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## Did You Know - Current Processing Times for Provider Enrollment

Provider enrollment updates or changes require additional review by DXC Technology (DXC), and are currently being processed within 2-3 business days. The average process time for new applications is 5 business days.

## All Providers

### Delayed Notification of Member Eligibility

The Delayed Notification Form to override timely filing is no longer accepted as of June 1, 2018, when the Department of Healthcare Policy & Financing (the Department) extended timely filing to 365 days. Providers are expected to take appropriate and reasonable action to identify Health First Colorado (Colorado's Medicaid Program) eligibility in a timely manner. Some examples of appropriate action include:

- Reviewing past medical and accounting records for eligibility and billing information for services provided
- Requesting billing information from the referring provider or facility where the member was seen
- Contacting the member by phone or by mail
- Verifying eligibility via the Provider Web Portal

It is not effective to rely solely on billing statements, collection notices or collection agencies as the only means of obtaining eligibility and billing information. If the timely filing period expires because the provider is not aware that the member is Health First Colorado eligible, the fiscal agent is not authorized to override timely filing.

Providers may not bill the member if the member is eligible on the date of service and the claim is outside timely filing. Reference the [Billing Health First Colorado Members policy statement](#) for more details.

For more information, refer to the Timely Filing [FAQs](#) on the [Provider FAQ Central web page](#).

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## Healthy Communities Program

The Healthy Communities Program serves children, young adults and pregnant women eligible for Health First Colorado or Colorado Child Health Plan *Plus* (CHP+) programs at no cost to families. The new, statewide, toll-free number is 1-844-511-KIDS (5437).

About 100 Family Health Coordinators throughout the state provide outreach, navigation and health education to newly eligible members and families wanting to apply for coverage.

**Family Health Coordinators can assist Health First Colorado or CHP+ members with:**

- Completing Medical Assistance Program Applications
- Navigating Health Systems of Care
- Understanding coverage and benefits
- Providing referrals to community resources and providers
- Educating families on:
  - Enrollment/re-enrollment requirements
  - Preventing gaps in coverage
  - The benefits of developing a relationship with primary care medical providers to lead a “health neighborhood”
  - Appropriate use of medical services and more.



**Family Health Coordinators can help a practice with:**

- Helping to avoid missed appointments/no-shows by counseling patients/families on the consequences of future no-shows
- Connecting members with programs such as Non-Emergent Medical Transportation (NEMT) and child care resources so members can keep medical appointments
- Assisting scheduling and billing staff with member eligibility/portal issues

To find a local Family Health Coordinator by zip code, call 1-844-511-KIDS (5437).

For more information, visit the [Health First Colorado Communities web page](#) or contact the Healthy Communities Program at [hcpf\\_healthycomm@state.co.us](mailto:hcpf_healthycomm@state.co.us).

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

Providers are encouraged to monitor the [Centers for Medicare & Medicaid Services \(CMS\) website](#) 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 2019. Visit the CMS NCCI website for more information.

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## Revenue Codes Under the Capitated Behavioral Health Benefit

The Department will allow the use of the following revenue codes (in addition to those represented in [Appendix Q](#)) under the capitated behavioral health benefit administered under the Accountable Care Collaborative:

0510	CLINIC PSYCHIATRIC CLINIC PSYCH CLINIC
0513	CLINIC PSYCHIATRIC CLINIC PSYCH CLINIC
0902	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) MILIEU THERAPY BH/MILIEU THERAPY
0903	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) PLAY THERAPY BH/PLAY THERAPY
0904	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) ACTIVITY THERAPY BH/ACTIVITY THERAPY
0905	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) INTENSIVE OUTPATIENT SERVICES - PSYCHIATRIC BH/INTENS OP/PSYCH*
0906	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) INTENSIVE OUTPATIENT SERVICES - CHEMICAL DEPENDENCY BH/INTENS OP/CHEM DEP**
0907	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) COMMUNITY BEHAVIORAL HEALTH PROGRAM (DAY TREATMENT) BH/COMMUNITY
0912	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X PARTIAL HOSPITALIZATION - LESS INTENSIVE BH/PARTIAL HOSP
0913	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X PARTIAL HOSPITALIZATION - INTENSIVE BH/PARTIAL INTENS
0916	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X FAMILY THERAPY BH/FAMILY RX
0917	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X BIO FEEDBACK BH/BIOFEED
0918	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X TESTING BH/TESTING
0919	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X OTHER BEHAVIORAL HEALTH TREATMENTS/SERVICES BH/OTHER
0960	PROFESSIONAL FEES (ALSO SEE 097X AND 098X) GENERAL CLASSIFICATION PRO FEE
0961	PROFESSIONAL FEES (ALSO SEE 097X AND 098X) PSYCHIATRIC PRO FEE/PSYCH
1000	BEHAVIORAL HEALTH ACCOMMODATIONS GENERAL CLASSIFICATION
1001	BEHAVIORAL HEALTH ACCOMMODATIONS RESIDENTIAL - PSYCHIATRIC
1003	BEHAVIORAL HEALTH ACCOMMODATIONS SUPERVISED LIVING*
1005	BEHAVIORAL HEALTH ACCOMMODATIONS GROUP HOME***

