a PAR for PDN, LTHH RN and CNA services. Reference the Training section below for associated training dates. Visit the <u>Nurse Assessor web page</u> for more information.
 - Before a PAR can be submitted, the Home Health Agency (HHA) or Case Manager must first submit a referral for a Nurse Assessor. After the assessment is completed, the Skilled Care Acuity Assessment and Recommendation Letter will be made available and must be included with the PAR submission.
- Note: The new Skilled Care Acuity Assessment will replace all previously used acuity tools in the PAR process for skilled services. This includes both the 2003 pilot PDN Acuity Tool and the Pediatric Assessment Tool (PAT).
- Note: The Skilled Care Acuity Assessment and Recommendation letter are required when submitting a PAR, as part of the clinical documentation, to be considered with the rest of the body of evidence for the PAR. The Recommendation Letter does not constitute a medical necessity determination and does not directly authorize services but serves as a supporting document within the medical necessity review completed by Acentra Health, Inc.

Refer to Operational Memo OM 25 - 037 and Operational Memo OM 25 - 036 for more details. Communication will continue via the Memo Series and stakeholders may submit questions to the HomeHealth@state.co.us inbox.

Important Training Dates for Hospital Discharge Planners and Case Managers, Case Management Agencies (CMAs), Regional Accountable Entities (RAEs) and Home Health Agencies (HHAs)

Visit the <u>Nurse Assessor Referral Training web page</u> for links to all available training sessions for providers, case managers or members. The Authorized Official Training must be

completed for each entity or agency who wishes to submit a referral via Qualitrac. It is recommended that this training be completed **before** the other training sessions.

For questions on anything related to the Nurse Assessor, how to submit a referral or the Skilled Care Acuity Assessment, contact the Nurse Assessor vendor, Telligen.

Colorado Skilled Nurse Assessor Call Center & Provider Help Desk

• Email: CO_SNA@Telligen.com

• Toll-Free Phone: 877-563-6972

Prior Authorization Request (PAR) Submission Training for Acentra

Acentra Health will provide benefit-specific Prior Authorization Request (PAR) submission training for all providers and benefit-specific training for Long-Term Home Health (LTHH). The training dates and times are listed below in Mountain Time:

- LTHH Skilled Nursing Visits and CNA Training August 13, at 9:00 a.m.
- LTHH Skilled Nursing Visits and CNA Training August 13, at 12:00 p.m.
- Portal Registration and PAR Submission Training August 27, at 9:00 a.m.
- Portal Registration and PAR Submission Training August 27, at 12:00 p.m.



PAR submission training sessions are appropriate for all new users and include information on how to submit a PAR using Acentra's provider PAR portal. Atrezzo®.

Contact <u>COProviderIssue@acentra.com</u> with questions or if needing assistance when registering for Atrezzo training or accessing the portal. Visit the <u>ColoradoPAR Training</u> web page for additional training information.

Durable Medical Equipment (DME)

HB 25-1016: Occupational Therapist Prescribed Medical Equipment

<u>House Bill 25-1016</u> was passed during the 2025 Legislative Session to authorize a licensed occupational therapist to directly recommend and prescribe Durable Medical Equipment (DME) to a Health First Colorado member without requesting the prescription from a licensed physician, effective August 6, 2025. Additional information can be found on the <u>Ordering</u>, <u>Prescribing and Referring web page</u>.

Contact Devinne Parsons at <u>Devinne.Parsons@state.co.us</u> with questions regarding Occupational Therapy policy.

Breast Feeding Kit Bundle

Effective July 1, 2025, providers may supply a bundle of breast pump equipment that includes: one (1) manual pump, one (1) single-user electric pump and one (1) set of replacement shields/flanges when all three (3) items are provided on the same date of service. This bundle is billed using Healthcare Common Procedure Coding System (HCPCS) E0603 + modifier U1. All components of this bundle must be supplied when submitting a claim.

Contact Alaina Kelley at Alaina. Kelley@state.co.us with questions.

Wheelchair-Mounted Robotic Arms

Effective August 1, 2025, wheelchair-mounted robotic arm devices are **not a covered benefit** under the Health First Colorado Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) program. These devices are considered investigational or experimental because available evidence is insufficient to demonstrate clinical benefit, functional improvement or reduction in caregiver burden. Additional information can be found in the Wheelchair Benefit Coverage Policy.

