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## Did You Know?

Providers are required to keep all licensure information current. An expired license can be updated by submitting a provider maintenance request via the [Provider Web Portal](#).

More information can be found in the [Provider Maintenance Quick Guide - License Update](#), located on the [Quick Guides and Webinars web page](#).

## All Providers

### National Correct Coding Initiative (NCCI) Notification of Quarterly Updates

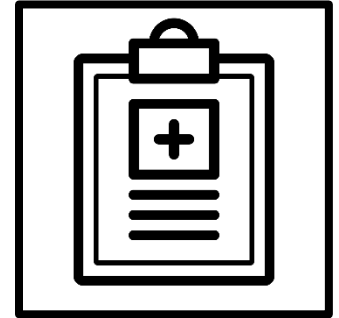
Providers are encouraged to monitor Centers for Medicare & Medicaid Services (CMS) for updates to NCCI rules and guidelines. Updates to the procedure-to-procedure (PTP) and medically unlikely edit (MUE) files are completed quarterly with the next file update available January 2020. For more information, visit the [CMS National Correct Coding Initiative Edits web page](#).

### Payment Error Rate Measurement (PERM) Audit

The Centers for Medicare & Medicaid Services (CMS) started its Review Year 2020 PERM audit on Health First Colorado (Colorado's Medicaid Program) and Child Health Plan *Plus* (CHP+) claims in the summer of 2019. CMS will randomly select a set number of paid or denied claims from July 1, 2018, to June 30, 2019, for its review.

CMS has contracted with AdvanceMed, an NCI Company (AdvanceMed), who will contact providers by phone and letter to request medical records that support claims providers submitted for payment. A blank copy of the letter is available on the [Payment Error Rate Measurement \(PERM\) web page](#). AdvanceMed will review the medical records to determine if the payment for the corresponding claim was justified. Providers have 75 calendar days to provide medical record documentation to AdvanceMed.

If the initially submitted medical record documentation is not sufficient, AdvanceMed will contact providers to request additional documentation. Providers have 14 calendar days to provide the additional documentation. If documentation is not provided or is insufficient, the provider's claim(s) will be considered in error, and the Department of Health Care Policy & Financing (the Department) will initiate recovery for the monies associated with the claim from the provider. The Department will also investigate the reasons why the provider did not submit proper documentation.



### What is PERM?

PERM is a federally-mandated audit that occurs once every three years. This is a review of claim payments and eligibility determination decisions made for states' Medicaid and Children's Health Insurance Program to ensure payment accuracy and verify that states only pay for appropriate claims. The collection and review of protected health information contained in medical records for payment review purposes is authorized by U.S. Department of Health and Human Services regulations at [45 C.F.R. 164.512\(d\)](#), as a disclosure authorized to carry out health oversight activities, pursuant to the [Health Insurance Portability and Accountability Act of 1996 \(HIPAA\)](#); CMS PERM Review Contractor activities are performed under this regulation.

Visit the [CMS Payment Error Rate Measurement \(PERM\) web page](#) and the [Department's Payment Error Rate Measurement \(PERM\) web page](#) for more information. Contact Matt Ivy at [Matt.Ivy@state.co.us](mailto:Matt.Ivy@state.co.us) or at 303-866-2706.

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

### **Prior Authorization Vendor Training**

eQHealth Solutions, the Department's prior authorization vendor, has ongoing training available for utilizing the PAR portal, eQSuite®, and entering benefit-specific requests. The training schedule is regularly updated and can be located on the [ColoradoPAR website](#).

Contact Provider Relations via Customer Service at [co.pr@eqhs.org](mailto:co.pr@eqhs.org) for PAR issues and assistance with eQSuite®. For general inquiries that cannot be addressed via the online helpline in eQSuite®, call customer service at 888-801-9355.

# Home & Community-Based Services (HCBS) Providers

## Changes to Billing Method for Home Accessibility Adaptations Benefit

Effective January 1, 2020, the Department will implement a new billing method for the Home Accessibility Adaptations benefit using the S5165 procedure code under the Children's Extensive Supports (CES) and Supportive Living Services (SLS) HCBS waivers. This benefit was previously paid to providers through Community Centered Boards (CCB).