\* For mental health diagnoses only

\*\* For Substance Use Disorder (SUD) diagnoses only

\*\*\* For members under the age of 21

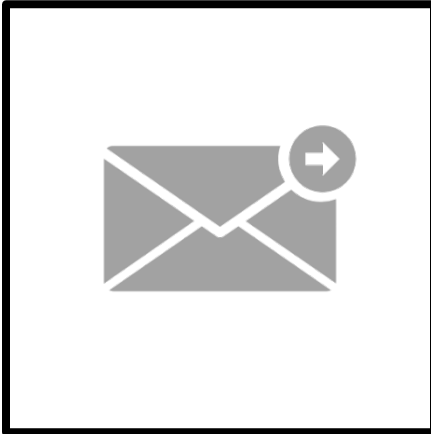
This change will be represented in the next version of the Uniform Service Coding Standards.

These additional codes should only be billed to the regional accountable entity and are not available for use under Fee-for-Service Medicaid which is billed directly to DXC.

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

## Service, Mailing and Billing Addresses

There are three different provider address fields in the Colorado interChange. The definition of each address and what it is used for is listed below:



- **Service location address:** This is the location at which the provider renders services. This address populates the [Find a Doctor](#) directory used by members. If the provider shares a National Provider Identification (NPI) number, the zip code associated with this location is also used for claims. The email address associated with the service location is used to send provider communications such as newsletters and bulletins.
- **Mailing address:** This address is where paper Prior Authorization Request (PAR) letters are sent if the provider is not receiving PAR letters electronically.
- **Billing address:** This address is where paper checks and remittance advice statements are sent if the provider is not receiving them electronically. **Note:** The billing address must match the address on the provider's W-9.

All addresses can be updated through the [Provider Web Portal](#). Refer to the [Provider Maintenance Provider Web Portal Quick Guide](#) for detailed, step-by-step instructions on updating address information.

## Community Clinics (CCs)/Community Clinic and Emergency Centers (CCECs) Providers

### Enrollment Required for CC and CCEC Providers

The Department opened the enrollment process for the CC/CCEC provider type as of September 1, 2018, as noted in the [September 2018 Provider Bulletin \(B1800420\)](#).

The CC/CCEC rule was adopted by the Medical Services Board and will be effective November 30, 2018. The adoption of this rule eliminates the temporary provision for locations licensed as CC/CCECs to be enrolled as, and bill under the hospital provider type.

For more information and step-by-step enrollment instructions, providers should consult the [Information by Provider Type web page](#).

Contact Raine Henry at [Raine.Henry@state.co.us](mailto:Raine.Henry@state.co.us) for more information.

## Durable Medical Equipment, Prosthetic, Orthotic and Supply (DMEPOS) Providers

### Peristeen Expanding to Adults

Effective October 16, 2018, the Department expanded coverage of the Peristeen system to adults. The Peristeen system was previously only covered under the Early Periodic Screening, Diagnostic and Treatment (EPSDT) benefit.

Prescribers must submit a Prior Authorization Request (PAR) via the eQHealth Solutions PAR portal, eQSuite®. The request will then be reviewed to determine if the request is medically appropriate.

Coding for the Peristeen system will be assigned moving forward; however, in the interim, please continue to bill using the E1399 code. Once the Colorado interChange is configured to process claims for the new coding, the Department will publish the codes and guidance in a future provider bulletin.

For further information about how to submit a PAR, visit the [ColoradoPAR Program website](#).

