



Provider News & Resources

November 2, 2022 Issue 57

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Seasonal Influenza Vaccines

Attention Pharmacies: Flu shots must be billed on the professional claim format not as a point of sale prescription claim. Please contact your clearinghouse or practice management software vendor to ensure these codes are configured correctly for payment.

Providers are reminded that seasonal influenza vaccines are a covered benefit for all members. Members cannot be charged a copay for any visit where covered vaccines are administered. Pharmacy administration of flu vaccines is only available for members 19 years of age and older. Members 18 years of age and younger must receive their flu vaccine from a Vaccines for Children (VFC) provider.

Visit the [Provider Rates and Fee Schedule web page](#) for the Immunizations Fee Schedule for code-specific information.

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Featured Resources:

[Synagis Special Bulletin](#)

Upcoming Holidays:

**Veterans Day - Friday,
November 11, 2022**

State Offices and the ColoradoPAR Program will be closed. Gainwell Technologies and DentaQuest will be open.

Refer to the [Immunizations Billing Manual](#) for billing guidance.

Contact Christina Winship at Christina.Winship@state.co.us with any questions.



A Message from the Executive Director

Help build the health & child care workforce by spreading the word to members, community, and staff about educational opportunities

Please help us grow the health care workforce as well as the child care workforce to directly support our shared goal of getting women back into the workforce. Providers may print and display these time-limited training opportunity communications in your patient waiting rooms, exam rooms, staff break rooms and other related areas. The links below include a poster that can be printed and a digital display that can go on TV screens in member areas. Print and digital resources can be found at hfcgo.com/assistance.

The first poster communicates free, short-term training for in-demand health care professions (i.e. CNA, EMT, MA, pharm tech, etc). The second poster also communicates free early childhood education courses to become a certified child care professional. Both of these free education opportunities are essential to revitalizing the health care workforce, while offering upward mobility for low income Coloradans seeking new career paths. Distributing these communications to Health First Colorado members can be life changing, giving people a once-in-a-life-time opportunity for free certifications that create a meaningfully different income trajectory, while helping grow the workforce.

Providers are encouraged to help leverage these unique educational and career advancement opportunities by displaying these communications.

Kim Bimestefer

Home Health Providers:

Temporary Administrative Approval for Prior Authorization Requests (PARs) with Private Duty Nursing (PDN) Services

The Department of Health Care Policy and Financing (the Department) has heard concerns regarding the PDN PAR process. Our shared goal is to ensure Colorado has programs that provide people with access to the services they need. This is especially true for those with complex healthcare needs. We continuously evaluate how to best balance our responsibility to ensure our members have timely access to care and our federal responsibility to demonstrate services are medically necessary at the level approved.

Effective immediately, the Department is initiating a Temporary Administrative Approval Process on PDN PARs until December 31, 2022. Please note this is an Administrative

Approval Process not a pause. Providers will still need to submit all necessary documentation.

This information will be posted to the Department website, shared with home health agencies, providers and members immediately. Over the coming weeks, we will develop additional educational materials and operational guidance for providers and a family-friendly resource for members to better understand their nursing level benefits (including intermittent nursing).

This Temporary Administrative Approval process will allow time to conduct outreach to families, work with providers to ensure they understand PAR documentation and continuation of benefits requirements, and update notices to ensure greater clarity.

Contact Kepro at coproviderissue@kepro.com for help submitting PAR Reconsiderations or new PARs.

Members may contact homehealth@state.co.us.

Note: This was originally published in an email dated October 26, 2022, [Temporary Administrative Approval for Prior Authorization Requests \(PARs\) with Private Duty Nursing \(PDN\) Services](#).

Enrollment License Requirement and License Panel Updates

Current Health First Colorado providers that are required to maintain a license as part of their enrollment will receive a letter from the Department when the primary license is approaching expiration or has reached its expiration date.

Providers are reminded that Health First Colorado enrollment may be inactivated if the provider's license, certification, or accreditation has expired or is subject to conditions or restrictions.

Providers will start seeing the message "Provider license not active on date of service" on their remittance advice if the license is not current.

Refer to the [May 2022 Provider Bulletin \(B2200478\)](#) for more information.

Provider Enrollment:

Application Fees, Fingerprinting, Site Visits

Application fees, fingerprinting, and site visits are required for enrollment for some providers. If any of these requirements were waived for the Public Health Emergency (PHE), they will be required to continue enrollment.