Beginning January 1, 2020, enrolled providers may bill these services directly using the S5165 procedure code and either the U7 primary modifier for the CES waiver or the U8 primary modifier for the SLS waiver. Enrolled providers will bill two (2) units of half the total project cost per project. The first unit may be billed on project approval, and the second unit may be billed when the project has been completed satisfactorily. Providers will receive project approval and notice of satisfactory completion from the Division of Housing (DOH), the Department's authorized agent for this benefit.

For more information, reference the HCBS IDD Billing Manual, available on the [Billing Manuals web page](#) under the HCBS drop-down section, and the HCBS DD/SLS/CES Rate Schedule available on the [Provider Rates & Fee Schedule web page](#) under the HCBS Rate Schedule drop-down section.

Contact Diane Byrne at [Diane.Byrne@state.co.us](mailto:Diane.Byrne@state.co.us) with any questions.

## Changes to Supported Living Program (SLP) Rate Methodology

Effective January 1, 2020, the Department will implement member-specific tiered rates for the Home and Community Based Services (HCBS) - Brain Injury (BI) waiver SLP residential services for procedure code T2033. Department rates staff have updated rate methods and components. This will change reimbursement for the SLP service from a provider-specific rate to individual tiered rates, which will be updated on the same schedule as other services through across the board or targeted rate increases allocated by the state Legislature. The Office of Community Living (OCL) program staff has also contracted with a vendor to perform updated assessments used to set rates. These assessments do not impact member eligibility.

The Post-Eligibility Treatment of Income (PETI) worksheet will be updated to implement the new member-specific tiered rates for SLP. This system update will maintain previous PETI functionality for purposes of creating backdated PETIs and Prior Authorization Requests.

More information can be found in the HCBS BI/CMHS/EBD Billing Manual available on the [Billing Manuals web page](#) under the HCBS drop-down section, and the EBD, CMHS, BI, SCI Rate Schedule available on the [Provider Rates & Fee Schedule web page](#) under the HCBS Rate Schedule drop-down section.

### SLP Acuity Scores and Rates Effective January 1, 2020

Tier	Full Score Range (MPAI-4 T Score + Part D)	Proc code	Mod 1	Mod 2	Mod 3	Max Rate
1	0-35	T2033	U6			\$199.91

Tier	Full Score Range (MPAI-4 T Score + Part D)	Proc code	Mod 1	Mod 2	Mod 3	Max Rate
2	36-49	T2033	U6	HB		\$231.94
3	50-59	T2033	U6	HE		\$257.72
4	60-69	T2033	U6	HK		\$307.19
5	70-79	T2033	U6	HB	HE	\$337.33
6	80+	T2033	U6	HB	HK	\$373.40

Contact Diane Byrne at [Diane.Byrne@state.co.us](mailto:Diane.Byrne@state.co.us) with any questions.

## Targeted Rate Increases Effective January 1, 2020

The targeted provider rate increases for the following services have been approved by the Centers for Medicare & Medicaid Services (CMS).

- Adult Day (Basic, Specialized and Brain Injury)
- Group Residential Services and Supports (Levels 1-6)
- Home Delivered Meals
- Homemaker Services (Basic, Enhanced and Consumer-Directed Attendant Support Services (CDASS))
- Life Skills Training/Independent Living Skills
- Mental Health Counseling (Group, Individual and Family)
- Peer Mentorship
- Personal Care (Agency and CDASS)
- Respite Services (Alternative Care Facility, Nursing Facility, In Home, Individual, Individual Per Diem)

These targeted rate increases were approved for the following waivers:

- Brain Injury (BI)
- Children's Extensive Supports (CES)
- Community Mental Health Supports (CMHS)
- Developmental Disability (DD)
- Elderly, Blind and Disabled (EBD)
- Spinal Cord Injury (SCI)
- Supported Living Services (SLS)



The approved targeted rate increases vary by service and the new rates are posted on the [Provider Rates and Fee Schedule web page](#) under HCBS Rate Schedule drop-down section in the Rates Effective 1/1/2020 column. Detailed information about the rate updates have been published in past provider bulletins as well as on the Provider Rates and Fee Schedule web page. The Department will continue to publish updates in

those locations when approval is received for additional HCBS increases, rates have been loaded, and mass adjustments have occurred.

