



# Provider News & Resources

## Revalidation Special Newsletter

January 27, 2025

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**Providers are encouraged to read this special Revalidation newsletter for updated revalidation and claims processing information.**

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### **Federal Mandate for Revalidation**

The Centers for Medicare & Medicaid Services (CMS) created a federal mandate requiring all providers listed on a claim to revalidate (renew) their enrollment to maintain billing privileges with Health First Colorado (Colorado's Medicaid program).

Revalidation must occur at least once every five (5) years.

Every provider listed on a claim must be enrolled with Health First Colorado, meaning all providers, including those who do not bill, must complete the process of revalidation per rule [42 CFR § 455.410\(b\)](#).



### **Did You Know?**

One of the most common reasons for revalidation applications to be returned to providers is on the Supplemental Questions panel in the [Provider Web Portal](#).

Providers should check 'yes' on question seven (7) if the provider holds an appropriate license and certification.

**Note: Health First Colorado must comply with this federal Revalidation mandate.**

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## Provider Notifications

Revalidation due dates are determined by the approval date of the original enrollment application. It is important to keep communication preferences updated in the [Provider Web Portal](#) as providers are notified about revalidation in a variety of ways:

- An email is sent six (6) months in advance of the due date and every month after that until the provider revalidates.
- A revalidation link appears on the [Provider Web Portal](#) home page for providers within six (6) months of the due date.
- A spreadsheet of all revalidation due dates is posted weekly on the [Revalidation web page](#) under the [Revalidation Resources](#) section.
- Explanation of Benefits (EOB) codes for notification will appear on Remittance Advices (RAs) for providers within six (6) months of the due date. Claims will still pay prior to revalidation.
  - EOB 7515 - Billing provider enrollment revalidation due date approaching. Revalidate now to prevent payment delays.
  - EOB 7516 - Rendering provider enrollment revalidation due date approaching. Revalidate now to prevent payment delays.
  - EOB 7517 - Attending provider enrollment revalidation due date approaching. Revalidate now to prevent payment delays.
  - EOB 7518 - OPR (Ordering, Prescribing and Referring) provider enrollment revalidation due date approaching. Revalidate now to prevent payment delays.
  - EOB 7519 - Facility provider enrollment revalidation due date approaching. Revalidate now to prevent payment delays.

## Other Change Applications During Revalidation

Providers are reminded to prioritize the revalidation application ahead of any other change applications to reduce delays. Only one (1) change or revalidation application can be submitted at a time. Active change applications can be expedited by contacting the [Provider Services Call Center](#). Once a pending change application has been approved, providers may submit the revalidation application.

The expected timeline for a completed revalidation application to be approved is five (5) business days. Revalidation approval may take longer than five (5) business days if the application is returned to the provider due to incorrect or incomplete information.

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### What happens if a provider does not revalidate by the due date?

Providers due for revalidation who have not completed a revalidation application will be automatically disenrolled. The link to the revalidation application in the [Provider Web Portal](#) will be available for six (6) months after the revalidation date, even if the provider has been disenrolled. **Providers do NOT need to start a new application if the revalidation date is within 6 months.**

1. Claims will deny. A disenrolled provider who failed to revalidate will be able to submit a revalidation application through the [Provider Web Portal](#) up to six (6) months after the provider's revalidation due date.
  2. Approved providers will need to resubmit claims that denied for revalidation edits after revalidation is approved.
  3. **Only** if six (6) months have passed, providers must initiate a brand-new provider application if they wish to provide services to Health First Colorado members. Claims must be resubmitted within 365 days from the date of service.
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## Recently Asked Questions & Answers

***I have a number of locations for my practice. Can I revalidate them all at the same time?***

There are most likely different revalidation due dates for each service location. Each service location needs a separate revalidation application and a separate revalidation fee.

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***How far can a revalidation be backdated?***

If the provider revalidates within six (6) months after the revalidation date, continuous enrollment can be approved as long as all requirements are met, such as licensure, insurance, etc.

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***How do individual providers (i.e., Ordering, Prescribing and Referring [OPR], Rendering, Attending) revalidate?***

Each individual within a group has a separate account for the [Provider Web Portal](#) that is different from the group or facility account and login credentials. Individuals, or their delegate(s), must revalidate using the account for the individual provider.

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***What if the individual does not know the log in or they are no longer affiliated with the group that has the log in?***

The individual may need to "register" first. If the individual is registered and does not know the password, the individual can reset the password. Refer to the [Administrative Password Reset Process Quick Guide](#) to reset a password for the [Provider Web Portal](#).

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***How can I get an OPR provider to revalidate when they don't work at our practice?***

A spreadsheet of all providers and the revalidation dates is listed on the Revalidation web page under [Revalidation Resources](#). Providers are encouraged to check to ensure each provider is active. Groups that are unable to revalidate on behalf of OPR providers are encouraged to contact these providers to ensure revalidation is complete.

**Note:** Claims will deny if the OPR provider has not revalidated.

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***If a provider does not revalidate by the due date, can they continue seeing members and then submit claims after they revalidate?***

Health First Colorado does not recommend this as providers risk not receiving payment if not approved.

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