COLORADO
Department of Health Care Policy & Financing

Provider News & Resources

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Provider Revalidation Update

→ The Department understands provider focus has been on member care throughout the Public Health Emergency.

Providers are encouraged to submit revalidation applications according to their scheduled due date if they are able. **However, until further notice, claims will not be denied or suspended if revalidation has not been completed by the posted revalidation due date.**

Applications for new enrollments and changes to existing applications have been given priority, so revalidation application processing times may be delayed for the next several months.

Only one update can be processed at a time. If providers need to make an additional update while a revalidation application is in process, contact the Provider Services Call Center.

Announcing "Together We Protect": Colorado's COVID-19 Vaccine Equity Fund

Eight Colorado foundations have come together to fund on-the-ground efforts to connect Coloradans who live daily without access to critical services and opportunities due to race and/or their socioeconomic status with access to COVID-19 vaccines and information.

This fund will support Colorado community-based organizations, working in partnership with state-contracted vaccine providers, to provide culturally relevant and localized outreach, information and support to ensure communities who face systemic barriers have access to the COVID-19 vaccine. Grants ranging from $10,000 - $100,000 will be awarded to applicants from across Colorado.

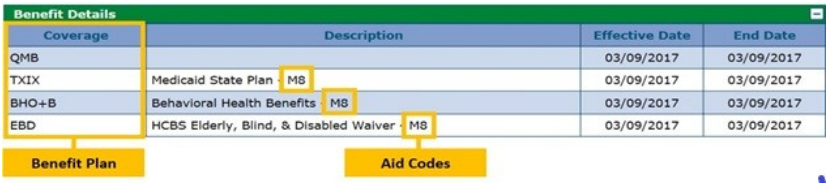
Visit the Together We Protect web page and the Together We Protect Funding Opportunity document for more information.

Incorrect Member Billing

Health First Colorado (Colorado's Medicaid Program) members cannot be billed for services covered by Health First Colorado. Providers cannot bill members in the following circumstances:

- Third-Party Liability (TPL) co-pays and deductibles
- Delayed Notification of Eligibility from the member
- Claim denials
- Provider is not enrolled with Health First Colorado

Refer to the March 2021 Provider Bulletin (B2100460) bulletin for more information.



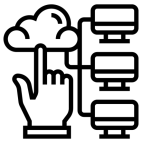
Featured Quick Guide

Benefit Plan & Program Aid Code Acronyms

To locate acronyms and short descriptions for Benefit Plan and Program Aid codes, visit theBenefit Plan & Program Aid Code Acronyms web page.

Visit the Quick Guides web page to locate all published Provider Web Portal Quick Guides.

Reminder - Sign Up for Provider Email Communications



Recipients of this email are already signed up to receive Provider Bulletins and general announcements. To receive emails specific to provider type, sign up by selecting the email list(s) that best apply.

Keeping provider contact information up to date in the Provider Web Portal will also help to ensure that providers receive emails specific to their organization's claims. The email address associated with the mailing address in the Web Portal will be used for provider communications. Visit the Provider Maintenance Provider Web Portal Quick Guide web pagefor instructions on how to access and update the email address on file.

Looking for a recent newsletter or email? Weekly newsletters and many of the emails sent out to providers are also posted on the Provider News web page.

ClaimsXten™ Known Issue

Anesthesia Claims for 01968 Denying for Explanation of Benefits (EOB) 7800

Claims billed with anesthesia procedure code 01968 are denying for EOB 7800 – "The procedure code billed on claim is missing the primary/base service procedure." when the primary/base procedure code 01967 is performed on and billed with a different date of service.

When 01967 and 01968 are performed across two dates of service, providers are advised to bill both procedures with a date span that includes both dates of service.

Providers may adjust denied claims and change the date of service from a single date to a date span that includes both dates of service.

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