Contact Victoria Martinez at [Victoria.Martinez@state.co.us](mailto:Victoria.Martinez@state.co.us) with any questions regarding this rate increase.

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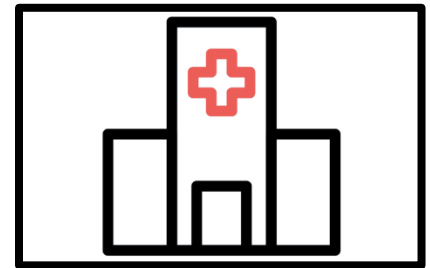
## **Hospital Providers**

### **General Updates**

#### **Inpatient Hospital Rates**

##### **Inpatient Hospital Payment Reform Efforts**

The Department will give a preliminary review of some current payment reform efforts for inpatient hospitals. It is recommended that individuals responsible for the hospital reimbursement attend the next Hospital Stakeholder Engagement Meeting on Friday, January 10, 2020, starting at 1:00 p.m. MST.



##### **Inpatient Hospital Per Diem Rate Group**

The interim solution for the per diem rate has been tested successfully. All remaining providers have been moved to the interim solution. Claims with dates of service July 1, 2019 and beyond will show in a suspended status for a short time until the claims are manually priced. The reprocessing of claims paid under All Patient Refined-Diagnosis Related Group (APR-DRG) reimbursement methodology will be communicated directly to providers.

Additional communications will be posted to the [Inpatient Hospital Per Diem Reimbursement Group web page](#), published in the Provider Bulletin and emailed.

Contact Elizabeth Quaife at [Elizabeth.Quaife@state.co.us](mailto:Elizabeth.Quaife@state.co.us) with any additional questions or concerns.

#### **Outpatient Hospitals**

##### **January 2020 Enhanced Ambulatory Patient Grouping (EAPG) Module Update**

The Department will update the 3M software which utilizes the EAPG methodology to version 2020.0.0 during the first week of January 2020. This change accommodates the quarterly Healthcare Common Procedure Coding System (HCPCS)/Current Procedural Terminology (CPT) updates. Colorado will continue using EAPG version 3.10 with this software update.

#### **All Hospital Providers**

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

The Department will continue to host bi-monthly Hospital Engagement meetings to discuss current issues regarding payment reform and operational processing. The next meeting is scheduled for Friday, January 10, 2020, 1:00 p.m. - 4:00 p.m. at 303 E 17th Ave, Denver, Conference Room 7B & 7C. Calendar Year 2020 meetings have been posted.



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

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

Contact Elizabeth Quaife at [Elizabeth.Quaife@state.co.us](mailto:Elizabeth.Quaife@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.

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## Hospital Transformation Program (HTP)

### 1115 Demonstration Application

The public comment period for the waiver component of the HTP ended on Sunday, December 15, 2019, at 5:00 p.m. MT. The Department would like to thank all stakeholders who attended a public hearing or submitted comments.

The next step in the application process is for the Department to review public comments and feedback. Based on feedback, the Department will create a report of the issues raised by the public during the comment period and how those comments were considered when developing the program application. The Department will then submit the report along with the application to the Centers of Medicare & Medicaid Services (CMS) on December 31, 2019.

### Community Advisory Council



The Community Advisory Council continues to meet on a monthly basis. Notes and agendas from meetings can be found on the [HTP Community Advisory Council web page](#). Questions about the council should be directed to the Community Advisory Council at [HCPF\\_HTPConsumer@state.co.us](mailto:HCPF_HTPConsumer@state.co.us).

