



Policy Statement

Billing for Individuals who Receive Retroactive Health First Colorado Eligibility

Purpose

To outline the Department's policy on billing for services rendered to an individual who does not have Health First Colorado (Colorado's Medicaid Program) eligibility on the date of service, but who subsequently receives retroactive Health First Colorado covering the date of service.

Background

The Department has received questions from both Health First Colorado members and providers regarding how provider billing should be handled for services rendered to non-eligible members who are later made Health First Colorado-eligible. Federal and state regulations prohibit charging Health First Colorado members for covered services, beyond any applicable co-payment. In Colorado, these regulations apply to both participating (Health First Colorado-enrolled) providers and non-participating providers. For more information about billing Health First Colorado members, please see the Department's [Policy Statement: Billing Members for Services](#).

Current Billing Policy for all Providers

- Providers may bill an individual who is *not enrolled in Health First Colorado* on the date of service.
- Providers may bill Health First Colorado members for *services not covered by Health First Colorado*.¹

Retroactive Health First Colorado - Policy for Participating (enrolled) Providers

- Providers must check an individual's Health First Colorado eligibility on the date of service (DOS); if not Health First Colorado eligible, providers may collect fees for services rendered.
- If the individual subsequently receives retroactive Health First Colorado eligibility that covers the DOS, the following applies:
 - The Health First Colorado member does not notify the provider of retroactive Health First Colorado eligibility:
 - Nothing happens.
 - The Health First Colorado member does notify the provider of retroactive Health First Colorado eligibility:
 - The participating provider should return any collected fees to the member, minus any required co-pay(s), and bill Health First Colorado for covered

¹ Please see Policy Statement: Billing Members for Services for additional information.



services. Provider may obtain a Timely Filing waiver letter from Department policy staff if the claim is out of timely filing (currently 365 days).

- If the covered service does not require a Prior Authorization (PAR) – bill normally.
- If the covered service does require a PAR – the Department may direct its utilization management (UM) contractor to process a retroactive PAR if provider submits all required documentation. This does not guarantee that the PAR will be approved or the claim paid.

Retroactive Health First Colorado - Policy for Non-Participating Providers

- Non-participating providers do not have access to Health First Colorado eligibility information but should ask if an individual has insurance coverage before providing services. If no Health First Colorado coverage is reported, the provider may collect fees for service(s) rendered.
- If the individual subsequently receives retroactive Health First Colorado eligibility that covers the DOS, the following applies:
 - The Health First Colorado member does not notify provider of Health First Colorado eligibility:
 - Nothing happens.
 - The Health First Colorado member does notify the provider of retroactive Health First Colorado eligibility:
 - Ideally, the provider returns any collected fees to the member and agrees to bill Health First Colorado for covered services. The provider must enroll in Health First Colorado before submitting a claim. If the provider enrolls with Health First Colorado, policies outlined above for participating providers apply.
 - If the provider does not want to enroll in Health First Colorado, refund of fees to the member is not required.

Health First Colorado Provider Relations

Health First Colorado's Provider Relations Unit was developed to ensure that Colorado Health First Colorado has an adequate and comprehensive network of quality providers that meet high standards for physical, behavioral, dental and long-term services.

For more information about the Provider Relations Unit or this policy, please contact:

Marceil Case, Provider Relations Manager

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Health First Colorado Members with questions about this policy should call the Member Contact Center at 1-800-221-3943.

