



# Provider News & Resources

February 15, 2021 | Issue 15

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## *Featured Resources:*

[Pharmacist Enrollment: Over-the-Counter and Immunizations](#)

[Pharmacy Resources](#)

## *Upcoming Holidays:*

**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](#).



## Enrollment Processing Timeline

Most new enrollment applications and updates are currently being processed by the Department's fiscal agent within 5 business days.

The processing time and approval is between 5 to 30 business days on average. **If the application is returned to the provider for more information, the processing time may be extended beyond 30 days.**

Providers are encouraged to review [Enrollment Best Practices](#) and the [Common Reasons Enrollment Applications are Returned to Providers web page](#) prior to submission to avoid applications from being returned.

Providers may also refer to the recent [Provider Enrollment Special Newsletter](#) for more information and resources on provider enrollment.

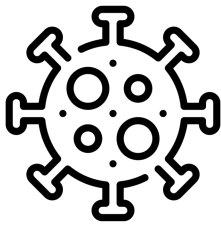
Contact the [Provider Services Call Center](#) if the enrollment application or update is still in process after 30 business days.

## Recently Published Billing Manuals

- [Appendix P - Pharmacy Benefit Prior Authorization Procedures and Criteria](#)
- [Immunizations](#)
- [Indian Health Services \(IHS\)](#)
- [Program of All-Inclusive Care for the Elderly \(PACE\) Manual](#)

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

Temporary COVID-19 Enhanced Payments  
for Certain Home & Community-Based  
Services (HCBS) Providers



Rates were temporarily increased for certain HCBS services in response to the COVID-19 public health emergency for dates of service from April 1, 2020, to June 30, 2020. Providers should reference [Operational Memo Number OM 20-048](#) for more information on how to bill impacted services using the TU modifier.

Additional, specialty-specific billing guidance is available in the communications listed below:

- [COVID-19 Rate Increase for Alternative Care Facility \(ACF\) 5-29-2020](#)
- [COVID-19 Rate Increase for Consumer Directed Attendant Support Services \(CDASS\) Providers 5-29-2020](#)
- [COVID-19 Rate Increase Residential Habilitation Providers 5-29-2020](#)
- [COVID-19 Rate Increase Supported Living Program \(SLP\) Providers 5-29-2020](#)

Claims billed outside of the identified dates of service with the TU modifier do not qualify for the enhanced rates and will deny as duplicate. Contact the [Provider Services Call Center](#) with any additional questions.

## ClaimsXten™ Resolved Issues

Resolved 2/3/21

### 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.”

Claims were reprocessed 2/8/21.

Issue resolved 2/3/21.

## Resolved Issues

Resolved 2/6/21

### New Medicare Part A and Part B 2021 Deductible Amounts

The [Medicare deductibles amounts](#) have increased for 2021 from \$1,408 to \$1,484 for Part A and \$198.00 to \$203.00 for Medicare Part B. Effective February 6, the Colorado interChange has been updated with these new deductible amounts for claims with dates of service on or after January 1, 2021.

Some claims may have denied for Explanation of Benefits (EOB) 3620 – “The Medicare deductible on the claim is greater than the annual amount. The deductible amount must match the amount on the Medicare explanation of benefits. Correct the deductible amount.”

Claims were reprocessed on 2/11/21.

Issue resolved 2/6/21.

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