Contact [hcpf\\_dme@hcpf.state.co.us](mailto:hcpf_dme@hcpf.state.co.us) for questions about the Peristeen policy.

## Home and Community-Based Services (HCBS) Providers

### Cost-of-Living Adjustment (Increases)

There will be a 2.8% increase to Social Security beneficiaries beginning January 1, 2019. This will bring the Social Security amount up to \$771. In accordance with the increases, the Department is making adjustments to the Room and Board (R&B) payment amounts, as well as the Personal Needs Allowance (PNA) amounts for clients utilizing Group Residential Support Services (GRSS), Individual Residential Support Services (IRSS), Alternative Care Facilities (ACF) and Supportive Living Programs (SLP). Through these adjustments, the Department will be aligning the R&B payments and PNA amounts across all residential settings.

GRSS and IRSS will see the following adjustments: \$18 increase to R&B, \$3 increase to PNA.

	2017 R & B	2018 R & B	2019 R & B	2017 PNA	2018 PNA	2019 PNA
IRSS/GRSS	\$662	\$677	<b>\$695</b>	\$73	\$73	<b>\$76</b>

ACF and SLP will see the following adjustments: \$3 increase to Room and Board, \$18 increase to PNA.

	2017 R & B	2018 R & B	2019 R & B	2017 PNA	2018 PNA	2019 PNA
ACF/SLP	\$677	\$692	<b>\$695</b>	\$58	\$58	<b>\$76</b>

Contact [hcpf\\_hcbs\\_questions@state.co.us](mailto:hcpf_hcbs_questions@state.co.us) with any questions.

### Rule Revisions

The Department would like to inform all providers of the implementation of the new Adult Day Services (ADS) and Alternative Care Facility (ACF) regulations that became effective November 1, 2018. The new regulations can be found on the Colorado Secretary of State's website under [10 CCR 2505-10 8.491](#) for ADS, and [10 CCR 2505-10 8.495](#) for ACFs.

Changes to the ADS rule include:

- HCBS Settings Final Rule requirements
- Enhanced environmental standards
- Updated requirements on medication administration and monitoring
- Clarification on critical incident reporting for providers
- Clarification on reimbursement



- Modifications to the director qualifications
- Clarification on a person receiving AD services if they are in a residential program

Changes to the ACF regulations include:

- Alignment of Department regulations with the new Assisted Living Residence (ALR) regulations that were effective July 1, 2018
- HCBS Settings Final Rule requirements
- Enhanced environmental standards
- Updated requirements on medication administration and monitoring
- Clarification on critical incident reporting for providers
- Clarification on reimbursement
- Clarification on requests for staffing waivers

Please review the new regulations to ensure compliance. Contact [hcpf\\_hcbs\\_questions@state.co.us](mailto:hcpf_hcbs_questions@state.co.us) with any questions.

## Hospital Providers

### General Updates

#### Inpatient Hospital Per Diem Rate Group

##### **New Web Page**

A new web page has been created to house the Inpatient Per Diem Rates. Please take a moment to visit the [Inpatient Hospital Per Diem Reimbursement Group web page](#).

Visit the [Hospital Stakeholder Engagement Meeting webpage](#) for more information on upcoming meetings or past meeting materials.

#### Outpatient Hospitals

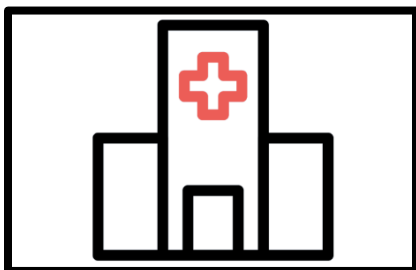
##### **Bi-Monthly Enhanced Ambulatory Patient Group (EAPG) Meetings**

The bi-monthly EAPG meetings have merged into the Hospital Stakeholder Engagement Meeting. Visit the [Hospital Stakeholder Engagement Meeting web page](#) for 2019 meeting dates and materials. For meeting materials from September 2017 to November 2018 please visit the [Outpatient Hospital Payment web page](#).

Contact Andrew Abalos at [Andrew.Abalos@state.co.us](mailto:Andrew.Abalos@state.co.us) or 303-866-2130 with any questions regarding the new EAPG rates or the EAPG methodology in general.

