

All Providers

- 1 Did You Know? Delegates and the Provider Web Portal
- 2 Deficit Reduction Act of 2005 due November 1, 2021
- 2 Member Testimonial

Durable Medical Equipment Prosthetics, Orthotics and Supplies (DMEPOS)

- 2 Procedure Code S1040 Cranial Remolding Orthosis
- 3 Billing Manual Updates

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

- 3 Senate Bill (SB) 19-238 Reporting Timelines for Fiscal Year (FY) 2020-2021: Provider Web Portal Ready for Reporting
- 4 New Procedure Codes for Regional Center Billing for Members with the Developmental Disabilities (DD) Waiver

Home Health Providers

- 5 Group Rate Billing for Private Duty Nursing (PDN)

Hospice Providers

- 5 Billing Manual Updates
- 6 Rate Update Effective October 1, 2021

Hospital Providers

- 6 General Updates

Hospitals, Freestanding Birth Centers, Physician Services, Clinics, Women's Services

- 7 The Emergent Add-A-Baby Request Process

Immunization Providers

- 8 2021 Flu Vaccine Code Update

Providers Who Utilize the Colorado PAR Program

- 9 Account Deactivation

Pharmacies and All Medication-Prescribing Providers

- 9 Drug Utilization Review
- 9 Health First Colorado Announcement of Preferred Products
- 14 Pharmacy and Therapeutics (P&T) Committee Meeting

Pharmacies and Physician Services

- 14 Pharmacy & Therapeutics (P&T) Committee Open Positions

Pharmacy Providers

- 15 COVID-19 Vaccine
- 15 Total Annual Prescription Volume (TAPV) Reminder COVID-19 Vaccines

Physician-Administered Drugs (PADs) Providers

- 16 Prior Authorization Update
- 18 Quarter 4 Rate Update 2021

Private Duty Nursing (PDN) and Pediatric Long-Term Home Health (PLTHH) Providers

- 18 Prior Authorization Request (PAR) Requirement Re-start Delay

Residential Child Care Facility (RCCF) Providers

- 20 Enrollment for New Program

Substance Use Disorder (SUD) Treatment Providers

- 20 Bed Count Updates

Provider Billing Training Sessions

- 21 October and November 2021 Provider Billing Webinar-Only Training Sessions

Did You Know?

Providers may grant some users limited access to the [Provider Web Portal](#) for specific functions. Support staff or third-party vendors contracted by the provider can be set up as delegates to perform certain functions on the provider's behalf, such as verifying claim status or retrieving remittance advice.

Only the administrative account gives a user full access to the functionality available within the Provider Web Portal.

Visit the [Delegates Provider Web Portal Quick Guide web page](#) for more information on adding, linking or managing delegates.

All Providers

Deficit Reduction Act of 2005 due November 1, 2021

Section 6032 of the Deficit Reduction Act of 2005 (DRA) requires providers who meet the definition of entity and who make or receive annual Medicaid payments of \$5 million or more to establish and disseminate certain written policies for preventing and detecting fraud, waste and abuse. The entities must also provide information to employees and contractors about the Federal False Claims Act and other applicable federal and state false claims laws, the administrative remedies for false claims and statements, and the “whistleblower” protections afforded under such laws.

For Federal Fiscal Year 2021 (FFY2021) providers who are subject to Section 6032 must submit the [DRA Declaration FFY2021 form](#). The completed DRA Declaration must be emailed to hcpf_draact2005@state.co.us no later than November 1, 2021.

Contact Eileen Sandoval at hcpf_draact2005@state.co.us with questions related to the DRA.

Member Testimonial

Health First Colorado (Colorado’s Medicaid program) providers help people across Colorado-View [Samantha's Story](#).

Samantha was diagnosed with multiple rare diseases and needed help. Health First Colorado found doctors that treated her with dignity and respect. Now she looks forward to each day. Share Samantha's video via social media networks by using the [Social Media Toolkit](#).

Contact Sarah Eaton at Sarah.Eaton@state.co.us or feedback@healthfirstcolorado.com with questions about the toolkit.

Durable Medical Equipment Prosthetics, Orthotics and Supplies (DMEPOS)

Procedure Code S1040 Cranial Remolding Orthosis

Effective July 1, 2021, the rate for procedure code S1040 was reduced. The rebalancing of this procedure code was identified through the Prosthetics, Orthotics and Supplies recommendation in the [2020 Medicaid Provider Rate Review Recommendation Report](#). This code did not have a Medicare benchmark and was rebalanced against Ohio, Oregon, and Texas rates; no rates for this procedure code were available from other comparison states used in the [2020 Medicaid Provider Rate Review Analysis Report](#) (Arizona, California, Louisiana, and Oklahoma). Once reviewed, this code was part of a budget request to rebalance to the Medicare benchmark for each code. The rebalance for this code was unique and has been

retroactively determined to have been inappropriate based on provider feedback and impacts to access to care.

Effective September 3, 2021, the rate was reverted to the original rate prior to the July 1, 2021, reduction. Claims paid since July 1, 2021, were reprocessed September 3, 2021. Claims not reimbursed correctly based on this update will need to be manually adjusted via the Provider Web Portal.

A rate-setting project is being completed to determine what the appropriate rate for Cranial Remolding Orthosis should be. Stakeholders will have an opportunity to provide feedback on the proposed rate and rate setting methodology via public engagement to further inform the Department's rate setting methodology and final rate prior to its implementation.