Refer to the Provider Specialties for COVID-19 Long-Term Temporary Enrollment communication under the Enrollment News and Updates section on the [Provider Enrollment web page](#) for more information.

Provider Services Call Center Change

A virtual agent named GABBY™, designed to listen to the caller and respond, will soon be implemented to assist providers contacting the [Provider Services Call Center](#). A phased implementation will begin on Friday, November 4, 2022. Callers will begin to interact with this Provider Services Call Center virtual agent, which will be available 24 hours a day, 7 days a week.

Refer to the [November 2022 Provider Bulletin \(B2200485\)](#) for more information.

Featured Resource: Provider Address Usage

The Colorado interChange contains different provider address fields, such as:

- Service Location Address
- Mailing Address
- Billing Address

Refer to the Provider Address Usage chart under the Resources section on the [Quick Guides web page](#) for more information on the usage of the different addresses.

Visit the [Provider Maintenance Quick Guide web page](#) for [Address Changes](#) instructions to update an address.

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

Recently Published Billing Manuals and Fee Schedules

Billing Manuals

- [Appendix R - Remittance Advice \(RA\) Messages](#)
- [Appendix X - HCPCS and NDC Crosswalk for Billing Physician-Administered Drugs](#)
- [Appendix Z - List of Outpatient Hospital Specialty Drugs](#)
- [General Provider Information](#)
- [IP and OP Hospital](#)
- [Pharmacy](#)
- [Pharmacist Services](#)
- [Physician-Administered Drugs \(PAD\)](#)
- [Telemedicine](#)

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

Fee Schedules

- [Physician Administered Drug Fee Schedule](#)

Visit the [Provider Rates and Fee Schedule web page](#) to locate all published fee schedules.

Known Issues

Durable Medical Equipment (DME) Supply Claims Paying at Incorrect Rate

Some DME claims with dates of service after 7/1/22 are paying at the old default rate instead of the DME rural and non-rural rate.

A resolution to this issue is in process.

Affected claims will be reprocessed.

Claim Processing Times for New Procedure Codes

Providers are reminded to check the [Provider Rates & Fee Schedule web page](#) before billing, to ensure procedure codes are a covered benefit. All codes must be reviewed for medical necessity, prior authorization coverage standards and rates before they are reimbursable.

New Procedure Codes Suspending for Explanation of Benefits (EOB) 0000 "This claim/service is pending for program review." may be under review for 30 - 60 days. Physician Administered Drugs (PADs) require a National Drug Code (NDC) assignment and may take up to 90 days before implementation. The Colorado interChange is updated with the billing codes based on the Centers for Medicare & Medicaid Services (CMS) release of deletions, changes and additions. Claims will be released from suspense once the update is complete.

Resolved Issues

Resolved 10/03/22:

Physician Services: Claims for Physician Administered Drugs (PAD) Denying on New J Codes

Claims that require a prior authorization (PA) were denying on new codes that were effective October 1, 2022: J0178, J0202, J0219, J0221, J0490, J0491, J1303, J2796, J3032, J3241.

An error occurred which did not adequately allow PA submission for the new codes. This error has been rectified as of Monday, October 3, 2022.

Retroactive PAs for dates of service October 1, 2022, to October 6, 2022, may be accepted

for the PAD PA required codes that were effective October 1, 2022. Approved PA numbers may be found in Atrezzo.

Claims billed and denied for dates of service October 1, 2022, to October 12, 2022, were reprocessed on October 25, 2022.

Issue resolved 10/03/22.

Resolved 10/28/22:

Physician Services: Claims for Physician Administered Drugs (PAD) Denying for Explanation of Benefits (EOBs) 0192 and 3053

Some professional claims that were billed with a Physician Administered Drug (PAD) may have denied with EOBs 0192: "Prior Authorization (PA) is required for this service. An approved PA was not found matching the provider, member, and service information on the claim" and EOB 3053: "Prior Authorization (PA) is required for inpatient services. An approved PA was not found matching the provider, member, and service information on the claim."

Issue resolved 10/28/22.

Affected claims will be reprocessed. Providers can rebill the line items that do not require a prior authorization (PAR) separately until they obtain the PAR for all applicable services.

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