##### **EAPG Payment Reform Survey**

The Department is currently conducting a survey regarding its payment reform efforts for Outpatient Hospital Payment. The intent of the survey is to obtain input from the hospital provider community on how it would like the Department to direct its resources. To access the survey, visit the [Outpatient Hospital Payment web page](#). Contact Andrew Abalos at [Andrew.Abalos@state.co.us](mailto:Andrew.Abalos@state.co.us) or 303-866-2130 with any questions.



#### All Hospital Providers

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

The Department has continued to host bi-monthly Hospital Stakeholder Engagement meetings to discuss current issues regarding payment reform and operational processing. The next meeting is scheduled for **Friday, January 12, 2018, 12:30 p.m.- 4:00 p.m.** at 303 E 17<sup>th</sup> Ave., Denver, Conference Rooms 7B & 7C.



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

Visit the [Hospital Stakeholder Engagement Meeting webpage](#) for more details, meeting schedules and past meeting materials.

Contact Elizabeth Quaife at [Elizabeth.Quaife@state.co.us](mailto:Elizabeth.Quaife@state.co.us) with any questions and/or topics for discussion 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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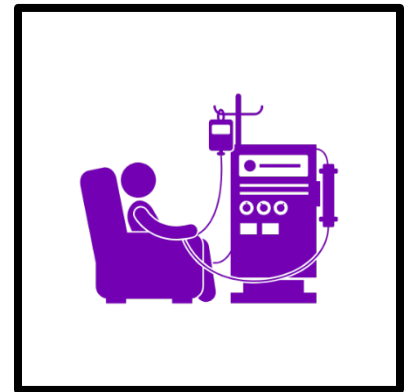
## **Hospital and Dialysis Providers**

### **Upcoming Policy Stakeholder Meeting Regarding Emergency Dialysis Policy and Hospital Readmission**

The Department has scheduled a two-part meeting to be held on Thursday, December 6, 2018, from 11:00 a.m. to 1:00 p.m. MT.

The purpose of the first hour is to inform stakeholders of an upcoming policy change that will enable recipients of emergency services under the Health First Colorado benefit, who have been diagnosed with End-Stage Renal Disease, to access the dialysis services they already receive in the most appropriate setting: independent free-standing dialysis centers.

The purpose of the second hour is to inform stakeholders of a proposed change to the hospital readmission policy, extending it from 48 hours to 15 days, and to solicit feedback on those conditions that the Department should consider exempting from the policy.



The Department recognizes that many of the same stakeholders will be interested in both topics and have arranged the agenda for ease of stakeholder participation. Stakeholders who do not wish to participate in the first hour of the meeting may arrive at 12:00 p.m. MT. Likewise, those stakeholders who do not wish to remain for the second hour of the meeting may leave at that time.

Meeting location information for participants who plan attend **in person** is as follows: 303 E 17th Ave, Denver  
11<sup>th</sup> Floor Conference Rooms 11A & 11B

Meeting access information for participants who plan to attend **remotely** is as follows:

Dial 1-877-820-7831, participant code 706065#

[Webinar Link](#)

Please RSVP to Kimberley Smith at [Kimberley.Smith@state.co.us](mailto:Kimberley.Smith@state.co.us) by 4:00 p.m. MT on Wednesday, December 5, 2018. Any questions can also be directed to Kimberley via email.

# Indian Health Services (IHS) Providers

## **New Billing Manual for IHS Providers**

The Department has published the [Indian Health Service \(IHS\) Billing Manual](#), available on the [Billing Manuals web page](#) under the UB-04 drop-down section. The manual provides guidance to IHS providers. Included are a list of covered services, appropriate revenue and type-of-bill codes, sample UB-04 and CMS 1500 forms and guidance for Urban Indian Organizations (UIO).

Contact Alex Weichselbaum at [Alex.Weichselbaum@hcpf.state.co.us](mailto:Alex.Weichselbaum@hcpf.state.co.us) with any questions or concerns.

