

## **Provider News & Resources**

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October 2023 Provider Bulletin

#### **Reminder: Provider Enrollment**

Providers are reminded that enrollment in the Provider Web Portal is required to serve either Health First Colorado (Colorado's Medicaid program) or Child Health Plan *Plus* (CHP+) members.

Refer to the <u>Web Portal Registration Quick</u> Guide for information on how to enroll.

## **Provider Resources for Outages**

As a reminder, in the event of service outages, a banner will be displayed on the following locations:

- Known Issues and Updates web page
- Provider Resources web page
- Provider Web Portal home page

Review these locations for information should an outage occur.

(B2300499)

October 2023 Synagis® Vaccine Benefit (B2300500)

**Revalidation Special Newsletter** 



# Moratorium on New Enrollments for Non-Emergent Medical Transportation (NEMT)

The state has imposed a moratorium on new enrollments for Non-Emergent Medical Transportation (NEMT) due to a significant potential for fraud, waste or abuse to the Medicaid program. The moratorium will be in place for a minimum of six (6) months and may extend beyond that. Additional information will be announced as it becomes available.

Providers are encouraged to review the <u>Provider News web page</u> under the **What's New** section for additional NEMT announcements.

### **Did You Know? Member Eligibility**

Providers are reminded to verify member eligibility and the member's Managed Care Organization (MCO), if applicable, for each date of service. Providers should contact the appropriate MCO for further benefit details once the member is assigned to the MCO. Benefits through Child Health Plan *Plus* (CHP+) may vary from the Health First Colorado Title XIX benefit plan.

Providers must not rely solely on the member to provide eligibility information. Verification must be completed through batch submissions or the <u>Provider Web Portal</u>. Providers are encouraged to refer to the <u>Verifying Member Eligibility and Co-Pay Quick Guide</u> for more detailed instructions.

Providers are responsible for verifying eligibility within 365 days of the date of service to ensure the claim can be submitted within timely filing guidelines. Providers are responsible for using any means necessary to determine coverage.

Providers may not bill the member if eligibility is not determined within 365 days of the date of service.

#### **Direct Care Worker Survey**

To continue our understanding of the level of satisfaction with their work, the Department of Health Care Policy & Financing (the Department) wants to hear from direct care workers.

Share this link with direct care workers:

Direct Care Worker Satisfaction & Engagement Survey

Responses will be kept anonymous. The survey will close on November 10, 2023, at 5:00 p.m. MT.

## **Immunization Providers: Vaccine Code Updates**

#### Reminder

All Advisory Committee on Immunization Practices (ACIP)-recommended immunizations are a covered benefit for all members, without cost sharing. This includes flu and COVID-19 vaccines. All ACIP-recommended adult vaccines for adults may be administered in the pharmacy. Providers seeking reimbursement for administering immunizations to members under 19, including flu and COVID-19 vaccines, must enroll in the Vaccines for Children (VFC) program and use VFC-distributed products.

#### **Respiratory Syncytial Virus (RSV) Immunization Updates**

**Correction:** RSV vaccines are a covered benefit for adult members, at least 60 years of age, without cost-sharing, effective June 21, 2023. Common Procedural Technology (CPT) codes 90678 and 90679 should be used, as well as the applicable vaccine administration code.

CPT 90678 is also available for pregnant individuals effective September 22, 2023. The provider must be VFC-enrolled to receive reimbursement for administration of the RSV vaccine if the pregnant member is under 19.

Vaccine Counseling for RSV Monoclonal Antibody (MAB) Guidance and Preventive Medicine Counseling Codes

Health First Colorado covers vaccine counseling visits in which healthcare providers talk to families about the importance of vaccination.

Health First Colorado will also reimburse for stand-alone vaccine counseling visits as part of vaccine administration required for all routine vaccines. Providers should bill CPT G0310, G0311, G0312, G0313, G0314 or G0315 for visits in which healthcare providers give counseling about the importance of vaccination. Providers should include modifier CR for all COVID-19 vaccine counseling-only visits. Providers should not bill for the vaccine counseling code and the vaccine administration code on the same date of service when vaccine administration codes are inclusive of counseling.

CPT G0310, G0311, G0312, G0313, G0314 or G0315 can be billed at only one (1) visit for each member per day, but there are no quantity limits for the number of times this education is provided to an individual member.

Providers may bill the appropriate Preventive Medicine Counseling Code (CPTs 99401-99404) for the counseling portion of the visit if a specific vaccine or MAB administration code does not include a vaccine counseling component (e.g., administration code 96372 used for RSV MAB injections) and providers counsel and administer the vaccine or MAB on the same date of service.