Contact Alaina Kelley at Alaina. Kelley@state.co.us.

Home and Community-Based Services (HCBS)

Workforce Report and Base Wage Attestation Required by August 31, 2025

All those providing base wage qualifying services are required to submit the 2025 Workforce Report and the 2025 Base Wage Attestation Form by August 31, 2025.

Submission instructions and a link were sent to the email address on file in the <u>Provider Web Portal</u>. Visit the <u>Direct Care Workforce Base Wage web page</u> for frequently asked questions and a short tutorial video if in need of assistance.



Contact <u>HCPF_BaseWage@state.co.us</u> if the email was not received or if the submission link and password are needed.

Providers who do not submit the required documents or fail to meet base wage requirements may be subject to audit, corrective action, claim payment suspension or recoupment. A list of providers who have not submitted the attestation will be posted publicly and claim payments will be suspended beginning September 15, 2025.

Contact HCPF_BaseWage@state.co.us with any questions.

Electronic Visit Verification (EVV) and Community First Choice (CFC)

Community First Choice (CFC), also known as 1915(k), is an optional Medicaid program that allows states to offer select home and community-based attendant services and supports to eligible members on the State Plan, expanding these long-term care services to more Health First Colorado members. With the authority from Senate Bill 23-289, Colorado implemented CFC on July 1, 2025.

Billing providers (Provider Agencies and Financial Management Service [FMS] Vendors) who provide Personal Care, Homemaker and Health Maintenance Activities services in the home and community through an HCBS waiver will begin providing those services under CFC at the time their member transitions to CFC at their Continued Stay Review. Providers and FMS Vendors who provide CFC services will still be expected to collect Electronic Visit Verification (EVV) for EVV-required services.

New procedure codes were introduced for CFC services in July 2025. This does *not* change EVV data collection requirements. Providers using a Provider Choice System must ensure their system is updated to recognize the new procedure codes and continue mapping to the correct EVV service group codes (which remain unchanged).

An up-to-date list of services and procedure/revenue codes can be found in the <u>Crosswalk of Codes - July 2025</u> and the <u>EVV Program Manual</u>. Covered codes can be found on the <u>Community First Choice Fee Schedule</u>.

A full list of CFC services and other relevant information can be found on the <u>Community First</u> <u>Choice Option web page</u>.

Hospital Providers

General Updates

Hospital Stakeholder Engagement Meetings

Bi-monthly Hospital Stakeholder Engagement meetings will be hosted by the Department to discuss current topics regarding ongoing rate reform efforts and operational concerns. <u>Sign up to receive the Hospital Stakeholder Engagement Meeting newsletters.</u>

The next Hospital Stakeholder Engagement meeting will be Friday, September 5,
 2025, from 9:00 a.m. to 11:00 a.m. Mountain Time and will be hosted virtually.



Visit the <u>Hospital Stakeholder Engagement Meeting web page</u> for more details, meeting schedules and past meeting materials. **Calendar Year 2025** meeting dates have been posted.

Contact Della Phan at <u>Della.Phan@state.co.us</u> with any questions or topics to be discussed at future meetings. Advanced notice will provide the Facility Rates Section time to bring additional Department personnel to the meetings to address different concerns.

Rural Health Clinic (RHC) Stakeholder Engagement Meeting

A meeting for RHCs has been scheduled for September 4, 2025, from 1:00 p.m. to 2:00 p.m. Mountain Time. Topics of discussion will include an overview of the Rural Health Clinic payment methodology for both hospital-based and freestanding RHCs and operational concerns impacting RHC billing or payment.

Contact Susan Green and Andrew Abalos at <u>Susan.Green@state.co.us</u> and <u>Andrew.Abalos@state.co.us</u> with any questions or topics requested for discussion at this meeting.

Facility License Status for Hospitals, Ambulatory Surgery Centers and Dialysis Centers

Some claims are currently denying for no license on file. Providers with an active license issued by the Colorado Department of Public Health and Environment (CDPHE) can manually update their license status through the <u>Provider Web Portal</u> to avoid claim denials with Health First Colorado. Facility licenses (Hospitals, Ambulatory Surgery Centers [ASCs] and Dialysis Centers) that have expired may have a pending renewal status with CDPHE. Providers are urged to check the status of the facility's license on file and update them as needed. Refer to the <u>Update License and Clinical Laboratory Improvement Amendments (CLIA) Quick Guide</u> for information on how to update licenses.

