



COLORADO
Department of Health Care
Policy & Financing

Dear Durable Medical Equipment Provider,

This is to notify providers of the following three (3) recent issues posted on the [Known Issues web page Durable Medical Equipment \(DME\) section](#):

Resolved 9/29/25: Professional Claims with Durable Medical Equipment (DME) Procedure Codes E1032, E1033 and E1034 were Denying for Explanation of Benefits (EOB) 7826

Professional claims with Durable Medical Equipment (DME) procedure codes E1032, E1033 and E1034 and a Date of Service (DOS) on or after 4/1/25 were denying for Explanation of Benefits (EOB) 7826 - "Procedure code is not allowed to be submitted more than once per date of service."

Affected claims were reprocessed 10/6/25.

Issue resolved 9/29/25.

Resolved 9/16/25: Some Professional Claims for Durable Medical Equipment (DME)/Supply Providers were Paid at an Incorrect Rate

Some professional claims were paid at an incorrect rate for procedure code A9286. Claims are now being paid at the correct rate and the [Health First Colorado Fee Schedule for January 2025](#) has been corrected.

The rates are as follows:

- Claims with a Date of Service (DOS) prior to 7/1/25: \$0.03
- Claims with a DOS between 7/1/25 and 9/30/25: \$0.04
- Claims with a DOS on or after 10/1/25: \$0.03

Affected claims were reprocessed 9/26/25.

Issue resolved 9/16/25.

Professional Claims for Supply Providers with Certain Procedure Codes and a Modifier of BO are Denying

Professional claims with a Date of Service (DOS) on or after 3/1/2025 are denying for Explanation of Benefits (EOB) 7802 – “The non-payment modifier is not appropriate with the billed procedure code” when billed with the following procedure codes and a modifier of BO: B4102, B4103, B4104, B4150, B4152, B4153, B4154, B4155, B4157, B4158, B4159, B4162 and B9999. Claims were denying when billed with procedure codes B4160 and B4161 and a modifier of BO.

Affected claims will be reprocessed.

Issue resolved for procedure codes B4160 and B4161 10/1/25. A resolution is in process for all other procedure codes.

When reprocessing and resolution information is available, an update will be sent to DME providers.

Providers may contact the [Provider Services Call Center](#) with any questions.

Thank you,

Department of Health Care Policy & Financing
