



Provider News & Resources

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Billing for Medicare Advantage Plans

Medicare Advantage plans are billed as Medicare, not as Third-Party Liability (TPL). Refer to the [Third Party Liability and Medicare Reference Guide](#) for more information.

If a member has a Medicare Advantage plan, the primary billing information should be reported on a claim in the Medicare fields, not as Third-Party Liability (TPL) fields. A Medicare Advantage plan (such as a Health Maintenance Organization [HMO] or Preferred Provider Organization [PPO]) is another Medicare health plan choice a member may have as part of Medicare.

Refer to the [Entering Other Insurance or Medicare Crossover Information Quick Guide](#) for more information.

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Upcoming Holidays:

**Veterans Day -
Monday, November 11, 2024**

State Offices, AssureCare and the
ColoradoPAR Program will be closed.

Gainwell Technologies
and DentaQuest will be open.



Vision Providers: New EOB Code 5812

Beginning October 2024, claims may deny for Explanation of Benefits (EOB) code 5812
- "Vision Hardware Service Limit Exceeded."

Vision providers are allowed to bill for up to two (2) eyeglass lens units per date of service
per member.

October 20-October 26 is National Lead Poisoning Prevention Week

National Lead Poisoning Prevention Week (NLPPW) is a week-long campaign that aims to reduce childhood lead exposure. The theme for 2024 is "Bright Futures Begin Lead-Free". NLPPW highlights the many ways parents, caregivers and communities can reduce children's exposure to lead and prevent its harmful health effects. Visit the [National Lead Poisoning Prevention Week web page](#) to learn more. October is also Children's Health Month, a time to raise awareness about children's environmental health, including the dangers and potential health impacts of lead.

The Bright Futures Periodicity Schedule recommends lead testing. It is a federal requirement that all children enrolled in a Medicaid program receive testing at ages 12 and 24 months. Children between 24 and 72 months enrolled in Medicaid programs with no record of a previous blood lead test are required to have at least one test. Providers may bill Health First Colorado (Colorado's Medicaid program) for all medically necessary blood lead level testing, including any additional tests as a result of an elevated blood lead level.

Lead poisoning is preventable and provider networks are the first line of defense for members and their families. Lead is still a common problem in Colorado and it can come from many sources including drinking water, baby food, spices such as cinnamon, toys, paint and it naturally occurs in soil.

The Colorado Department of Public Health and Environment (CDPHE) has prepared a [Lead and Health web page](#) for providers who conduct Well Child Visits with members and want to learn more about lead poisoning prevention.

Adult Long-Term Home Health (LTHH)

Acentra Health, the Department of Health Care Policy & Financing (the Department) Utilization Management vendor, has started processing LTHH Prior Authorization Requests (PARs) for Health First Colorado adult members aged 21 years and older.

Refer to the [HCPF OM 24-049 Operational Memo](#) released October 3, 2024, for more detailed information.

Prescriber Tool Alternative Payment Model (APM) Stakeholder Meetings

Health First Colorado providers receiving fee-for-service payments for outpatient pharmaceutical claims are invited to one of two virtual stakeholder meetings to present information about the updates being made to Year 2 of the Prescriber Tool Alternative Payment Model (APM).

Staff from the Department will present an overview of the feedback received from Year 1 of the Prescriber Tool APM and provide updates being made to Year 2. Attendees are invited to learn, ask questions and provide feedback about the proposed changes. These two meetings are identical and therefore attendees only need to choose the meeting date and time that best fits their schedule.

Meeting Date and Time: October 28, 2:00 to 3:00 p.m. MT and October 29, 7:30 to 8:30 a.m. MT

Registration and Location: Meetings will be virtual via Zoom.

- [Register in advance for October 28](#)
- [Register in advance for October 29](#)

Attendees will receive a confirmation email after registering containing information about joining the webinar.

Feedback will be gathered at the meetings and via a feedback form that will be shared with attendees. A link to a feedback form may be requested by emailing Kyra Acuna at HCPF_stakeholders@state.co.us.

A recording of the meeting may be requested by emailing Kyra Acuna at HCPF_stakeholders@state.co.us.

Visit the [Prescriber Tool Alternative Payment Model web page](#) for more information about the Prescriber Tool APM.

