COLORADO
Department of Health Care Policy & Financing

Provider News & Resources

Featured Resources:

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Upcoming Holidays:

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

NEW Updating 1099 Address in Provider Web Portal

Effective October 28, 2020, the Provider Maintenance option in the [Provider Web Portal](#) has been updated to allow providers to add, view or modify the Internal Revenue Service (IRS) 1099 form mailing address linked to the associated tax ID. Previously, providers were unable to review or update the 1099 form mailing address.

A confirmation letter will be sent to all linked provider service locations stating an update was completed. The letter will contain:

- The provider service location ID
- The user information who completed the change
- The details of the address changes made (previous and new)

Note: If multiple provider IDs share the same tax ID, and one provider changes the tax ID 1099 address, that address will change for all providers with that tax ID.

Visit the [Provider Maintenance - Provider Web Portal Quick Guide web page](#) to view Address Changes for instructions on how to update an address in the provider web portal.

Extension for the Colorado Indigent Care Program (CICP) Applications

The Colorado Indigent Care Program (CICP) has extended the application signature collection dates to January 31, 2021.

Visit the [CICP section](#) on the [COVID-19 Information for Health First Colorado and CHP+ Providers and Case Managers web page](#) for more information.

Billing Guidance for Vaccine Administration Codes 90460, 90461, 90471-90474

Providers are reminded that vaccine administration codes 90460, 90461, 90471-90474 should be billed as one line item, and the vaccine product billed as a separate line item,

DentaQuest will be open.

Thanksgiving Day - Thursday, November 26 - State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be closed.
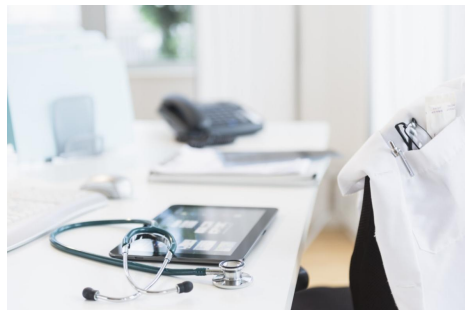
The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.

Upcoming holidays are posted to the Provider Resources web page and on the last page of every monthly Provider Bulletin.

with the same date of service on the **same claim.**

Even vaccine codes that are payable by the Colorado Department of Health and Environment (CDPHE) Vaccines for Children (VFC) Program should still be present on the claim with the appropriate administration code.

Visit the Immunizations Billing Manual web page for more information on this policy.

Health & Human Services Announcement
Relief Fund Eligibility and Updates Reporting Requirements

The latest Provider Relief Fund (PRF) application period has been expanded to include provider applicants such as residential treatment facilities, chiropractors, and eye and vision providers that have not yet received Provider Relief Fund distributions by the U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA). These providers and all Phase 3 applicants will have until 11:59 p.m. ET on November 6, 2020, to submit applications for payment consideration.

List of Eligible Practices and Types of Providers

The pool of eligible Phase 3 applicants is expanding to include providers across a broad category of practices. HHS is working to ensure more providers are able to receive Phase 3 funding. A list of the provider types can be found on the press release.

Updated Reporting Requirements

HHS is amending the reporting instructions to increase flexibility around how providers can apply PRF money toward lost revenues attributable to Coronavirus. After reimbursing healthcare-related expenses attributable to coronavirus that were unreimbursed by other sources, providers may use remaining PRF funds to cover any lost revenue, measured as a negative change in year-over-year actual revenue from patient care related sources.

Additional Resources

- The press release.
- The policy memorandum on the reporting requirement decision.
- The amended reporting requirements guidance.
- Visit the Coronavirus Aid, Relief, and Economic Security (CARES) Act Provider Relief web page for updates and to learn more about the PRF program.
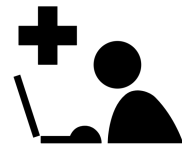
Known Issues & Updates

Resolved 10/29/20
Telemedicine Place of Service (POS) Being Added to Current

Procedural Terminology (CPT) Codes 92630 and 92633

CPT Codes 92630 and 92633 have been added to the telemedicine policy and are billable with POS 02.

Visit the Telemedicine - Provider Information web page for more information.

Issue resolved 10/29/20

Resolved 10/28/20
Delegate Provider Web Portal Users Unable to
Resume Revalidation Application

Provider Web Portal users with delegate access were previously unable to access a previously opened Application Tracking Number (ATN) in order to resume their revalidation application. Only users that were signed in to the Web Portal as the account administrator could access the previously opened ATN and resume the revalidation application.

Issue resolved 10/28/20

Resolved 10/21/20
COVID-19 Laboratory Procedure Codes U0002 and 87635 Included as
Clinical Laboratory Improvement
Amendments (CLIA) Waived Tests

Effective 4/1/20, procedure codes U0002 and 87635 have been updated as Clinical Laboratory Improvement Amendments (CLIA) waived tests. Laboratory providers with a valid CLIA Certificate of Waiver (COW) may bill codes U0002 and 87635 with the QW modifier when billed with diagnosis code U07.0.

Affected claims with dates of service on or after 3/20/20 were reprocessed on 10/27/20.

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.
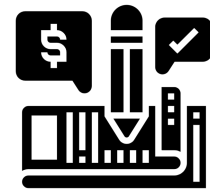
Claims with dates of service from 1/1/20 - 5/31/20 were reprocessed on 10/30/20. The remaining affected claims with dates of service from 6/1/20 - 9/30/20 will be reprocessed in the coming weeks.

Issue resolved 9/30/20

ClaimsXten™ Known Issues & Updates

Resolved 10/28/20
Vision Claim Denials for Explanation of Benefits

(EOB) 7817 - "Payment Modifier Not Appropriate"
When Billed with Modifier 55

Professional claims for adult glasses and contact lens procedure codes were denying when submitted with modifier 55 for EOB 7817 - "The payment modifier is not appropriate with the procedure code billed."

Claims were reprocessed on 10/30/20.

Issue resolved 10/28/20

Resolved 10/28/20
Claims Denying for Evaluation & Management (E&M) Services and Procedure Code 99050 for Explanation of Benefits (EOB) 7801 -
"Content of Service of Another Procedure on Current/Previous Claim"
When Billed with Other E&M Services

Professional claims for procedure code 99050 (services provided in the office when the office is normally closed after-hours) were previously denying when billed with other E&M services for EOB 7801 - "Service is denied because it is content of service of another procedure on the current and/or previous claim."

Claims were reprocessed on 10/30/20.

Issue resolved 10/28/20

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