Keep documentation in the member's chart that shows the duration of counseling and a list of the prevention topics covered during counseling.

A separate Evaluation and Management (E/M) visit code may be reported with modifier 25 if there is a separately identifiable E/M service performed outside of vaccine counseling and immunization administration.

Contact Christina Winship at <a href="mailto:Christina.Winship@state.co.us">Christina.Winship@state.co.us</a> with any questions.

## Behavioral, Occupational, Physical and Speech Therapists

Pediatric Behavioral Therapies (PBT) and
Outpatient Speech Therapy (ST), Occupational Therapy (OT)
and Physical Therapy (PT) Co-Treatment

The <u>Pediatric Behavioral Therapies (PBT) Billing Manual</u> states that providers who co-treat with Outpatient Therapies (Occupational, Physical and Speech Therapists) are only allowed to bill for the time interacting with the member and not the total time in the room. Each

provider may only bill for the time they directly treat the member during the co-treatment session.

The <u>Speech Therapy Billing Manual</u> states that co-treatment sessions between two (2) outpatient therapists (pediatric behavioral therapists, physical therapists, occupational therapists and/or speech-language pathologists) are a covered service under the following conditions:

- Valid clinical rationale for providing co-treatment must be present. Providers should refer to the Joint Guidelines for Therapy Co-Treatment developed by the <u>American</u> <u>Speech-Language-Hearing Association (ASHA)</u>, <u>American Occupational Therapy</u> Association (AOTA) and the American Physical Therapy Association (APTA).
- Each provider must have an approved Plan of Care or Individualized Family Service Plan (IFSP) for Early Intervention which includes co-treatment. In addition, each provider must have an approved prior authorization which includes the Plan of Care/IFSP documentation that co-treatment will be used.

#### **Educational Based Services**

Outpatient therapies and PBT therapies provided as part of a member's individualized education program (IEP) or other medical necessity document and are in the school setting are not separately reimbursable. These services are paid for by the school district which is reimbursed by the Department. Providers may not submit claims for services performed in the school setting. Refer to the <a href="School Health Services Billing Manual">School Health Services Billing Manual</a> for details.

Providers not following the billing manual are subject to compliance monitoring and review for fraud, waste and abuse in accordance with 10 CCR 2505-10, Section 8.076.

Contact Devinne Parsons at <u>Devinne.Parsons@state.co.us</u> for information on outpatient therapies and Gina Robinson at <u>Gina.Robinson@state.co.us</u> for information on pediatric behavioral therapies.

Refer to Operational Memo 23-063 located on the 2023 Memo Series Communication web page for more details.

#### **Recently Updated Billing Manuals and Fee Schedules**

#### **Billing Manuals**

- Appendix X: HCPCS / NDC Crosswalk for Billing Physician-Administered Drugs
- Dialysis
- Home Health
- Immunizations
- Pediatric Personal Care
- Private Duty Nursing
- School Health Services (SHS)

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

#### **Fee Schedules**

- Dialysis
- <u>Immunizations</u>
- Physician-Administered Drug (PAD)

Visit the Provider Rates and Fee Schedule web page to locate all published fee schedules.

## **Resolved Issues**

#### **Vaccine Providers**

#### Resolved 10/04/23: Updated COVID Vaccine Codes

The Common Procedural Terminology (CPT) codes were loaded into interChange on October 4, 2023. Providers can begin to use these codes for billing.

Affected claims were reprocessed on October 6, 2023.

**Note:** This communication was previously published on September 21, 2023.

## **Updated COVID Vaccine Codes**

Effective September 11, 2023, COVID-19 vaccination is only reimbursable via the following Common Procedural Terminology (CPT) product codes: 91304, 91318, 91319, 91320, 91321, 91322 and the corresponding administration code, 90480.

Effective September 12, 2023, all other COVID-19 vaccine and administration codes are closed in accordance with existing Emergency Use Authorization (EUA) or Biologics License Application (BLA) from the US Food and Drug Administration (FDA).

Effective September 12, 2023, COVID-19 vaccines for members under 19 years of age are now part of the Vaccines for Children (VFC) program. Providers who are enrolled with Health First Colorado (Colorado's Medicaid program) must also enroll with the VFC program in order to receive reimbursement for COVID-19 vaccine administration to pediatric Health First Colorado members.

Effective April 27, 2023, the age range for CPT code 90677 is 6 weeks of age and up. Affected claims will be reprocessed.

Reimbursement rates and age ranges for each CPT code are located on the <u>Immunization</u> Rate Schedule.

Contact Christina Winship at <a href="mailto:Christina.Winship@state.co.us">Christina.Winship@state.co.us</a> with any questions.