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# Pharmacies and All Medication-Prescribing Providers

## **Preferred Drug List (PDL) Announcement**

The following drug classes and preferred agents will become effective January 1, 2019, for Health First Colorado:

### **Hepatitis C Virus Treatments**

Preferred products will be: Epclusa, Harvoni, Mavyret, Ribavirin cap/tab

### **Antidepressants**

Preferred products will be: Amitriptyline, Bupropion, Citalopram, Doxepin, Escitalopram, Fluoxetine caps/soln, Fluvoxamine IR, Imipramine HCl, Nortriptyline, Mirtazapine, Paroxetine, Sertraline, Trazodone, Venlafaxine IR, Venlafaxine ER caps

### **Antiemetics**

Preferred products will be: Emend, Ondansetron, Transderm Scop

### **Epinephrine Products**

Preferred products will be: Epinephrine autoinjector (generic EpiPen)

### **Targeted Immune Modulators**

Preferred products will be: Cosentyx, Enbrel, Humira, Xeljanz IR

### **Antipsoriatics**

Preferred products will be: Acitretin, Calcipotriene cream/soln, Taclonex

### **Ulcerative Colitis Agents**

Preferred products will be: Apriso, Canasa, Lialda, Pentasa, Sulfasalazine

### **Fluoroquinolones**

Preferred products will be: Cipro susp, Ciprofloxacin tab, Levofloxacin tab

### **Antihyperuricemics**

Preferred products will be: Allopurinol, Probenecid, Colchicine cap, Probenecid/Colchicine



**NSAIDs**

Preferred products will be: Celecoxib, Diclofenac sodium tab, Flector, Ibuprofen tab/susp, Indomethacin, Ketorolac tab, Meloxicam tab, Nabumetone, Naproxen EC tab/susp, Sulindac, Voltaren

**Proton Pump Inhibitors**

Preferred products will be: Esomeprazole magnesium cap, Nexium packet, Omeprazole cap, Pantoprazole tab, Prevacid solutab

**H. Pylori Treatments**

Preferred products will be: No changes

**Pulmonary Arterial Hypertension Therapies**

Preferred products will be: Adcirca, Epoprostenol, Letairis, Orenitram, Tracleer 62.5mg/125mg, Ventavis, Sildenafil (generic Revatio)

**Pancreatic Enzymes**

Preferred products will be: Creon, Zenpep

**Antiplatelet Agents**

Preferred products will be: Aggrenox, Brilinta, Cilostazol, Clopidogrel, Prasugrel

**Antitherpetic Agents**

Preferred products will be: Acyclovir tab/cap/susp, Denavir, Zovirax cream/ointment

**Triptans**

Preferred products will be: Naratriptan tab, Relpax, Rizatriptan, Sumatriptan tab/vial, Zomig intranasal

Refer to the [PDL](#) for details.




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## Drug Utilization Review (DUR) Updates

**Pharmacist Board Member Position Opening**

The Health First Colorado DUR Board is currently recruiting to fill one pharmacist board member position. Applicants must be licensed and practicing in Colorado and would need to be available to attend public, quarterly DUR Board meetings. The meetings are scheduled the second or third Tuesday in the months of February, May, August and November and last from 6:00 p.m. to approximately 9:00 p.m. MT.

The DUR Board reviews and discusses medication utilization and prior authorization criteria for medications covered under the Health First Colorado pharmacy benefit, and provides recommendations to the Department regarding pharmaceutical care for the Health First Colorado population. Meeting preparation materials are provided to board members and a meal is also provided prior to the start of the meetings. Contact Brandon Utter at [SSPPS.co-dur@ucdenver.edu](mailto:SSPPS.co-dur@ucdenver.edu) for more information.

**Policy Change to Coverage of Brand Tamiflu Capsules**

Effective November 15, 2018, brand-name Tamiflu capsules are currently favored by Health First Colorado and pay without a prior authorization when prescribers indicate a DAW code of 0, 1 or 9 on the prescription.

Generic oseltamivir capsules are non-favored and require a prior authorization. Prior authorizations may be approved for generic capsules based on clinical necessity of use.

The generic oseltamivir liquid suspension will continue to pay without a prior authorization, and brand Tamiflu suspension will still require a prior authorization verifying that the generic product cannot be used per generic mandate criteria. Refer to the Appendix P section of the [Pharmacy Resources web page](#) for more information regarding the generic mandate.

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## Pharmacy Providers

### 340B Drug Pricing Program

Pharmacies which participate in the 340B Drug Pricing Program must choose either to provide only 340B-purchased drugs (carve-in) or to provide no 340B-purchased drugs (carve-out) to Health First Colorado members.