Contact Haylee Rodgers at Haylee.Rodgers@state.co.us for more information.

Billing Manual Updates

The Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Billing Manual has been updated with the following:

- Continuous Glucose Monitor (CGM) policy has been revised.
- RELiZORB is being covered for children under EPSDT using B4105 and is manually priced.
- The temporary policy for Peristeen has been included.

Visit the [Durable Medical Equipment, Prosthetics, Orthotics, and Supplies \(DMEPOS\) billing manual web page](#) for details and other edits.



Contact Haylee Rodgers at Haylee.Rodgers@state.co.us with questions or concerns.

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

Senate Bill (SB) 19-238 Reporting Timelines for Fiscal Year (FY) 2020-2021: Provider Web Portal Ready for Reporting

[SB 19-238](#) requires the Department of Health Care Policy & Financing (the Department) to implement an 8.1% increase in the reimbursement rate for certain HCBS benefits provided to individuals receiving Homemaker Basic, Homemaker Enhanced, Personal Care, and In-Home Support Services. The legislation requires that 100% of the increase for fiscal year (FY) 2020-2021 be passed through to direct care workers. Reporting for FY 2020-2021 must be done in the [Provider Web Portal](#) between October 1, 2021, and December 31, 2021.

Effective October 1, 2021, providers may begin reporting on the FY 2020-2021 information. Impacted providers will need to log in to the Provider Web Portal in order to submit their information. Once logged in, providers that are required to submit information will be able to access a “Senate Bill (SB) 19-238” link located under the “Provider Services” tab on the Provider Web Portal home page. This link will **only** appear if an agency is required to comply based on their enrollment profile.

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

Contact the [Provider Services Call Center](#) at 1-844-235-2387 with questions about the functionality of the Provider Web Portal.

Contact the Department’s Wage Pass Through email inbox at hcpf_wage_pass_through@state.co.us with questions about complying with the legislative mandate of SB 19-238 or information on what to provide in the report.

New Procedure Codes for Regional Center Billing for Members with the Developmental Disabilities (DD) Waiver

Effective November 1, 2021, the following procedure code/modifier codes will be used for Residential Habilitation, Specialized Habilitation, and Supported Community Connections when provided by either the Pueblo Regional Center or Grand Junction Regional Center to individuals enrolled in the Home and Community Based Services Waiver for Persons with Developmental Disabilities (HCBS-DD). The provider-specific procedure code and modifiers are listed below.

Grand Junction Regional Center	
ResHab GRSS - GJRC	T2016 U3 SC HQ HI
SpecHab Tier 2 - Level 7 - GJRC	T2021 U3 SC HQ HI
SCC Tier 2 - Level 7 - GJRC	T2021 U3 SC HI

Pueblo Regional Center	
ResHab GRSS - PRC	T2016 U3 SC HQ HB
SpecHab Tier 2 - Level 7 -PRC	T2021 U3 SC HQ HB
SCC Tier 2 - Level 7 - PRC	T2021 U3 SC HB

Community Centered Board Case Managers must revise all prior authorization requests (PARs) in the Bridge for members receiving services from Regional Centers to reflect the Regional Center-specific services between October 1, 2021, and October 31, 2021, in advance of this change. All current Regional Center Level 7 overrides will be end-dated effective October 31, 2021.

The Regional Center-specific procedure code/modifier sets are contained in the [Home and Community Based Services for Persons with Intellectual and/or Developmental Disabilities](#)

[billing manual](#), which can be found on the [Billing Manuals web page](#) under the HCBS drop-down, and on the [Provider Rates and Fee Schedules web page](#) under [HCBS Rate Schedule](#).

For more information, refer to [Operational Memo OM 21-065](#).

Contact Lydia Beals at Lydia.Beals@state.co.us with questions.

Home Health Providers

Group Rate Billing for Private Duty Nursing (PDN)

Skilled nursing services under private duty nursing (PDN) shall be reimbursed in units of one hour, at the provider's usual and customary charge or the maximum Medicaid allowable rates established by the Department, whichever is less, per 10 CCR 2505- 10, Section 8.540.8.E. Units of one hour may be billed for registered nurse (RN), licensed practical nurse (LPN), RN group rate (registered nurse providing PDN to more than one member at the same time in the same setting), LPN group rate (licensed practical nurse providing PDN to more than one client at the same time in the same setting) or blended RN/LPN rate (group rate by request of the home health agency only).



Home health providers are reminded to use applicable group codes when an RN or LPN in their employ is serving more than one member at the same time in the same setting, regardless of whether a home health provider has only one member in their care for purposes of billing.

Claims which are found to be inconsistent with this policy may be subject to recovery. If a provider believes they have violated this policy, they may contact the Department's Program Integrity unit to begin the process of self-disclosure. For more information, visit the [Provider Self-Disclosure web page](#).

Contact Matthew Colussi at Matthew.Colussi@state.co.us for any questions regarding this policy.

Hospice Providers

Billing Manual Updates

Notification of Payment availability to Licensed Hospice Facilities for Residential Care

[Senate Bill \(SB\) 21-214](#) created a limited fund (\$684,000) for State Payments to Licensed Hospice Facilities for Residential Care. Separate invoicing for these services is required to accommodate the specific nature of this funding. Providers and members must meet eligibility requirements as set forth in SB 21-214 and services must be provided between April

1, 2021, and June 30, 2022. Visit the [Hospice Billing Manual web page](#) for more information and invoicing instructions.

