



Provider News & Resources

October 26, 2020 | Issue 4

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Featured Resources:

[Provider Web Portal Quick
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Upcoming Holidays:

**Veterans Day - Wednesday,
November 11** - State Offices
and the ColoradoPAR
Program will be closed.
Gainwell Technologies and
DentaQuest will be open.

**Thanksgiving Day -
Thursday, November 26** -
State Offices, DentaQuest,
Gainwell Technologies 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.

Upcoming holidays are
posted to the [Provider
Resources web page](#) and on
the last page of every

Claim Submission Methods for Adjustments, Refunds, Voids and Attachments



Providers are advised to submit
all claims electronically, **including
adjustments and refunds**. For
information on how to process
adjustments and voids via the
Provider Web Portal, visit the [Provider Web Portal Quick
Guide - Copy, Adjust, or Void a Claim](#).

Providers may only submit on paper if less than five (5)
claims per month are submitted and approval has been
given.

Refunds should be submitted in the form of an
adjustment or a void, either via batch or the Provider Web
Portal. The recoupment amount will be displayed on the
Remittance Advice (RA). *Paper checks should not be sent
for refunds.*

Outpatient, Physical and Occupational Therapy Providers

48-Unit Benefit Limit in Provider Web Portal

Providers are reminded that members may receive up to 48
units of any combination of physical therapy/occupational
therapy (PT/OT) services per rolling 12-month period
before a Prior Authorization Request (PAR) is required.
Evaluation and orthotic services are not included in this
limit. This unit limit will be automatically enforced by the
Colorado interChange by denying claims that exceed the
limit.

The Provider Web Portal will display the number of
outpatient PT/OT units a member has used in the past 12
months; however, the accuracy of the Web Portal is limited
by the timeliness of submitted claims.

**It should not be relied upon to inform the provider of an
absolute number of remaining units. Providers are advised
to always seek a PAR at the beginning of a member's
therapy if it is anticipated the member will require more
than 48 units of service in a 12-month period.**

monthly [Provider Bulletin](#).

Beginning September 1, 2020, providers will not be granted a retroactive PAR based on the unit count displayed in the Provider Web Portal.

This article was originally published in the [August 2020 Provider Bulletin \(B2000451\)](#).

Providers Who Utilize eQHealth

Prior Authorization Requests (PARs) for Members Affected by Wildfires

eQHealth providers should review the following linked materials to [modify a PAR](#), submit a [Change of Provider form](#), or submit a [new PAR for Durable Medical Equipment \(DME\) supplies or services](#) and note on the submission that this is due to the Colorado wildfires. Mark PARs related to this issue **urgent** as appropriate.

Known Issues & Updates

Resolved 10/21/20 Outpatient Claims Receiving Explanation of Benefits (EOB) 3054 - "EVV Record Required and Not Found" When Submitted After Professional Claim

Some providers who submitted a professional claim followed by an outpatient claim via the Provider Web Portal were receiving a response of EOB 3054 - "EVV Record Required and Not Found."

This issue primarily impacted Hospital – General and Nursing Facility providers; however, other provider types may also have been affected, including:

- Clinic - Practitioner
- Durable Medical Equipment
- Federally Qualified Health Center
- Home & Community-Based Services
- Home Health & Private Duty Nursing
- Outpatient Therapy (Physical, Occupational and Speech Therapy)

While these outpatient claims were posting EOB 3054, claims payment was not impacted and reprocessing was not needed.

No action is required from providers.
Issue resolved 10/21/20.



Resolved 9/30/20 Geographic Rates Updated for Durable Medical Equipment (DME) Codes Subject to Medicare Upper Payment Limit (UPL)

Effective for claims with dates of service on or after 1/1/20, geographic rates for DME codes subject to the Medicare Upper Payment Limit (UPL) were implemented in the Colorado interChange on 9/30/20.

The Durable Medical Equipment fee schedule for 2020 has been posted under the Durable Medical Equipment, Upper Payment Limit drop-down section located on the [Provider Rates & Fee Schedule web page](#).

Affected claims with dates of service on or after 1/1/20 will be reprocessed.

Issue resolved 9/30/20.

Please do not reply to this email; this address is not monitored.