Providers that choose to carve-in must:

- 1) Have the National Provider Identifier (NPI) number listed on the HRSA 340B Medicaid Exclusion File;
- 2) Submit the **340B acquisition cost** as the ingredient cost (NCPDP Field #409-D9) on each claim; and
- 3) Submit claims with “20” in the Submission Clarification field and “05” or “08” in the Basis of Cost Determination field.

September 1, 2018, noncompliant claims triggered a notification:

- Claims which are noncompliant with the above requirements will pay but return a message to the point of sale indicating the issue. This transition period gives pharmacies 60 days to ensure 340B-purchased drugs are appropriately billed to Health First Colorado.

November 1, 2018, the Department denied claims when:

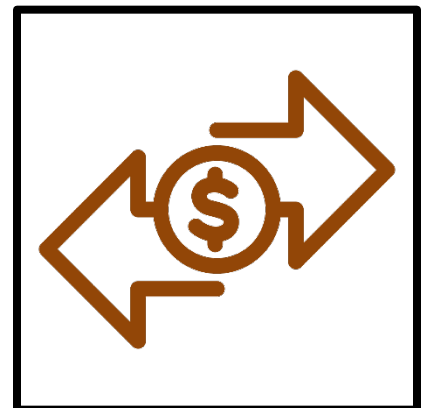
- The Submission Clarification and Basis of Cost Determination fields indicated that the drug was purchased through the 340B Drug Pricing Program but the pharmacy NPI number is not listed on the HRSA 340B Medicaid Exclusion File.
- The pharmacy NPI number is listed on the HRSA 340B Medicaid Exclusion File but the Submission Clarification and Basis of Cost Determination fields did not include the correct values.

November 1, 2018, the Department notified providers when:

- The pharmacy NPI number is listed on the HRSA 340B Medicaid Exclusion File and the submitted ingredient cost on the claim exceeds the 340B ceiling price.

How to resolve denied claims:

- If a pharmacy is billing 340B-purchased drugs to Health First Colorado, the NPI number must be listed on the HRSA 340B Medicaid Exclusion File: 340B Registration.
- If a provider is enrolled with the 340B Drug Pricing Program, claims must be submitted with “20” in the Submission Clarification field and “05” or “08” in the Basis of Cost Determination field.



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

## 340B Policy and Procedures Manual

To assist 340B pharmacy providers with the intricacies of the 340B program, the Department has created the [340B Policy and Procedure Manual](#), which is posted on the [Pharmacy Resources web page](#).

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

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### Pharmacist Enrollment: Over-the-Counter (OTC) Drugs and Immunizations

Effective November 1, 2018, pharmacists began enrolling with Health First Colorado. Once enrolled, pharmacists may prescribe specified OTC products and administer specified vaccinations under the Health First Colorado benefit.

The list of drugs that pharmacists may prescribe is posted on the [Pharmacy Resources web page](#) under the “Pharmacist Over-the-Counter (OTC) Prescriptive Authority List” section.

For more information specific to pharmacist enrollment, visit the [Pharmacist Enrollment: Over-the-Counter and Immunizations web page](#).

Contact Kristina Gould at [Kristina.Gould@state.co.us](mailto:Kristina.Gould@state.co.us) with any questions or concerns.

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## Provider Billing Training Sessions

### December 2018 and January 2019 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](#).

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 click the Billing Training and Workshops drop-down list.

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](#).

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

### December 2018

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
2	3	4	5	6 <a href="#">CMS 1500 Provider Workshop</a> 9:00 a.m. - 11:30 a.m. MT	7	8
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9	10	11	12	13 <a href="#">UB-04 Provider Workshop</a> 9:00 a.m. - 11:30 a.m. MT	14	15

### January 2019

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
6	7	8	9	10 <a href="#">CMS 1500 Provider Workshop</a> 9:00 a.m. - 11:30 a.m. MT	11	12
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
13	14	15	16	17 <a href="#">UB-04 Provider Workshop</a> 9:00 a.m. - 11:30 a.m. MT	18	19

## Upcoming Holidays

Holiday	Closed Offices/Offices Open for Business
<b>Christmas Day - Tuesday, December 25, 2018</b>	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>New Year's Day - Tuesday, January 1, 2018</b>	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 Street, Suite 600  
Denver, CO 80202

### **Provider Services Call Center**

1-844-235-2387

### **DXC Mailing Address**

P.O. Box 30  
Denver, CO 80201