Update to Electronic Visit Verification (EVV)

Hospice providers are reminded that in-home hospice services are encouraged to utilize Electronic Visit Verification (EVV). Live-in Caregiver billing methodology is discontinued for hospice services. Email evv@state.co.us with questions regarding EVV.

Rate Update Effective October 1, 2021

Hospice rates effective October 1, 2021- September 30, 2022, will be updated once guidance and approval from the Centers for Medicare and Medicaid Services (CMS) is received. Reimbursement should reflect updated rates for all claims billed for dates of service on or after October 1, 2021.

The Hospice Fee Schedule effective October 1, 2021 - September 30, 2022, will be posted to the [Provider Rates and Fee Schedule web page](#) under the [Hospice](#) section upon implementation of the rates.

Contact Marli Firillo at Marli.Firillo@state.co.us for additional support or questions regarding rates.

Hospital Providers

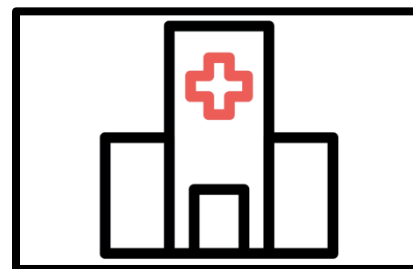
General Updates

All Hospital Providers

Hospital Stakeholder Engagement Meetings

Bi-monthly Hospital Stakeholder Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing. [Sign up to receive the Hospital Stakeholder Engagement Meeting newsletters.](#)

- The All-Hospital Engagement meeting is scheduled for [Friday, November 5, 2021, from 9:00 a.m. - 12:00 p.m. MT](#) and will be hosted virtually.



Visit the [Hospital Stakeholder Engagement Meeting web page](#) for more details, meeting schedules and past meeting materials. **Calendar Year 2021 meetings have been posted.**

Outpatient Hospital Drug Re-Weight Implementation

The drug re-weight project impacting outpatient hospital payment using the Enhanced Ambulatory Patient Grouping (EAPG) methodology has been implemented into the Colorado interChange. The effective date of this payment policy applies to outpatient hospital claims

beginning on or after June 1, 2020. Adjustments for impacted claims will be completed during the first few weeks of October 2021.

For information regarding the drug re-weight project, see the meeting notes contained on the [Hospital Stakeholder Engagement Meeting web page](#). Contact Andrew Abalos at Andrew.Abalos@state.co.us and Tyler Samora at Tyler.Samora@state.co.us with any questions regarding this payment policy or the adjustment status for any impacted claims.

Rural Health Clinics

Bi-monthly Rural Health Clinic Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing.

- The next Rural Health Clinic Engagement meeting is scheduled for [Thursday, November 4, 2021, from 12:30 p.m. to 1:30 p.m. MT](#) and will be hosted virtually on Zoom.

Visit the [Rural Health Clinic Engagement Meeting web page](#) for more details, meeting schedules and past meeting materials. **Calendar Year 2021 meetings have been posted.**

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

Hospitals, Freestanding Birth Centers, Physician Services, Clinics, Women's Services

The Emergent Add-A-Baby Request Process

The Add-A-Baby process was implemented to offer medical providers an alternative way to add a needy newborn(s) to an eligible mother's medical assistance case **only** if the need is for intensive medical care. Mothers need to be eligible for medical assistance at the time of the baby's birth for an emergent request.

The Department accepts and processes emergent requests from medical providers for newborns that need intensive medical care for:

- Border
- Synagis®
- Neonatal Intensive Care Unit (NICU)

Emergent requests can only be submitted through the [Health First Colorado Add-A-Baby Emergent Request Form](#). *This link is for medical providers only. Requests submitted by non-medical providers or by the parent will not be processed.*

PLEASE NOTE: Do not fax the outdated Medicaid Add-A-Baby Request Form, as it is outdated and will not be processed.

Helpful Tips for Providers:

- Before submitting a request, verify with the parent(s) that they have not submitted newborn information to the county or through PEAK or Health First Colorado App to add the baby.
- Let the parent(s) know a request has been submitted to add the newborn and not to add the newborn again through PEAK or Health First Colorado App or through the county.
- If a request has already been submitted by the parent to the county or through PEAK or the Health First Colorado App, **do not** submit another emergent request. Submitting another request will cause a delay in approval of benefits and a delay of provider payments.
- Make sure to review the request form for accuracy before submitting the request.
- Do not use this form to get a member ID for the newborn. Providers can get the member ID through the [Provider Web Portal](#).
- Providers can verify a newborn's eligibility through the Provider Web Portal. Providers can search with two of the following: name, Social Security Number (SSN), Date of Birth (DOB). This information can be found on the Eligibility verification section in the Provider Web Portal (see [Verifying Member Eligibility Quick Guide web page](#)).



Non-Emergent Requests

It is requested that providers work directly with the parent's county Department of Human Services or Medical Assistance (MA) sites when a request is needed to add non-emergent newborns for mothers eligible for medical assistance. Parents can also contact their county department of human services or can add the newborn through [PEAK](#) or the [Health First Colorado App](#).

Email hcpf_add-a-baby@state.co.us for more information on how to submit an Emergent Add-A-Baby Request.