Providers are encouraged to visit the [Colorado Hospital Transformation Program web page](#) and read past editions of the HTP Newsletter in the [online archives](#).

Contact Courtney Ronner, Hospital Relations and Communication Manager, at [Courtney.Ronner@state.co.us](mailto:Courtney.Ronner@state.co.us) or 303-866-2699 with any additional questions about the HTP.

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## Inpatient Hospital Providers

### Inpatient Hospital Review Program (IHRP) Materials

Additional materials for the IHRP can be found on the [Inpatient web page](#) of the [ColoradoPAR website](#). These materials include training, the [Inpatient eQSuite® User Guide](#), and information for entering IHRP Prior Authorization Requests (PARs). Visit the ColoradoPAR website regularly for updates and additions to the IHRP materials.

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### Inpatient Hospital Review Program (IHRP) Admission Date

Please ensure that the IHRP Admission Date entered on the IHRP Prior Authorization Request (PAR) submitted to eQHealth Solutions matches the admission date on the inpatient claim. If the admission date has changed and the PAR needs to be updated, a modification can be made through eQHealth Solutions. The

directions for changing the admission date can be found on the [Inpatient web page](#) of the [ColoradoPAR website](#).

Contact [hcpf\\_um@state.co.us](mailto:hcpf_um@state.co.us) or [hcpf\\_hospitalreview@state.co.us](mailto:hcpf_hospitalreview@state.co.us) with any questions regarding policy or eQHealth Solutions concerns.

## Immediate Post-Partum Long-Acting Reversible Contraception (IPP-LARC) "Carve-Out" From All Patient Refined-Diagnosis Related Group (APR-DRG) Payment Methodology

LARC devices are the most effective, easily reversible contraceptive methods available, providing long lasting (3 to 10 years, depending on device) protection from an unintended pregnancy. Health First Colorado covers all Food and Drug Administration (FDA) approved contraceptive methods including LARCs.

LARC devices (intrauterine devices [IUDs] and subdermal implants), when inserted immediately following a delivery, prior to hospital discharge, are currently reimbursed through the inpatient hospital APR-DRGs payment methodology for deliveries.

Effective January 1, 2020, (following final Centers for Medicare & Medicaid [CMS] State Plan Amendment [SPA] approval) IPP-LARC devices can be billed and paid separately from inpatient hospital delivery APR-DRG payment. The IPP-LARC device will be reimbursed separately at the lesser of the fee-for-service (FFS) fee schedule rate or the amount billed for this service.

When an IPP-LARC is provided in an inpatient setting following a delivery, **two** claim forms will need to be submitted to accurately capture and reimburse: 1) the obstetrical (OB) delivery event and 2) the LARC device itself.

### Billing Instructions

- 1) Both the **inpatient** and the **outpatient** claims need to be submitted simultaneously and the dates of service on both claims should match.
- 2) The inpatient claim will capture the obstetrics, labor and delivery and related hospital services and will be reimbursed based on the current APR-DRG payment methodology.
- 3) The outpatient claim will identify the LARC device for separate reimbursement and will be reimbursed based on current Fee-for-Service, Physician Fee Schedule rate.

### Inpatient Hospital Claim Form

1. At the **header level**, include the following information.

#### A) APR-DRG code

- 1) One of the following OB delivery APR-DRG codes is required:
  - a. 540, 542 or 560, and associated
  - b. severity of illness (SOI) score: (1 - 4 / Minor through Extreme)



#### B) ICD-10 Diagnosis Codes, either

- 1) Z30.430: Encounter for insertion of intrauterine contraceptive device or
- 2) Z30.018: Encounter for initial prescription of other contraceptives (use for contraceptive implant)

insertion)

C) ICD-10 Surgical Procedure Codes (PSC)

1) One of the PSC codes listed below is **required**:

- a. PSC codes for an IUD LARC insertion: 0UH90HZ, 0UH97HZ or 0UH98HZ
- b. PSC codes for implantable contraceptive device insertion: 0JHD0HZ, 0JHD3HZ, 0JHF0HZ or 0JHF3HZ

2) At the **detail level**, include the following information.

