Unlisted Procedure Code Form

Complete this form and attach it and the operative report to the claim via the Provider Web Portal.

Provider Request

Billing Provider Name: _____

Billing Provider National Provider Identifier (NPI): _____

Unlisted Procedure Code: _____

Comparable Procedure Code: _____

Time to Complete Procedure (in minutes): _____

Billed Charges: _____

Visit the Provider Services Call Center for questions regarding claim status or billing.

Improve health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.
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