Immunization Providers

2021 Flu Vaccine Code Update

Code 90694 was updated to add places of service, rendering provider types and billing provider types such as Clinic, Rural Health Clinic and Indian Health Services. The effective date is September 20, 2020.

For code 90685, the age range is now 6 months of age and older. The code also now allows administration in the pharmacy for members 19 years or older. The effective date is August 1, 2021.

Code 90756 extended the age range down to age 2. Effective date is August 1, 2021.

Code 90672 extended the age range down to age 2. Effective date is August 1, 2021.

All affected claims will be reprocessed.

Contact Christina Winship at Christina.Winship@state.co.us with any questions.

Providers Who Utilize the ColoradoPAR Program

Account Deactivation

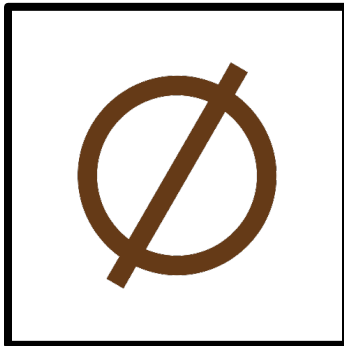
Atrezzo will deactivate a provider's user account if the account has not been used in the past ninety (90) days for security purposes. Keystone Peer Review Organization (Kepro) is currently working on developing an email alert that will be sent to the Atrezzo user's registered email address warning that their account is about to be deactivated due to no activity. The notice of account deactivation will occur when the provider attempts to login to the Atrezzo account.

Contact Kepro's customer service 1-720-689-6340 or email coproviderissue@kepro.com to reactivate Atrezzo accounts.

Pharmacies and All Medication-Prescribing Providers

Drug Utilization Review

Ivermectin Is Not Covered for Treatment or Prevention of COVID-19



The FDA has not authorized or approved use of the medication ivermectin for preventing or treating COVID-19 infection in humans, and there is currently no emergency use authorization from the FDA for ivermectin use for this indication. Ivermectin is not covered for Health First Colorado members when used for preventing or treating infection caused by COVID-19.

Visit the [Pharmacy Resources web page](#) for additional information regarding medication coverage for the Health First Colorado pharmacy benefit.

Health First Colorado Announcement of Preferred Products

The following drug classes and preferred agents will become effective October 1, 2021.

Anticonvulsants, Oral

Preferred products: Carbamazepine (all generic formulations with exception of suspension), Carbatrol ER, Clobazam tablet, Clonazepam, Depakote sprinkle/tablet, Dilantin 30 mg capsules, Dilantin suspension (BNR), Divalproex, Ethosuximide, Felbatol (BNR), Lamictal

dispersible tablet, Lamotrigine IR tablet/chewable/dispersible tablet, Levetiracetam, Oxcarbazepine, Phenobarbital, Phenytek, Phenytoin, Primidone, Tegretol suspension (BNR), Tegretol tablet, Tegretol XR tablet, Topamax sprinkle capsule, Topiramate IR tablet/sprinkle capsule, Trileptal suspension, Valproic Acid, Zonisamide

Stimulants and Other ADHD Agents

Preferred products: Adderall XR (BNR), Amphetamine Salts IR, Armodafinil, Atomoxetine, Concerta (BNR), Dexmethylphenidate ER/IR, Guanfacine ER, Methylphenidate IR (generic Ritalin IR), Modafinil, Vyvanse capsule

Bone Resorption Suppression & Related Agents

Preferred products: Alendronate solution/tablets, Ibandronate tablet

Estrogen Agents, Injectable

Preferred products: Delestrogen (BNR), Depo-Estradiol

Estrogen Agents, Oral/Transdermal

Preferred products: Climara (BNR), Estradiol tablet, Minivelle (BNR), Vivelle-Dot (BNR)

Diabetes Management Agents - Amylin

Preferred products: No preferred products

Diabetes Management Agents - Biguanides

Preferred products: Metformin 500mg, 850mg, 1000mg tablets, Metformin ER tablet (generic Glucophage XR)

Diabetes Management Agents - DPP4 Inhibitors & Combinations

Preferred products: Janumet, Janumet XR, Januvia, Tradjenta

Diabetes Management Agents - GLP-1 Analogues

Preferred products: Byetta, Trulicity, Victoza

Diabetes Management Agents - Hypoglycemic Combinations, Other

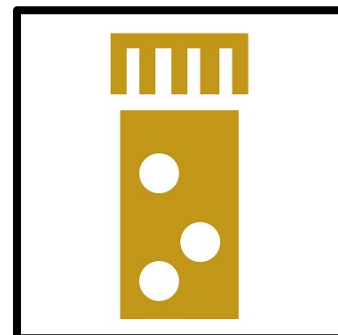
No preferred products

Diabetes Management Agents - Insulins

Preferred products: Humalog 100 U/mL cartridge/pen/vial, Humalog Junior, Humalog Mix, Humulin N/R vial (OTC), Humulin U-500 pen/vial, Humulin 70/30 (OTC), Lantus, Levemir, Novolog cartridge/pen/vial, Novolog Mix, Novolin N/R pen

Diabetes Management Agents - Meglitinides & Combinations

Preferred products: No preferred products



Diabetes Management Agents - SGLT-2 Inhibitors & Combinations

Preferred products: Farxiga, Invokamet, Invokamet XR, Invokana, Jardiance, Xigduo XR