Contact Jessica Short at <u>Jessica.Short@state.co.us</u> and Diva Wood at <u>Diva.Wood@state.co.us</u> with questions for Hospitals, Chris Lane at <u>Chris.Lane@state.co.us</u> with questions for Ambulatory Surgery Centers and Sahara Karki at <u>Sahara.Karki@state.co.us</u> with questions for Dialysis Centers.

Pediatric Behavioral Therapy

Compliance Deadline – Registered Behavior Technician (RBT) Certification Requirement

All Applied Behavior Analysis (ABA) providers are reminded that **Registered Behavior Technicians (RBTs) must hold an active certification** to provide and bill for services under Health First Colorado.

Action Required

Effective immediately, all ABA providers must ensure that any RBT providing services under their supervision is actively certified by the Behavior Analyst Certification Board (BACB) or

another certification body. Providers have until August 31, 2025, to come into full compliance.

Provider Responsibility

It is the responsibility of each enrolled ABA provider group and supervising Behavior Analyst to:

- Verify the active certification status of all RBTs on staff.
- Retain appropriate documentation for audit or program integrity reviews.
- Immediately discontinue billing for services rendered by uncertified individuals after August 31, 2025.
- Update staff rosters with Health First Colorado if appropriate.

Questions

Contact the <u>Provider Services Call Center</u> or Gina Robinson at <u>Gina.Robinson@state.co.us</u> with questions regarding provider requirements.

Pharmacy Providers

Pharmaceutical Rate Methodology Update



Effective September 1, 2025, the pharmaceutical rate methodology will be updated with a revised calculation of Maximum Allowable Cost (MAC) rates.

Note: This is an update from the previously published August 15, 2025, effective date.

MAC rates will be calculated as follows:

The generic drug MAC rate will be Wholesale Acquisition Cost (WAC) minus 20 percent.

The brand name drug MAC rate will be WAC minus 3.5 percent.

Visit the <u>Provider Rates & Fee Schedules web page</u> under the <u>Pharmacy Rate List section</u> for more information regarding outpatient pharmacy reimbursement rates.

Contact Korri Conilogue at KorriConilogue@state.co.us with any questions.

Physician Services

Colorado Medicaid eConsult Update

Health First Colorado providers can access a free, secure, statewide electronic consultation platform via ColoradoMedicaideConsult.com. The eConsult platform allows Primary Care Medical Providers (PCMPs) to consult electronically with specialists, often reducing the need for in-person referrals for members.

Effective July 1, 2025, Colorado Medicaid eConsult has expanded to support specialty-to-specialty consultations. This enhancement will broaden the existing PCMP user role to a general "submitter" role, allowing specialists (including Medical Doctors [MDs]/Doctors of Osteopathic Medicine [DOs], Nurse Practitioners [NPs] and Physician Assistants [PAs]) to initiate eConsults as treating practitioners.

The billing manual will be updated to reflect these changes, enabling third-party platforms to implement and submit claims for specialty-to-specialty reimbursement. Refer to the <u>Telemedicine and eConsult Billing Manual</u> for full details on updated criteria and reimbursement policies.



Contact the eConsult team at <u>HCPF_eConsult@state.co.us</u> for more information about this feature. Contact Safety Net Connect (SNC) at Coloradosupport@safetynetconnect.com for assistance with platform access and additional technical support.

Getting Started with Colorado Medicaid eConsult:

Practices can complete the <u>Practice Enrollment Form</u> to begin the enrollment process or attend an upcoming <u>Monthly Program Overview Webinar</u> from 12:30 p.m. - 1:00 p.m. Mountain Time for more information.

Contact Coloradosupport@safetynetconnect.com with any questions.

eConsult Reimbursement:

Refer to the Telemedicine and eConsult Billing Manual for details on eConsult reimbursement.

