



Provider News & Resources

April 2, 2021 | Issue 20

In This Issue:

Reminder: Timely Filing Guidelines

Reminder: Verify Eligibility without ID Card

Did You Know?

Updated Billing Manuals

Kepro New UM Vendor

Featured Quick Guide: Billing from the Correct Account

Pharmacy: Update Fax Numbers

Resolved Known Issues: HCBS Waiver Claims A0120, A0130, & others

Resolved Known Issues: HCBS Waiver Claims T2031 with UA & TU Modifiers

Resolved Known Issues: Transportation Claims for A0427 & A0429

Featured Resources:

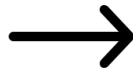
[April 2021 Provider Bulletin](#)

[Long-Term Services and Supports Training](#)

Upcoming Holidays:

Memorial Day - Monday, May 31 - 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



Reminder: Timely Filing Guidelines

Providers are reminded that claims must be submitted within 365 days. Claims must be submitted even if the result is a denial.

Refer to the [Timely Filing Guidelines](#) on the [General Provider Information Manual web page](#).

Reminder: Verify Eligibility without ID Card

Providers are reminded that members do not need to present their Health First Colorado ID cards to receive services.

The [Health First Colorado Member Handbook](#) states that members only need their date of birth and either their Social Security number or Health First Colorado ID Number (Medicaid ID).

Providers should check eligibility via the Provider Web Portal, Integrated Voice Response (IVR) System or batch.

Did You Know?

Effective March 31, 2021, the Colorado Department of Health Care Policy & Financing (the Department's) [website](#) has a new look.

The web address will remain the same, so any bookmarked pages should not be affected. This does not affect the [Provider Web Portal](#).

Recently Published Billing Manuals

- [Appendix X - HCPCS and NDC Crosswalk for Billing Physician-Administered Drugs](#)

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

New Utilization Management (UM) Vendor Starts May 1, 2021



Effective May 1, 2021, Keystone Peer Review Organization (Kepro) will be the new Utilization Management (UM) partner for Health First Colorado (Colorado's Medicaid Program).

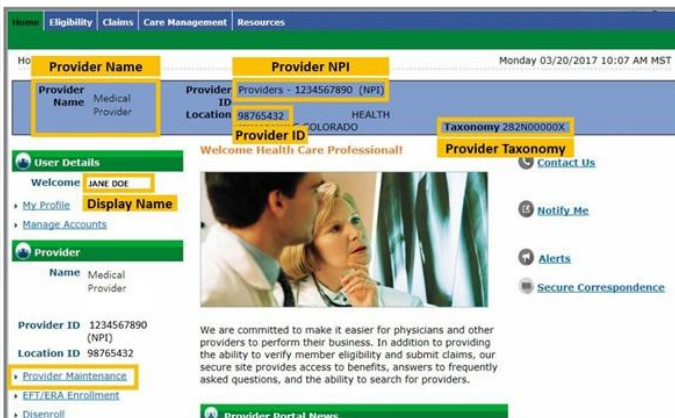
Kepro will begin accepting Prior Authorization Requests (PARs) for the following select outpatient services and benefits as of May 1, 2021:

- Outpatient Speech, Physical and Occupational Therapy
- Pediatric Behavioral Therapy
- Select Surgical Procedures
- Durable Medical Equipment (DME)
- Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Exceptions
- Transplants
- Out of State Inpatient Admissions
- Molecular Testing
- Diagnostic Imaging
- Audiology
- Personal Care
- Synagis

Providers are encouraged to attend scheduled live trainings (recommended) or view posted recorded trainings prior to Kepro starting on May 1, 2021.

Visit the [ColoradoPAR Program web page](#) and click the green "eQ to Kepro Transition Information" button to register for training and to read about the training curriculum.

For more information on the UM Vendor transition, refer to the March 25, 2021, email [Keystone Peer Review Organization \(Kepro\) Transition and Survey Results](#).



Featured Quick Guide

Billing from the Correct Account

In the Provider Web Portal, claims will deny if not logged into the correct account to submit claims appropriately.

Refer to the [Billing from the Correct Account](#) in the Portal Quick Guide for illustrated step-by-step instructions.

Visit the [Quick Guides web page](#) to locate all published Provider Web Portal Quick Guides.

Pharmacy Providers

Reminder: Update Fax Numbers

Pharmacy providers are encouraged to ensure their fax numbers are accurate and current to receive important pharmacy fax blasts. Many pharmacies either do not have a fax number on file or have a corporate fax number on record.

Visit the [Provider Maintenance – Provider Web Portal Quick Guide web page](#) for more information on updating the fax number.

Resolved Issues

Resolved 3/24/21

Home & Community Based Services (HCBS) Waiver Claims for A0120, A0130, H2023, S5100, S5102, S5105, T2003, T2019 & T2021 Not Paying at COVID-19 Enhanced Rate

Some HCBS waiver claims for the following procedure codes billed with appropriate modifier combinations with dates of service on or after 7/18/20 were not being processed for increased reimbursement at the COVID-19 enhanced rate: A0120, A0130, H2023, S5100, S5102, S5105, T2003, T2019 and T2021.

Providers may adjust affected claims to receive the increased reimbursement.

Providers should refer to [Operational Memo Number OM 21-009](#) for more information on how to bill the impacted services, including the total percentage increase for each service.

Issue resolved 3/24/21.

Resolved 3/27/21

Home & Community Based Services (HCBS) Waiver Claims for T2031 with UA & TU Modifiers Denying for EOB 1010 and 0101

Some HCBS waiver claims for procedure code T2031 billed with the UA and TU modifiers (enhanced rate for COVID-19) with dates of service on or after 1/1/21 were denying for EOB 1010 – “This is a duplicate item that was previously processed and paid” or EOB 0101 – “This is a duplicate service.” The Colorado interChange was allowing one line item to process for payment but denying the other line item as a duplicate.

Providers are encouraged not to reprocess or resubmit claims. Affected claims with dates of service from 1/1/21 – 3/31/21 will be reprocessed by the fiscal agent.

Providers should refer to [Operational Memo Number OM 21-009](#) for more information on how to bill the impacted services, including the total percentage increase for each service.

Issue resolved 3/27/21.

Resolved 3/31/21

Transportation Claims for A0427 & A0429 with 77 Modifier Denying for Explanation of Benefits (EOB) 7802

Some transportation claims for procedure codes A0427 and A0429 for dates of service on or after 10/1/20 billed with the 77 modifier were denying for Explanation of Benefits (EOB) 7802 - “The non-payment modifier is not appropriate with the billed procedure code.”

Affected claims will be reprocessed.

Issue resolved 3/31/21.

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