Diabetes Management Agents - Thiazolidinediones (TZDs) & Combinations

Preferred products: Pioglitazone

Glucagon, Self-Administered

Preferred products: Glucagen Kit, Glucagon Kit (*NovoNordisk & Eli Lilly only*), Gvoke

GI Motility Agents, Chronic

Preferred products: Amitiza (BNR), Linzess, Movantik

Anticoagulants - Oral & Parenteral

Preferred products: Eliquis, Enoxaparin, Pradaxa, Warfarin, Xarelto 10mg, 15mg, 20mg and dose pack

Antiplatelet Agents

Preferred products: Aspirin/Dipyridamole, Brilinta, Cilostazol, Clopidogrel, Dipyridamole, Pentoxifylline, Prasugrel

Colony Stimulating Factors

Preferred products: Neupogen vial/syringe, Udenyca, Ziextenzo

Erythropoiesis Stimulating Agents

Preferred products: Retacrit (Pfizer only)

Newer Hereditary Angioedema Agents

Preferred products: Berinert, Haegarda, Icatibant

Ophthalmic Immunomodulators

Preferred products: Restasis unit dose

Overactive Bladder Agents

Preferred products: Gelnique gel packets, Myrbetriq, Oxybutynin, Solifenacin, Toviaz

Prenatal Vitamins

Preferred products: Complete Natal DHA tablet, M-Natal Plus tablet, Nestabs tablet, PNV 29-1 tablet, Prenatal Vitamin Plus Low Iron tablet, Preplus CA-FE 27 MG - FA 1mg tablet, SE-Natal 19 chewable tablet, Thrivite Rx tablet, Trinatal Rx 1 tablet, Vitafol gummies, VP-PNV-DHA softgel, Westab Plus tablet

Contraceptives, Topical

Preferred products: Annovera, Nuvaring (BNR), Xulane



Oral Contraceptive

Monophasic 28				
Altavera 28 0.15-30	Apri 28 0.15-30	Aubra 28 0.1-20	Aubra EQ-28 0.1-20	Aviane 28 0.1-20
Balziva 28 0.4-35	Cryselle 28 0.3-30	Cyclafem 28 1-35	Dasetta 28 1-35	Drospirenone-Eth Estradiol 28 0.3-30
Drospirenone-Eth Estradiol-Levomefolate 28 3-20	Drospirenone-Eth Estradiol-Levomefolate 28 3-30	Elinest 28 0.3-30	Enskyce 28 0.15-30	Estarylla 28 0.25-35
Ethinodiol-Eth Estra 28 1-50	Falmina 28 0.1-20	Femynor 28 0.25-35	Isibloom 28 0.15-30	Juleber 28 0.15-30
Kelnor 28 1-35	Kurvelo 28 0.15-30	Larissia 28 0.1-20	Lessina 28 0.1-20	Levonor-Eth Estrad 28 0.1-20
Levonor-Eth Estrad 28 0.15-30	Levora 28 0.15-30	Lillow 28 0.15-30	Low-Ogestrel 28 0.3-30	Lutera 28 0.1-20
Marlissa 28 0.15-30	Mili 28 0.25-35	Mono-Linyah 28 0.25-35	Necon 28 0.5-35	Norg-Ethin Estra 28 0.25-35
Nortrel 28 0.5-35	Nortrel 28 1-35	Ocella 28 3-30	Orsythia 28 1-20	Philith 28 0.4-35
Pirmella 28 1-35	Portia 28 0.15-30	Previfem 28 0.25-35	Sprintec 28 0.25-35	Sronyx 28 0.1-20
Syeda 28 3-30	Vienva 28 0.1-20	Vyfemla 28 0.4-35	Wera 28 0.5-35	
Monphasic 21				
Junel 21 1-20	Junel 21 1.5-30	Larin 21 1-20		
Larin 21 1.5-30	Norethind-Eth Estrad 21 1-20	Nortrel 21 1-35		
Biphasic				
Azurette 28	Bekyree 28	Cyred 28		
Desogest-Eth Estra 28	Emoquette 28	Kariva 28		
Lo Loestrin FE 28 1-10	Mircette 28	Viorele 28		

Triphasic			
Alyacen 7-7-7 28	Caziant 7-7-7 28	Cyclafem 7-7-7 28	Dasetta 7-7-7 28
Enpresse 28	Levonest 28	Levonor-Eth Estrad Triphasic 28	Norgestimate-Eth Estrad 0.18-0.215-0.25/0.025 & 0.035
Nortrel Triphasic 28	Pirmella 7-7-7	Tri-Estarylla 28	Tri Femynor 28
Tri-Linyah 28	Tri-Lo-Estarylla 28	Tri-Lo-Marzia 28	Tri-Lo-Mili 28
Tri-Lo-Sprintec 28	Tri-Sprintec 28	Tri-Vylibra Lo 28	Velivet 7-7-7 28

Extended Cycle		
Amethia 91 0.03 - 0.15 - 0.01	Ashlyna 91 0.15-10-30	Iclevia 91 0.15-30
Introvale 91 0.15-30	Jolessa 91 0.15-30	Levonorgest-Eth Estrad 91 0.1-10-20
Levonorgest-Eth Estrad 91 0.15-0.03	Levonorgest-Eth Estrad 91 0.15-0.03-0.01	Setlakin 91 0.15-30