Upcoming Learning Opportunities:

Safety Net Connect is offering an upcoming free Continuing Medical Education (CME) - accredited webinar designed to keep providers informed on key clinical topics. This session is open to all healthcare professionals interested in enhancing their knowledge and practice.

August 14, 2025, at 12:00 PM MT

Topic: Assessment of Liver Function

Presented by: Board Certified Gastroenterologist, Dr. Alicia Lieberman

Deepen understanding of liver health and diagnostic approaches in gastroenterology

Assessment of Liver Function Registration Link

Visit the <u>eConsult Platform web page</u> for more information or email the eConsult team at HCPF_econsult@state.co.us.

Free Screening, Brief Intervention and Referral to Treatment (SBIRT) Training for Health First Colorado Providers

Free Screening, Brief Intervention and Referral to Treatment (SBIRT) training for Health First Colorado providers is provided through partnership with Peer Assistance Services (PAS), Inc. PAS has provided SBIRT training and support since 2006. The SBIRT program promotes prevention and early intervention efforts through in-person, online and virtual training; technical assistance and hands-on SBIRT implementation.



In order to directly deliver screening and intervention services, providers are required to participate in training that provides information about the implementation of evidence-based protocols for screening, brief interventions and referrals to treatment. Face-to-face trainings and consultations are available through various entities such as SBIRT
Colorado Community Managed Care Network and the Emergency
Nurses Association.

Visit the <u>PAS training calendar</u> to register for an upcoming training. The shared goal is to promote SBIRT as a standard of care throughout Colorado. Refer to the <u>SBIRT Billing Manual</u> to learn more about best billing practices.

Contact Janelle Gonzalez at Janelle.Gonzalez@state.co.us with questions.

Provider Training Sessions

August 2025 Schedule

Providers are invited to sign up for provider training sessions. All sessions are held via webinar on Zoom, and registration links are shown in the calendar below. *The availability of training sessions varies monthly*. Descriptions of available training sessions, calendar registration links and training-specific slide decks are available on the Provider Training web page.

The following training sessions focused on Health First Colorado will be offered in August:

Provider Enrollment

Provider enrollment training is designed for providers at various stages of the initial enrollment process with Health First Colorado. It provides an overview of the program and guidance on the provider application process, including enrollment types, common errors and enrollment with other entities (e.g., DentaQuest, Regional Accountable Entities [RAEs], Health First Colorado vendors). It also provides information on next steps after enrollment.

Note: This training does not provide guidance on revalidation for already enrolled providers.

Billing Training: Medicare and Third-Party Liability

This focused training addresses billing Medicare and third-party liability (TPL) (e.g., commercial and private insurance) as primary payors, including detailed information on Medicare lower-of pricing logic and timely filing guidelines.

Note: This training is not relevant to Home and Community-Based Services (HCBS) and Non-Emergent Medical Transportation (NEMT) providers.



Live Webinar Registration

Click the title of the desired provider training session in the calendar to register for a webinar. An automated response will confirm the reservation. Webinars may end early. Time has been allotted for questions at the end of each session.

August 2025				
Monday	Tuesday	Wednesday	Thursday	Friday
				1
4	5	6	7	8
11	12	13	14	15
18	19 Provider Enrollment Training 8/19/25 1:00 p.m 3:30 p.m. MT	20	21 Billing Training: Medicare & Third-Party Liability 8/21/25 1:00 p.m 2:30 p.m. MT	22
25	26	27	28	29

Note: All training sessions offer guidance for Health First Colorado only. Providers are encouraged to contact the Regional Accountable Entities (RAEs), Child Health Plan *Plus* (CHP+) and Medicare for enrollment and billing training specific to those organizations. Training for the Care and Case Management (CCM) system will not be covered in these training sessions. Visit the CCM System web page for CCM-specific training and resources.

Refer to the <u>Provider Web Portal</u> Quick Guides located on the <u>Quick Guides web page</u> for more training materials on navigating the Provider Web Portal.

Upcoming Holidays

Holiday	Closures
Labor Day Monday, September 1, 2025	State Offices, Acentra Health, AssureCare, DentaQuest, Gainwell Technologies, Optum and Prime Therapeutics will be closed. Capitation cycles for managed care entities may potentially be delayed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United States Postal Service or providers' individual banks.

Provider Services Call Center

1-833-468-0362