COLORADO
Department of Health Care Policy & Financing

Provider News & Resources

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Important Revalidation Requirements

Providers are encouraged to review the Provider Revalidation Dates Spreadsheet posted on the Revalidation web page to confirm revalidation dates. This file is updated weekly and can be used to verify active enrollment for any provider.

- If the date is in the past, the provider must revalidate immediately.
- If the date is within 6 months in the future, providers should begin the process immediately to allow for processing time.

All providers are reminded that they must revalidate enrollment every five (5) years per federal mandate from the Centers for Medicare and Medicaid Services (CMS). All Provider IDs must be actively enrolled and revalidated with Health First Colorado (Colorado's Medicaid program) for claims to be paid per rule 42 CFR § 455.410(b).

Claims will deny if providers have not revalidated by the deadline.

Providers should not re-enroll if past the revalidation date.

Duplicate enrollments can cause gaps in enrollment and claim processing errors.

Veteran's Day - Tuesday, November 11, 2025

The link for revalidation remains on the Provider Web Portal account associated with the provider for six (6) months after the revalidation date.

If the revalidation link is no longer available, contact the Provider Services Call Center for next steps. Do not start a new application.

Non-Emergent Medical Transportation providers that did not comply before the deadline may not revalidate.

The moratorium for Non-Emergent Medical Transportation new enrollments was approved by the Centers for Medicare & Medicaid Services (CMS) and will be in effect until at least March 31, 2026.

Risk Level for Newly Enrolling Skilled Nursing Facility (SNF) and Hospice Providers

Providers are reminded that the Enrollment Risk Level for **newly enrolled** Skilled Nursing Facilities (SNFs) and Hospice providers was set to a High Risk Level on September 4, 2025. Fingerprinting background checks are required for High Risk Level providers.

The Revalidation Risk Level for SNFs will elevate to Moderate Risk Level and Hospice will remain at Moderate Risk Level.

Refer to the Enrollment FAQ section for information regarding the fingerprint process.

Recently Updated Billing Manuals and Fee Schedules

Billing Manuals

- Appendix R - Remittance Advice (RA) Messages
- Audiology Benefit Billing and Policy Manual
- Doula Billing Manual
- Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)
- DMEPOS HCPCS Codes
- HCBS - Children's Habilitation Residential Program (CHRP) Waiver Program
- HCBS - Denver Minimum Wage Regional Pricing Appendix
- HCBS - Persons with Intellectual and/or Developmental Disabilities Waiver Programs & Targeted Case Management for HCBS Waiver Programs

- Psychiatric Residential Treatment Facility and Out-of-State High Intensity Residential Treatment (OHIRT) Provider Billing Manual
- Qualified Residential Treatment Program Billing Manual
- Wheelchair Benefit Coverage Policy

Visit the Billing Manuals web page to locate all published manuals.

Known Issues

Some Professional Claims for Substance Use Disorder (SUD) Continuum Services are Denying for Explanation of Benefits (EOB) 1082

Professional claims for Substance Use Disorder (SUD) Continuum services with procedure code H0010 and a modifier of HF are denying for Explanation of Benefits (EOB) 1082 – "Billing Provider Type and/or Specialty is not allowable for the service billed."

A resolution is in process.

Resolved Known Issues

Resolved 10/23/2025: Professional Claims for Supply Providers with Certain Procedure Codes and a Modifier of BO were Denying

Professional claims with a Date of Service (DOS) on or after 3/1/2025 were denying for Explanation of Benefits (EOB) 7802 – "The non-payment modifier is not appropriate with the billed procedure code" when billed with the following procedure codes and a modifier of BO: B4102, B4103, B4104, B4150, B4152, B4153, B4154, B4155, B4157, B4158, B4159, B4160, B4161, B4162 and B9999.

Affected claims were reprocessed 10/24/25.

Issue resolved for procedure codes B4160 and B4161 10/1/25. Issue resolved for all other procedure codes 10/23/25.

Featured Resources

Provider Enrollment Resource for Individual Providers wanting to get paid under a TAX ID.

The Individual v. Organizational Provider Types slide on the Quick Guides web page outlines input that may be chosen depending on which provider type is used during the provider enrollment process.

	Individual Providers	Organizational Providers
Enrollment Types	• Individuals Within a Group (IWG) • Billing Individuals (BI) • Ordering, Prescribing and Referring (OPR)	• Groups • Facilities
NPI Type	• Type 1 National Provider Identifier (NPI)	• Type 2 National Provider Identifier (NPI)
NPIs Required	• One NPI (can be affiliated with multiple groups and locations)	• Multiple separate, unique NPIs for each service location and provider type
Tax Association	• NPI is tied to individuals name and Social Security Number (SSN)	• NPI is tied to business name and Employer Identification Number (EIN)
Claims	• Used on claims for rendering and referring providers	• Used on claims for billing provider

Meeting Announcements

Intermediate Billing Training

Intermediate Billing training covers claims processing and remittance advice via the Provider Web Portal and batch, secondary billing with commercial insurance and Medicare, attachment requirements, timely filing, suspended claims, adjustments and voids, reconsiderations and resubmissions and more. This training is a general training for all provider types.

Participants may register now to attend.

Feedback Requested

Feedback Requested: H.R.1 Survey

On July 4, 2025, the House Reconciliation bill (H.R.1), previously known as the "H.R.1 One Big Beautiful Bill Act," was signed into law. The bill makes several changes to Medicaid that take effect over the next few years. All states, including Colorado, are required to follow these changes. We value your partnership in navigating this challenging time together.

Please complete this survey to help the Department of Health Care Policy & Financing (the Department) understand:

- Provider concerns about H.R.1
- What sources of information you prefer
- How the Department can best share information with providers regarding federal updates

A Spanish Webform is also available.

Use the online form to submit a question or comment related to H.R.1.

Upcoming Holidays

Veteran's Day - Tuesday, November 11, 2025

State Offices, Acentra, AssureCare and the Provider Services Call Center will be closed. DentaQuest, Gainwell Technologies and Prime Therapeutics will be open.

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