Continuous Cycle				
Aurovela FE 1-20	Aurovela FE 1.5-30	Blisovi FE 1-20	Blisovi FE 1.5-30	
Camrese Lo 1-20	Gianvi 3-20	Hailey 1.5-30	Hailey FE 1-20	
Jasmiel 3-20	Junel FE 1-20	Junel FE 1.5-30	Junel FE 24 1-20	
Larin FE 1-20	Larin FE 24 1-20	Larin FE 1.5-30	LoJaimiess 1-20	
Loryna 3-20	Microgestin FE 1-20	Nikki 3-20	Noreth-Eth Estrad-FE 24 1-20	
Noreth-Eth Estrad-FE 1-20	Tarina FE 24 1-20	Tarina FE 1-20	Tarina FE 1-20 EQ	
Norethindrone Only				
Camila 28 0.35	Deblitane 28 0.35	Errin 28 0.35	Heather 28 0.35	Jencycla 28 0.35
Jolivette 28 0.35	Lyza 28 0.35	Norethindrone 28 0.35	Norlyda 28 0.35	Sharobel 28 0.35

Prescription Contraceptive Products 12-Month Supply: Initial fills of oral, patch and vaginal ring contraceptive products may be dispensed for up to a three-month supply to establish tolerance (lack of adverse events). If the prescribed medication is tolerated for at least three months of therapy, subsequent fills of that medication will be eligible to be filled for up to a twelve-month supply.

Prior authorization criteria for non-preferred medications can be found on the [Health First Colorado preferred drug list](#). Contact the Magellan Rx Management Pharmacy Call Center at 1-800-424-5725 for questions regarding rejected claims or prior authorization

Pharmacy and Therapeutics (P&T) Committee Meeting

Tuesday, October 5, 2021

1:00-5:00 p.m. MT. (to be held virtually online)

Agenda and meeting information can be found at the [Pharmacy & Therapeutics \(P&T\) Committee web page](#).

Pharmacies and Physician Services

Pharmacy & Therapeutics (P&T) Committee Open Positions



Applicants are being accepted for the following two open positions for the P&T Committee member term ending in December 2022:

- One physician who specializes in the practice of psychiatry
- One physician who specializes in the treatment of members with disabilities

Applicants are being accepted for the following six open positions for the P&T Committee member terms January 2022- December 2023:

- Pharmacist (2 positions)
- Specialty Physician (3 positions)
- Member Representative (1 position)

The actively practicing pharmacist, physician, or member representative shall serve two-year terms. Duties, membership and other term details can be found in the P&T Committee Policies and Procedures, accessible under “Our Members” on the [Pharmacy and Therapeutics \(P&T\) Committee web page](#).

If interested in serving or know someone who would be qualified, please submit/have them submit a CV along with a completed [Conflict of Interest form](#) by October 22, 2021, to:

Colorado Department of Health Care Policy and Financing
Attn: Brittany Schock, PharmD
Fax to 303-866-3590 or email Brittany.Schock@state.co.us

A CV is not required for the member representative position. A resume (or similar document) is acceptable.

Pharmacy Providers

COVID-19 Vaccine

Health First Colorado would like to partner with pharmacies to recommend the COVID-19 vaccine to all unvaccinated Health First Colorado members ages 12 and older. Effective September 15, 2021, pharmacies may receive a message on paid or denied claims for unvaccinated members, aged 12 and older, asking pharmacies to please encourage this member to receive the COVID vaccine and administer now if possible.



Refer to the [Pharmacy Resources web page](#), [Pharmacist Immunization and OTC Prescriptive Authority section](#) for information on medical billing and how to become an enrolled pharmacist provider with Health First Colorado.

Contact the Magellan Rx Management Pharmacy Call Center at 1-800-424-5725 with questions regarding this COVID transactional message.

Total Annual Prescription Volume (TAPV) Reminder COVID-19 Vaccines

Myers and Stauffer has been contracted to conduct the TAPV survey of pharmacy providers. The prescription volume information submitted by most pharmacy types will be used to determine their dispensing fee for the 2022 calendar year.

- Pharmacies which meet the regulatory definition of a government or rural pharmacy will have their dispensing fee determined by their pharmacy type and will not be included in the TAPV surveying process (per 10CCR 2505-10, Sections 8.800.1 and 8.800.13).
- COVID-19 vaccinations may be excluded from the TAPV count, per guidance received from the Centers for Medicare and Medicaid Services (CMS). This exclusion will be granted for the September 1, 2020, through August 31, 2021, reporting volume timeframe **only**.

Myers and Stauffer will distribute the surveys to pharmacy providers starting October 1, 2021, and completed surveys must be returned to Myers and Stauffer by October 31, 2021.

Pharmacy providers (other than government or rural pharmacies) which do not participate in the prescription volume survey will be placed in the lowest dispensing fee tier of \$9.31.

Completed surveys can be submitted to Myers and Stauffer via email at pharmacy@mslc.com, postal mail at 800 E. 96th Street, Suite 200, Indianapolis, IN 46240, or fax at (317) 566-3203. If a survey request is not received and the location does not qualify as a rural or government pharmacy, please contact the Myers and Stauffer Pharmacy Help Desk at 800-591-1183 or at pharmacy@mslc.com to request a survey form.

