



Provider News & Resources

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Upcoming Holidays:

**Christmas Day - Saturday,
December 25 (Observed
Friday, December 24)**

**New Year's Day - Saturday,
January 1 (Observed Friday,
December 31)**

State Offices, DentaQuest,
Gainwell Technologies and
the ColoradoPAR Program
will be closed.



New Procedure Code 90677 for Adult Pneumococcal Vaccine

Colorado interChange Updated

The new procedure code 90677 for the adult pneumococcal vaccine has been added to the [Immunization](#) and [Health First Colorado](#) Fee Schedules.

Effective December 10, 2021, the Colorado interChange has been updated to accept claims for dates of service on or after October 1, 2021, billed with this new procedure code.

More information will be provided in a future communication.

Reminder

Health First Colorado Enrollment

Providers are reminded that the Affordable Care Act (ACA) requires physicians and other eligible practitioners to enroll in Health First Colorado (Colorado's Medicaid program). This applies to all rendering, attending, and ordering, prescribing and referring (OPR) providers.

All National Provider Identifiers (NPIs) listed on a claim must be enrolled with Health First Colorado.

Reminder

Non-Emergent Medical Transportation (NEMT) Intelliride Billing

Non-Emergent Medical Transportation providers within the nine service areas of Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson, Larimer and Weld counties are reminded to enroll and submit claims to Intelliride, the Department of Health Care Policy & Financing transportation vendor.

Claims submitted directly to Colorado interChange may deny. Contact Intelliride at 1-855-489-4999 for enrollment, scheduling trips or claims assistance.

Rate Adjustment Information for:

Alternative Care Facility (ACF) / Supported Living Program (SLP) Providers

Singe Entry Point (SEP) Case Managers

On December 10, 2021, emails were sent with rate adjustment information which applies to both the SLP and ACF services. The table shows the timeline of the rate increases.

Date spans of rate adjustment	Percentage (%) Increase/Decrease	Reason for Adjustment	Method increase will be applied	Actor responsible for revising PAR	Case Manager action required?
July 1, 2021 - Dec 31, 2021	2.11%	Across the board ARPA increase	Lines with TU modifier added to PARs.	Gainwell Technologies	No
Jan 1, 2022 - March 31, 2022	36% - ACFs 8% - SLPs	Base-wage increase	Lines with TU modifier added to PARs.	Gainwell Technologies	No
April 1, 2022 - Forward	-2.11%	Ending of 2.11% ARPA increase, COLA adjustments	Auto-PETI to revise PETI and PAR to reflect the enhanced rate and COLA adjustments	N/A	Possibly - if the PETI is not revised by Gainwell Technologies in the auto process, the CM will need to complete the revision

Refer to the emails for more information:

[ACF and SLP Providers - Rate Adjustment Information for ACF and SLP - 12-10-2021](#)

[SEP Case Managers - Rate Adjustment Information for ACF and SLP - 12-10-2021](#)



Expanded Coverage under the Emergency Medical Service (EMS) COVID-19 Only Benefit Plan

The "EMS COVID-19 Only" emergency benefit for uninsured Coloradans has been updated in compliance with the American Rescue Plan Act (ARPA) to include coverage of any service for COVID-related treatments. This update impacts all claims types with dates of service on or after March 11, 2021. Dates of service prior to March 11, 2021 should be processed according to the policy at that time which was limited to specific procedure codes (See [Provider News & Resources Issue 17 - February 26, 2021](#)).

Claims with dates of service on or after March 11, 2021, under this benefit plan must have one or more of the following diagnosis codes present to identify the services as COVID-related or the claim will deny. Only the following diagnosis codes are covered under this benefit. The [COVID-19 web page](#) has been updated accordingly.

B94.8	B99.9	J12.82
J18.9	M35.81	M35.89
O98.5	R05	R06.02
R50.9	U07.1	U09.9
Z11.52	Z11.59	Z13.9
Z20.818	Z20.822	Z20.828
Z86.16		

Affected claims with dates of service on or after March 11, 2021, where the member is eligible for the EMS COVID-19 benefit, were reprocessed December 10, 2021. Providers may submit claims with these diagnosis codes that were previously not covered for this benefit on or after March 11, 2021, but are now included in the new coverage criteria.

Verifying EMS COVID-19 Only Benefits in the Provider Web Portal

COVID-19 benefits display on the Benefit Details grid in the Provider Web Portal as an "EMS" Coverage type with the description "Emergency Medical Service-HD-EMS COVID-19 Only". Providers are encouraged to review the benefit coverage to determine if "EMS COVID-19 Only" is indicated.

Click '+' to expand and view copay amounts. Click '-' to collapse.

Benefit Details				
	Coverage	Description	Effective Date	End Date
	EMS	Emergency Medical Service - HD - EMS COVID-19 Only	04/07/2020	04/07/2020
	Coverage	Coverage Code Description	Copay Amount	

Prior to March 11, 2021, claims should be marked as an emergency by indicating Y in field 24 (EMG) on a professional claim or indicating admission type 1 (Emergency) or 5 (Trauma) on an institutional claim. On or after March 11, 2021, claims under this benefit do not need to be marked as an emergency to be covered.

Recently Published Billing Manuals

- [Appendix X - HCPCS and NDC Crosswalk for Billing Physician-Administered Drugs](#)
- [Immunization Benefits](#)

Visit the [Billing Manuals web page](#) to locate all published manuals.

Known Issues

Colorado interChange Update for Home & Community-Based Services (HCBS) American Rescue Plan Act (ARPA) Rates

Effective November 1, 2021, the Colorado interChange was updated with a temporary rate increase for some Home and Community-Based Services (HCBS) waiver benefits in response to the COVID-19 public health emergency. A temporary 2.11% rate increase will be applied to impacted services retroactively to April 1, 2021, and will be in effect through March 31, 2022.

Some of the affected HCBS provider claims that have an increase due to the American Rescue Plan Act (ARPA) were reprocessed on December 10, 2021. The remaining, affected claims will be reprocessed in the next few weeks. Only claims that were billed with the higher rate can be reprocessed. Providers are instructed to submit an adjustment with an adjusted billed amount for claims billed at the original lower rate without the increase. Refer to the [December 2021 Provider Bulletin \(B2100471\)](#) for more information on the reprocessing effort.

Refer to [Operational Memo Number OM 21-071](#) for more information on impacted services, billing instructions, and the total percentage increase for each service.

Resolved Issues

Resolved 12/7/21

Home & Community-Based Services (HCBS) In Home Support Services (IHSS) Claims for T1019 Paid at Incorrect Rate

Some IHSS claims subject to the Denver Minimum Wage Rate for procedure code T1019 billed with U1, HR and KX modifiers for dates of service on or after 7/1/2021 were being underpaid.

Providers are reminded that for the Denver Minimum Wage Rate the county of residence is based on information recorded on the member's profile in the Colorado Benefits Management System (CBMS), which is then transmitted to the Colorado interChange.

Only claims billed at the higher, increased rate will be reprocessed. Claims billed at the original rate without the increase will need to be adjusted by the provider with an adjusted billed amount.

Issue resolved 12/7/21.

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