One LARC device HCPCS code: J7296, J7297, J7298, J7300, J7301 or J7307.

- a. LARC device's affiliated National Drug Code (NDC) number
- b. The FP modifier
  - i. The FP modifier indicates that the intent of this service is to prevent an unintended pregnancy.
  - ii. The family planning intent of this LARC service **must be** noted in the client's medical records.

**Outpatient Hospital Claim form**

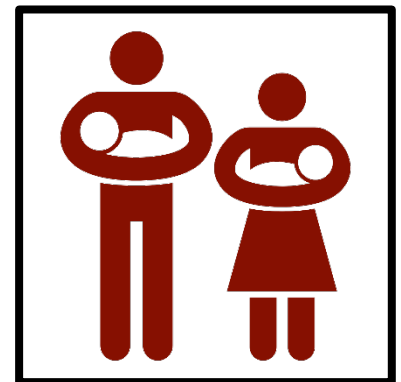
A) For IPP-LARC device separate reimbursement, providers should include **only** the LARC device HCPCS code on the outpatient claim.

**No other revenue codes or procedure codes** should be included on this outpatient claim.

Additionally, the **“SE” modifier is required** on the outpatient claim to accurately identify this specific FFS payment methodology. This IPP-LARC inpatient service does NOT pay utilizing the outpatient EAPG payment methodology.

B) The outpatient claim should include:

- a. one LARC Healthcare Common Procedure Coding System (HCPCS) code: J7296, J7297, J7298, J7300, J7301 or J7307,
- b. the affiliated LARC NDC number,
- c. the FP modifier,
- d. the SE modifier and
- e. list the dates of service comparable to the affiliated inpatient claim.



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



# Laboratory, Physician Services and Hospital Providers

## Genetic Testing Prior Authorization Requirement

In the near future, the Department will require prior authorizations for all codes within the range 81170 through 81599 as an ongoing response to concern from stakeholders regarding potentially inappropriate utilization.

More information and effective dates will be announced as they become available.

Refer to the [Laboratory and X-Ray rule \(10 CCR 2505-10 8.660\)](#) and the [Laboratory Billing Manual](#), available on the [Billing Manuals web page](#) under the CMS 1500 drop-down, for additional information about laboratory services.



Visit the [ColoradoPAR website](#) for more information, including training opportunities for utilizing eQSuite®, the specific codes requiring a prior authorization, and other provider resources.

Contact the ColoradoPAR Program at [co.pr@eqhs.org](mailto:co.pr@eqhs.org) or 888-801-9355 with any questions regarding the prior authorization process.

Contact [HCPF\\_UM@state.co.us](mailto:HCPF_UM@state.co.us) with any questions regarding the Utilization Management Program and Prior Authorization Requests.

Contact Raine Henry at [Raine.Henry@state.co.us](mailto:Raine.Henry@state.co.us) with any laboratory policy questions or concerns.

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## Pharmacy Providers

### Rx Review Program

A new cycle for the Rx Review Program is starting January 1, 2020. The Department is eager to expand the Rx Review Program to reach as many Health First Colorado members as possible. Applications are currently being accepted for pharmacists who have a strong dedication to medication therapy management and want to make a difference in the lives of members. Students may also participate in the Rx Review Program under direct supervision of a qualifying pharmacist. Below are the current reimbursement rates for Rx Review consultations:

- \$150 for Face-to-Face consultation
- \$90 for Telephone consultation

Any pharmacists interested in making a positive change within the Health First Colorado community, contact Shila Schrage at [Shila.Schrage@state.co.us](mailto:Shila.Schrage@state.co.us) for more information or to apply.



# Pharmacies and All Medication-Prescribing Providers

## Preferred Drug List (PDL) Announcement of Preferred Products

The following will be the preferred products for the PDL drug classes listed below effective January 1, 2020.