Total Annual Prescription Volume	Dispensing Fee
0 - 59,999 TAPV	\$13.40
60,000 - 89,999 TAPV	\$11.49
90,000 - 109,999 TAPV	\$10.25
110,000+ TAPV	\$9.31
Rural Pharmacy	\$14.14
Government Pharmacy	\$0.00

Contact Kristina Gould at Kristina.Gould@state.co.us for any questions related to this guidance.

Physician-Administered Drugs (PADs) Providers

Prior Authorization Update

A select number of physician-administered drugs (PADs), listed below, will be subject to prior authorization requirements, no earlier than **December 1, 2021**. When a specific implementation date is known, an appropriate amount of resources and time for proper messaging and training will be allotted.

After implementation, providers should ensure that any Health First Colorado member due to receive any of the following PADs have an approved prior authorization on file prior to administration.

Drug Class	HCPCS	Drug Name
Bone Resorption Inhibitor Agents	J0897	Prolia
		Xgeva
Immune Globulin Agents	J1459	Privigen
	J1556	Bivigam

Drug Class	HCPCS	Drug Name
	J1557	Gammaplex
	J1561	Gammaked
		Gamunex
		Gamunex-C
	J1566	Gammagard S/D
	J1568	Octagam 5%, 10%
	J1569	Gammagard Liquid
	J1572	Flebogamma DIF
	J1599	Asceniv
		Panzyga
Monoclonal Antibody Agents	J0517	Fasenra
	J1300	Soliris
	J1745	Remicade
	J2182	Nucala
	J2357	Xolair
	J2786	Cinqair
	J3380	Entyvio
Multiple Sclerosis Agents	J2323	Tysabri
	J2350	Ocrevus
Neuromuscular Agents	J0585	Botox
	J0586	Dysport
	J0587	Myobloc
	J0588	Xeomin

All PAD prior authorization procedures and clinical criteria will be found on Appendix Y: Physician Administered Drug Medical Benefit Prior Authorization Procedures and Criteria when a specific date of implementation is available.

Keystone Peer Review Organization (Kepro) will offer various training sessions to providers within the coming months. Additional information will be sent via email, newsletters and monthly provider bulletins and posted to the [ColoradoPAR: Health First Colorado Prior](#)

[Authorization Request Program](#) and [Physician Administered Drug Provider Resources](#) web page.

All other PAD questions can be directed to HCPCS_PAD@state.co.us.

Quarter 4 Rate Update 2021



The Physician-Administered Drugs (PAD) rates for the fourth quarter of 2021 have been updated. The new rates are effective October 1, 2021, and are posted to the [Provider Rates and Fee Schedule web page](#) under the [Physician Administered Drug Fee Schedule section](#).

Contact Tyler Collinson at Tyler.Collinson@state.co.us with any questions about PAD rates.

Private Duty Nursing (PDN) and Pediatric Long-Term Home Health (PLTHH) Providers

Prior Authorization Request (PAR) Requirement Re-start Delay

[Prior authorization request \(PAR\) requirements were suspended](#) for private duty nursing (PDN) and pediatric long-term home health (PLTHH) on July 1, 2020. It had previously been communicated that the PAR requirements would resume on September 1, 2021. PAR submission will not resume until November 1, 2021.

Effective November 1, 2021, providers will be required to submit PARs to the new utilization management (UM) vendor Kepro via the online PAR portal, Atrezzo. A phased-in approach of at least six months has been agreed upon but a longer phased-in implementation is currently being evaluated. Providers will be responsible for submitting a percentage of their PARs throughout the month for each phase of implementation, and providers will be responsible for deciding how to organize PAR submissions. Additional guidance regarding the implementation plan and timeline will be provided via the provider bulletin, the [PDN/PLTHH Project web page](#) and the [ColoradoPAR Program web page](#).

The Department will:

- Issue a 60-day administrative approval prior to any denial going into effect
- Issue continuation of benefits for any member appeal as normal
- Step down process for PDN denial that reduce services by 30% or more will continue as normal
- Send weekly reports to Regional Accountable Entities (RAEs) of any denials to allow for care coordination

Please note: While the Utilization Management vendor has changed, the policy for these two benefits remained unchanged. Providers are required to submit the Pediatric Assessment tool for PLTHH PARs, and the PDN Acuity Tool for PDN PARs.

Provider Training

Recorded benefit-specific training sessions for PDN and PLTHH will be available on the [Kepro Provider Training Information](#) web page prior to November 1, 2021. Provider training information updates will be posted on the [ColoradoPAR Program web page](#).



PDN and PLTHH providers are required by the Department to watch recorded Atrezzo provider portal training videos and PDN or PLTHH benefit-specific training prior to submitting a PAR for PDN or PLTHH services. Atrezzo provider portal training videos are located below under the section “Kepro’s Required Recorded Atrezzo Training Video Links”.

Kepro’s Required Recorded Atrezzo Training Video Links

[Atrezzo System Administrators training video](#) - This training is for **System Administrators only**. It will cover how to register a new account in Atrezzo, register additional NPI numbers, provider group administrator functions, adding/managing users, resetting passwords, and unlocking accounts.

[Atrezzo System Overview 2.1](#) - This training video is for all system users. It will cover how to submit a new request in Atrezzo, complete a saved but not submitted request, upload supporting documentation, search for a member ID or Kepro case ID, and locate and review determination letters.

[Atrezzo System Overview 2.2](#) - This training video is for all system users. It will cover how to add additional codes and revisions, request a reconsideration, and determine when to request a Peer-to-Peer.