Meeting Accommodation and Language Access Notice: Auxiliary aids and services for individuals with disabilities and language services for individuals whose first language is not English may be provided upon request. Contact Kyra Acuna at HCPF_stakeholders@state.co.us at least one week prior to the meeting to make

arrangements.

Las ayudas y servicios auxiliares para individuos con discapacidades y servicios de idiomas para individuos cuyo idioma materno no sea inglés pueden estar disponibles por solicitud. Comuníquese con Kyra Acuna a HCPF_stakeholders@state.co.us al menos una semana antes de la reunión para hacer los arreglos necesarios.

Contact Kyra Acuna at HCPF_stakeholders@state.co.us with questions or for more information.

Perinatal Substance Use Disorder (SUD) Community Conversation

Health First Colorado providers, advocates and stakeholders who provide integrated care for pregnant and postpartum people with substance use disorder (SUD) across Colorado are invited to attend Health First Colorado's Perinatal Substance Use Disorder (SUD) Community Conversation.

Staff from the Department, along with other guest speakers, will present an overview of the work completed by the Maternal Opioid Misuse (MOM) Model, followed by breakout sessions focused on peer support specialists, plans of safe care, and more. Attendees are invited to learn, ask questions and provide feedback, in addition to building connections with HCPF staff members, Regional Accountable Entities (RAEs), and other community members. An agenda will be sent out to all registrants one week prior to the conference.

Meeting Date and Time: November 22, 8:00 a.m. to 12:00 p.m. MT

Registration and Location: This meeting will be virtual via Zoom. [Register in advance.](#)

Attendees will receive a confirmation email containing information about joining the webinar after registering.

Feedback will be gathered at the meetings and via a feedback form that will be shared with attendees. A link to a feedback form may be requested by emailing Kyra Acuna at HCPF_stakeholders@state.co.us.

A recording of the meeting may be requested by emailing Kyra Acuna at HCPF_stakeholders@state.co.us.

Refer to the [Maternal Opioid Misuse Model web page](#) for more information about the MOM Model.

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Recently Updated Billing Manuals and Fee Schedules

Billing Manuals

- [Appendix R - Remittance Advice \(RA\) Messages](#)
- [Appendix X - HCPCS/NDC Crosswalk for Billing Physician-Administered Drugs](#)
- [Physical and Occupational Therapy](#)
- [Telemedicine](#)

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

Fee Schedules

- [Child Health Plan Plus Fee-for-Service \(FFS\)](#)

Visit the [Provider Rates and Fee Schedule web page](#) to locate all published fee schedules.

Resolved Known Issues

Immunization Providers:

Resolved 10/15/24: Some Claims for Procedure Codes 90460, 90473, 90660 Denying Explanation of Benefits (EOB) 1178 or 7800

Some claims for procedure codes 90460, 90473, 90660 were denying for EOB 1178 - "Service is not reimbursable for Date(s) of Service" or EOB 7800 - "The procedure code billed on claim is missing the primary/base service procedure(s)."

Affected claims were reprocessed on 10/15/24.

Issue resolved 10/15/24.

Clinic Practitioners (Provider Type 16):

Resolved 10/16/24: Claims for Procedure Code J3301 Denying Explanation of Benefits (EOB) 7827

Claims for procedure code J3301 were denying for EOB 7827 - "Unlisted procedure code should not be used when a more descriptive procedure code representing the service provided is available."

Affected claims will be reprocessed.

Issue resolved 10/16/24.

Resolved 10/18/24: Knee Arthroscopy/Surgery Procedure Code 29877 Paying Incorrect Amount

Claims billed with procedure code 29877 (Knee Arthroscopy/Surgery) were paying at an

incorrect rate. The rate of \$511.57 listed in the fee schedule is correct. The Colorado interChange has been updated to reflect this rate.

Affected claims will be reprocessed.

Issue resolved 10/18/24.

Behavioral Health Providers:

Resolved 10/17/24: Some Claims for Behavioral Health Services with Procedure Codes 90791 and 90792 Denying Explanation of Benefits (EOB) 3981

Some claims for behavioral health services with procedure codes 90791 and 90792 were denying for EOB 3981 - "RAE Member Restriction for Procedure Billing Rule."

Affected claims will be reprocessed.

Issue resolved 10/17/24.