<b>Hepatitis C Virus Treatments</b>				
Epclusa	Harvoni	Mavyret	Ribavirin cap/tab	
<b>Antidepressants</b>				
Amitriptyline	Bupropion	Citalopram	Desvenlafaxine (generic Pristiq)	
Doxepin	Duloxetine DR Cap	Escitalopram	Fluoxetine cap/soln	Fluvoxamine IR
Imapramine HCL	Mirtazapine	Nortriptyline	Paroxetine	Sertraline
Trazodone	Venlafaxine IR		Venlafaxine ER caps	
<b>Antiemetics</b>				
Ondansetron		Transderm Scop		
<b>Epinephrine Products</b>				
Epinephrine autoinjector (generic EpiPen)				
<b>Targeted Immune Modulators</b>				
Cosentyx	Enbrel	Humira	Xeljanz IR	
<b>Antipsoriatics</b>				
Calcipotriene soln		Dovonex cream	Soriatane cap	Taclonex susp/oint
<b>Ulcerative Colitis Agents</b>				
Apriso	Lialda	Mesalamine suppository (generic Canasa)		
Pentasa	Sulfasalazine			
<b>Fluoroquinolones</b>				
Cipro susp	Ciprofloxacin susp	Ciprofloxacin tab	Levofloxacin tab	
<b>Antihyperuricemics</b>				
Allopurinol	Probenecid	Colchicine cap	Probenecid/Colchicine	
<b>NSAIDs (oral)</b>				
Celecoxib	Diclofenac Sodium EC/DR		Diclofenac Potassium	
Ibuprofen tab/susp		Indomethacin	Ketorolac tab	Meloxicam tab
Nabumetone	Naproxen IR/EC/DR/susp		Sulindac	
<b>NSAIDs (topical)</b>				
Diclofenac 1% gel		Diclofenac soln	Voltaren gel	
<b>Proton Pump Inhibitors</b>				
Esomeprazole Magnesium cap		Lansoprazole cap	Nexium packet	Omeprazole cap
Pantoprazole tab		Prevacid solutab		
<b>H. Pylori Treatments - No changes</b>				
<b>Pulmonary Arterial Hypertension Agents</b>				
Epoprostenol	Letairis	Orenitram	Sildenafil tab (generic Revatio)	
Tadalafil (generic Adcirca)		Tracleer 62.5mg/125mg	Ventavis	
<b>Pancreatic Enzymes</b>				
Creon	Zenpep			
<b>Antiplatelet Agents</b>				
Aggrenox	Brilinta	Cilostazol	Clopidogrel	Dipyridamole
Pentoxifylline	Prasugrel			

Antiherpetic Agents				
Acyclovir tab/cap/susp	Denavir	Valacyclovir	Zovirax cream/oint	
Tryptans				
Eletriptan	Naratriptan	Rizatriptan	Sumatriptan tab/vial	Zomig intranasal

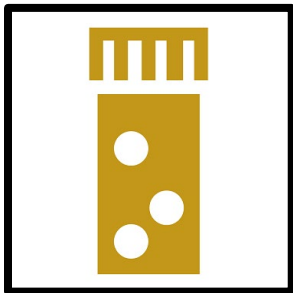
## Eligibility Criteria for Enbrel, Humira, Cosentyx or Xeljanz IR

Effective January 1, 2020, Humira or Enbrel may receive approval for use for Food and Drug Administration (FDA)-labeled indications.

**Cosentyx** may receive approval for FDA-labeled indications following trial and failure of Humira (failure is defined as lack of efficacy of a three-month trial, allergy, intolerable side effects or significant drug-drug interaction).

**Xeljanz IR** may receive approval for Ulcerative Colitis following trial and failure of Humira (failure is defined as lack of efficacy of a three-month trial, allergy, intolerable side effects or significant drug-drug interaction) OR other FDA indications without trial and failure.

### Diagnosis requirements for preferred products in targeted immunomodulators class:



FDA-labeled indication may be confirmed by ICD-10 diagnosis code in patient history via an automated prior authorization (AutoPA). FDA-labeled indication may also be confirmed by the Magellan Rx Management Pharmacy Call Center at 1- 800-424-5725 (manual prior authorization). ICD-10s will not be accepted on point-of-sale (POS) claims submissions.