Contact Information

Contact Kepro by calling 1-720-689-6340 or emailing coproviderissue@kepro.com for any questions or issues on PARs. Email coproviderregistration@kepro.com for issues registering or accessing provider training.

Contact the Department at hcpf_UM@state.co.us with any escalated questions or concerns regarding PARs. For questions about specific members or cases, please include the case number or PAR number in the email.

Contact hcpf_benefitsupport@state.co.us for questions about policy and benefits.

Residential Child Care Facility (RCCF) Providers

Enrollment for New Program



Effective October 1, 2021, providers may begin the enrollment process for reimbursement as a Qualified Residential Treatment Program (QRTP). Under the Family First Prevention Services Act, QRTPs must be a facility that provides residential trauma-informed treatment that is designed to address the needs, including clinical needs, of children with serious emotional or behavioral disorders or disturbances. As appropriate, QRTP treatment facilitates the participation of family members in the child's treatment program, including siblings, and documents outreach to family members, including siblings.

The enrollment process is available on the [Provider Type web page](#) and the [Facility checklist](#) is available on the [Enrollment Types web page](#). The provider type is 68, specialty type 689. Providers must complete an [attestation form](#), available from the [Provider Forms web page](#) under the Provider Enrollment drop-down, as part of their [Application for License](#) from the Division of Child Welfare Provider Services Unit (PSU).

Providers transitioning from a Residential Child Care Facility (RCCF) to a QRTP must disenroll the RCCF enrollment upon QRTP enrollment.

Once enrolled, QRTPs will be reimbursed a per diem rate according to the [fee schedule](#) for services not covered by the Regional Accountable Entities (RAEs). The rate, effective October 1, 2021, is \$125 per day. The code is H0019 with Modifier U1. See the [Behavioral Health Fee-for-Service \(FFS\) Billing Manual](#) for more information.

Providers must engage the RAEs for members who are not involved with Child Welfare or Division of Youth Services.

[Retroactive enrollment](#) and billing may be available.

Providers who wish to offer, and seek reimbursement for post-discharge services must also [enroll as Provider Type 25, Non-Physician Practitioner-Group](#).

Contact Christina Winship at Christina.Winship@state.co.us with additional information or to request an unofficial review of enrollment documents.

Substance Use Disorder (SUD) Treatment Providers

Bed Count Updates

Providers enrolled with Health First Colorado are required to report bed count numbers in their enrollment application to comply with Federal reporting requirements. If there is a

change in the number of beds at a provider location, update the number of beds in the [Provider Web Portal](#).

Bed counts should reflect capacity without COVID-related capacity restrictions. Technical assistance for the Provider Web Portal is provided by the [Provider Services Call Center](#) at 1-844-235-2387.

Contact Victoria Laskey at Victoria.laskey@state.co.us for questions regarding bed count updates.

Provider Billing Training Sessions

October and November 2021 Provider Billing Webinar-Only Training Sessions

Providers are invited to participate in training sessions for an overview of Health First Colorado billing instructions and procedures. The current and following months' workshop calendars are shown below.

Who Should Attend?

Staff who submit claims, are new to billing Health First Colorado services, or need a billing refresher course should consider attending one or more of the following provider training sessions.

The institutional claims (UB-04) and professional claims (CMS 1500) training sessions provide high-level overviews of claim submission, prior authorizations, navigating the [Department's website](#), using the [Provider Web Portal](#), and more. For a preview of the training materials used in these sessions, refer to the Beginner Billing Training: Professional Claims (CMS 1500) and Beginner Billing Training: Institutional Claims (UB-04) available on the [Provider Training web page](#) under the Billing Training - Resources drop-down section.



For more training materials on navigating the Provider Web Portal, refer to the Provider Web Portal Quick Guides available on the [Quick Guides web page](#).

Note: Trainings may end prior to 11:30 a.m. MT. Time has been allotted for questions at the end of each session.

October 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2
3	4 Frances Xavier Cabrini Day	5	6	7	8	9
10	11	12	13	14 Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m. - 11:30 a.m. MT	15	16
17	18	19	20	21	22	23
24/31	25	26	27	28 Beginner Billing Training: Institutional Claims (UB- 04) 9:00 a.m. - 11:30 a.m. MT	29	30

November 2021

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

Live Webinar Registration

Register for a live webinar by clicking the title of the desired training session in the calendar above and completing the webinar registration form. An automated response will confirm the reservation. For questions or issues regarding webinar registration, email co.training@gainwelltechnologies.com with the subject line "Webinar Help." Include a description of the issue being experienced, name and contact information (email address and phone number), and the name and date of the webinar(s) to be attended. Allow up to 2-3 business days to receive a response.

Upcoming Holidays

Holiday	Closed Offices/Offices Open for Business
Frances Xavier Cabrini Day Monday, October 4	State Offices and the ColoradoPAR Program will be closed. Capitation cycles may potentially be delayed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks. Gainwell Technologies and DentaQuest will be open.
Veterans Day Thursday, November 11	State Offices and the ColoradoPAR Program will be closed. Capitation cycles may potentially be delayed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks. Gainwell Technologies and DentaQuest will be open.
Thanksgiving Thursday, November 25	State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be closed. Capitation cycles may potentially be delayed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.

Gainwell Technologies Contacts

Provider Services Call Center
 1-844-235-2387

Gainwell Technologies Mailing Address
 P.O. Box 30
 Denver, CO 80201