



Provider News & Resources

January 18, 2021 | Issue 12

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Featured Resources:

Colorado interChange Update - COVID-19 Vaccination Procedure Codes

The Colorado interChange has been updated with the COVID-19 vaccination procedure codes. Providers may visit the [Provider Rates & Fee Schedule web page](#) and select Immunization Rates under the Immunization Rate Schedule drop-down section for updated rate information.

Refer to the [January 11, 2021](#), email for more information and resources regarding the COVID-19 vaccine.

COVID-19 Vaccine Colorado Locations

Visit the [Find where you can get vaccinated web page](#) for locations and other information.

Note: This web page will be updated as information becomes available.

Extension of Public Health Emergency (PHE)

The Department of Health and Human Services has [formally extended the Public Health Emergency \(PHE\)](#). The PHE can be extended for up to 90 days at a time. This extension starts January 21, 2021, and would end, unless extended again, on April 20, 2021.

Updates will be published via the [Public Health Emergency Planning web page](#).

Refer to the January 8, 2021, email [A Message from Executive Director Kim Bimestefer](#) for more information.

Martin Luther King, Jr. Holiday Schedule

Monday, January 18, 2021

- State Offices and the ColoradoPAR Program will be closed.
- The Member Contact Center will remain **open**.
- DentaQuest and Gainwell Technologies will be closed.

2021 Provider Enrollment Application Fee

[How to Report Suspected Fraud](#)

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Upcoming Holidays:

Martin Luther King, Jr. Day - Monday, January 18 - State Offices and the ColoradoPAR Program will be closed. DentaQuest and Gainwell Technologies will be open. The Member Contact Center will remain open. DentaQuest and Gainwell Technologies will be closed.

Presidents' Day - Monday, February 15 - State Offices, the ColoradoPAR Program, DentaQuest and Gainwell Technologies 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](#).



Happy New Year!

The Affordable Care Act (ACA) requires certain providers to remit an application fee. Effective January 1, 2021, the Provider Enrollment Applications Fee has been set at **\$599.00** for the 2021 calendar year.

Visit the [Provider Enrollment web page](#) for more information under the Enrollment News and Updates section.

Recently Published Billing Manuals

CMS-1500

- [Audiology](#)
- [Immunization Benefits](#)

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

Home & Community-Based Services (HCBS) Providers

Updated Information

Denver Minimum Wage Reimbursement Rates Effective January 1, 2021

Note the following guidance regarding the suspension of claims during this temporary work around. Providers are encouraged to submit claims prior to Thursday 3:00 p.m. MT via Batch or Friday 12:00 p.m. MT via the Portal.

Claims submitted after this cutoff may miss the **current** financial cycle but will be processed in the **next** financial cycle.

This is not a guarantee of payment.

Refer to the [updated email communication](#) sent on January 15, 2021, to HCBS Providers.

Primary Care Medical Provider (PCMP) Substance Use Disorder (SUD) Updated Benefit

Effective January 1, 2021, Health First Colorado, (Colorado's Medicaid program) expanded the Substance Use Disorder (SUD) benefit.

Residential and inpatient treatment and withdrawal management services have been added to the existing list of covered SUD services, giving members access to a full range of treatment options.

Refer to the [email communication](#) sent on January 15, 2021, to PCMP and SUD providers.

All Providers

Claims Suspending for HCPCS 2021 Quarterly Update Procedure Codes for Explanation of Benefits (EOB) 0000 - "This Claim/Service Is Pending for Program Review"

Claims billed with HCPCS 2021 Quarterly Update procedure codes are suspending for EOB 0000 - "This claim/service is pending for program review."

The Colorado interChange will be updated with the 2021 HCPCS Quarterly Update billing codes based on the Centers for Medicare & Medicaid Services (CMS) annual release of deletions, changes and additions.

Once the rates are loaded, claims will be released.

Durable Medical Equipment (DME) Providers

DME Claims Billed with RR Modifier Denying for Explanation of Benefits (EOB) 7802

Some DME supply claims billed with modifiers RR are denying for EOB 7802 – "The non-payment modifier is not appropriate with the billed procedure code."

A resolution to this issue is in process. Affected claims will be reprocessed.

Resolved Issues

DME Resolved Issue 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.

Claims with dates of service from 6/1/20 - 9/30/20 were reprocessed on 11/6/20 and 12/15/20.

Issue resolved 9/30/20

Resolved 12/9/20

Professional Claims Denying for "Unbundling" Explanation of Benefits (EOB) 7804

Some professional claims were denying for EOB 7804 – "Separately billed services must be bundled as they are considered components of the same procedure. Separate payment is not allowed."

- Where the services are included in the unbundling rule; AND
- Where the billing provider is the same but the rendering provider is different

Example: Certified nurse midwives may serve as assistant surgeon during a cesarean section. Both the certified nurse midwife claim and surgeon claim are allowable as long as the detailed rendering providers are different on each claim.

Claims were reprocessed on 12/29/20.

Issue resolved 12/9/20

Resolved 12/12/20

Behavioral Health Claims Billed by Federally Qualified Health Centers (FQHCs), Rural Health Centers (RHCs) or Indian Health Services (IHS) - FQHC Denying for Explanation of Benefits (EOB) 2029

Some outpatient behavioral health claims billed by FQHC, RHC or IHS-FQHC providers were denying for EOB 2029 – “The Services Must Be Billed to The Members RAE.”

Claims were reprocessed on 12/21/20.

Issue resolved 12/12/20

Resolved 1/6/21

Non-Emergent Medical Transportation (NEMT) Claims Billed with Modifier 77 Denying for Explanation of Benefits (EOB) 7802

Some Non-Emergent Medical Transportation (NEMT) claims for the following procedure codes billed with modifier 77 were denying for EOB 7802 – “The non-payment modifier is not appropriate with the billed procedure code.”

A0021	A0100	A1020	A0428	T2001
A0080	A0130	A0210	A0430	T2005
A0090	A0140	A0422	A0433	T2049
A0110	A0180	A0425	A0434	
A0120	A0190	A0426	S0209	

Claims were reprocessed on 1/7/21.

Issue resolved 1/6/21

Resolved 1/13/21

Physical Therapy Claims for Procedure Codes 20560 & 20561 Billed with GP, 96 or 97 Modifiers Denying for Explanation of Benefits (EOB) 7802

Some physical therapy claims for procedure codes 20560 and 20561 billed with the GP, 96 or 97 modifiers are denying for EOB 7802 – “The non-payment modifier is not appropriate with the billed procedure code.”

Claims were reprocessed on 1/15/21.

Issue resolved 1/13/21

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