Non-preferred products must meet class non-preferred criteria and additionally, may require product-specific approval criteria.

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

Tuesday, January 7, 2020

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

303 E 17th Ave Denver, CO 80203

11th Floor Conference Rooms 11A, 11B, 11C

The meeting agenda can be found on the [Pharmacy and Therapeutics \(P&T\) Committee web page](#) under the 2020 Meeting Schedule and Handouts drop-down section.

## Pharmacy & Therapeutics (P&T) Committee Open Positions

The P&T Committee has an opening for a Member Representative. The representative does not need to be a Health First Colorado member.

The member representative shall serve the remainder of a two-year term. Duties, membership and other term details can be found in the [Pharmacy & Therapeutics Committee Policies and Procedures Manual](#), located on the [Pharmacy and Therapeutics Committee web page](#) under the Our Members drop-down section.

Any interested parties can send a resume or CV along with a completed [Conflict of Interest Form](#) to Brittany Schock at [Brittany.Schock@state.co.us](mailto:Brittany.Schock@state.co.us), or mail to 1570 Grant Ave, Denver, CO 80203, or fax to 303-866-3590.

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## **Physician-Administered Drug (PAD) Providers**

### **Quarter 1 Rate Updates 2020**

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

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

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## **Provider Billing Training Sessions**

### **January and February 2020 Provider Billing 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 [UB-04 Beginning Billing Workshop](#) and [CMS 1500 Beginning Billing Workshop](#), available on the [Provider Training web page](#) under the Billing Training and Workshops drop-down section.

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



## January 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23 <a href="#">CMS 1500 Provider Workshop</a> 9:00 a.m. - 11:30 a.m. MT	24	25
26	27	28	29	30 <a href="#">UB-04 Provider Workshop</a> 9:00 a.m. - 11:30 a.m. MT		

## February 2020

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

**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. Do not

register via these links if planning to attend a training session in person at the DXC office (see instructions below for RSVPing to attend in person).

For questions or issues regarding webinar registration, email [co.training@dxc.com](mailto:co.training@dxc.com) with the subject line "Webinar Help." Include a description of the issue being experienced, name and contact information (email address and phone number), and the name and date of the webinar(s) to be attended. Allow up to 2-3 business days to receive a response.

### In-Person Training Registration

Providers who would like to attend a training session **in person** should RSVP to [co.training@dxc.com](mailto:co.training@dxc.com) by noon the day prior to the training, with the subject line "In-Person RSVP." Please include attendee name(s), organization, contact information (email address and phone number), and the name and date of the training session(s) to be attended. Allow up to 2-3 business days to receive a confirmation for in-person training reservations. Do not send an RSVP via email unless planning on attending **in person**.

In-person training sessions will be held at the following address:

DXC Technology Office  
Civic Center Plaza  
1560 Broadway St, Suite 600  
Denver, CO 80202

### Parking and Transportation

Free parking is not provided, and parking is limited in the downtown Denver area. Commercial parking lots are available throughout the downtown area. The daily rates range between \$5 and \$20. Carpooling and early arrival are recommended to secure parking. Whenever possible, public transportation is also recommended. Some forms of public transportation include the [Light Rail](#) and [Free MallRide](#).

## Upcoming Holidays

Holiday	Closed Offices/Offices Open for Business
<b>New Year's Day</b> Wednesday, January 1	State Offices, DentaQuest, DXC and the ColoradoPAR Program will be closed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.
<b>Martin Luther King, Jr. Day</b> Monday, January 20	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 DXC will be open.
<b>Presidents Day</b> Monday, February 17	State Offices, DentaQuest, DXC and the ColoradoPAR Program will be closed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.

## **DXC Contacts**

### **DXC Office**

Civic Center Plaza  
1560 Broadway St, Suite 600  
Denver, CO 80202

### **Provider Services Call Center**

1-844-235-2387

### **DXC Mailing Address**

P.O. Box 30  
Denver, CO 80201