



Automated Medical Payments

Medicaid Bulletin

Colorado Title XIX

Fiscal Agent

CONSULTEC
INC.
600 Seventeenth Street
Suite 600 North
Denver, CO 80202

Medicaid Provider Services

303-534-0146
1-800-237-0757

Mailing Addresses

Claims & PARs
P.O. Box 30
Denver, CO 80201-0030

Correspondence, Inquiries & Adjustments
P.O. Box 90
Denver, CO 80201-0090

Provider enrollment, Provider information,
Changes, Signature authorization,
and Claim requisitions
P.O. Box 1100
Denver, CO 80201-1100

**Medicaid Fiscal Agent
Information on the Internet**
WWW.CONSULTEC-GCRO.COM

Medicaid bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medicaid Provider Manual and should be retained with the provider manual for reference. Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.

Please direct questions about bulletins and billing information to Medicaid Provider Services.

Distribution: Dental Providers

June 1999

Reference: B9900018

Urgent Read Immediately

Medicaid dental rate changes

The State of Colorado announces dental rate changes for the codes identified on the following pages for dental services provided on or after July 1, 1999. The rate changes represent the approval of appropriations by the State legislature for the fiscal year 1999-2000.

Providers required to bill usual and customary fees

Providers are required to bill usual and customary fees - the same fees charged to non-Medicaid covered individuals - when submitting Medicaid fee-for-service claims.

- ✓ Submission of usual and customary fees provides important information for the Medicaid budgeting process and reporting to the State legislature.
- ✓ Providers are paid the Medicaid maximum allowable rate on file (as determined by the State) or the provider's billed charge, whichever is less.
 - ▶ Providers who attempt to match submitted charges to the Medicaid reimbursement rate do not receive a higher payment when rates are increased.
 - ▶ The fiscal agent does not adjust claim payments for providers who have failed to submit usual and customary charges and retroactively wish to increase submitted charges to take advantage of rate changes.
- ✓ Providers may not charge Medicaid a higher fee than that charged to non-Medicaid covered individuals even if the Medicaid allowable fee is greater than the provider's usual and customary fee.
 - ▶ If special discounts are available to non-Medicaid covered individuals, claims submitted to the Medicaid program must represent the same discounted charges as those available to the general public.

Providers will note reimbursement changes on their remittance statements for the codes identified on the following pages for services provided on or after July 1, 1999.

Effective with July 1, 1999 date of service, the codes listed below are no longer Colorado Medicaid dental benefits based on very limited utilization:

D2710 D2721 D2740 D6251 D6721

Dental Procedure Code	Maximum Allowed Fee
D0120	\$17.00
D0140	\$22.00
D0150	\$30.00
D0160	\$41.00
D0210	\$48.00
D0220	\$9.00
D0230	\$7.00
D0240	\$14.00
D0250	\$17.00
D0260	\$17.00
D0272	\$16.00
D0274	\$21.00
D0290	\$18.00
D0320	\$231.00
D0322	\$69.00
D0330	\$41.00
D0340	\$33.00
D0460	\$13.00
D0470	\$35.00
D0471	\$21.00
D0501	\$64.00
D1110	\$36.00
D1120	\$24.00
D1201	\$34.00
D1203	\$14.00
D1204	\$14.00
D1205	\$44.00
D1351	\$17.00
D1510	\$101.00
D1515	\$140.00
D1520	\$111.00
D1525	\$153.00
D1550	\$18.00
D2110	\$37.00
D2120	\$48.00
D2130	\$56.00

Dental Procedure Code	Maximum Allowed Fee
D2131	\$65.00
D2140	\$44.00
D2150	\$57.00
D2160	\$69.00
D2161	\$84.00
D2330	\$55.00
D2331	\$69.00
D2332	\$84.00
D2335	\$101.00
D2336	\$67.00
D2380	\$43.00
D2381	\$52.00
D2382	\$63.00
D2385	\$59.00
D2386	\$78.00
D2387	\$97.00
D2751	\$368.00
D2791	\$335.00
D2910	\$26.00
D2920	\$35.00
D2930	\$92.00
D2931	\$107.00
D2932	\$91.00
D2933	\$126.00
D2940	\$34.00
D2950	\$90.00
D2951	\$22.00
D2952	\$131.00
D2954	\$106.00
D2955	\$26.00
D2970	\$63.00
D3110	\$28.00
D3120	\$24.00
D3220	\$63.00
D3240	\$120.00
D3310	\$240.00

Dental Procedure Code	Maximum Allowed Fee
D3320	\$291.00
D3330	\$362.00
D3346	\$240.00
D3347	\$291.00
D3348	\$362.00
D3351	\$160.00
D3352	\$68.00
D3353	\$120.00
D3426	\$110.00
D3430	\$71.00
D3450	\$210.00
D3910	\$28.00
D3920	\$149.00
D3950	\$49.00
D4210	\$184.00
D4211	\$67.00
D4220	\$103.00
D4240	\$259.00
D4249	\$282.00
D4250	\$262.00
D4260	\$325.00
D4271	\$325.00
D4320	\$93.00
D4321	\$129.00
D4341	\$94.00
D4355	\$58.00
D4381	\$68.00
D4910	\$49.00
D5110	\$594.00
D5120	\$594.00
D5130	\$638.00
D5140	\$635.00
D5211	\$392.00
D5212	\$404.00
D5213	\$626.00
D5214	\$627.00

D5281	\$400.00	D6241	\$368.00	D7460	\$120.00
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Dental Procedure Code	Maximum Allowed Fee
D5410	\$24.00
D5411	\$22.00
D5421	\$23.00
D5422	\$22.00
D5510	\$35.00
D5520	\$24.00
D5610	\$65.00
D5620	\$94.00
D5630	\$83.00
D5640	\$52.00
D5650	\$69.00
D5660	\$90.00
D5710	\$188.00
D5711	\$171.00
D5720	\$174.00
D5721	\$174.00
D5730	\$103.00
D5731	\$106.00
D5740	\$85.00
D5741	\$85.00
D5750	\$154.00
D5751	\$154.00
D5760	\$138.00
D5761	\$138.00
D5810	\$243.00
D5811	\$243.00
D5820	\$159.00
D5821	\$159.00
D5850	\$33.00
D5851	\$33.00
D6010	\$599.00
D6020	\$262.00
D6211	\$335.00

Dental Procedure Code	Maximum Allowed Fee
D6545	\$235.00
D6751	\$368.00
D6791	\$335.00
D6930	\$49.00
D6970	\$131.00
D6972	\$106.00
D6973	\$90.00
D7110	\$52.00
D7120	\$48.00
D7130	\$57.00
D7210	\$88.00
D7220	\$103.00
D7230	\$129.00
D7240	\$151.00
D7241	\$171.00
D7250	\$98.00
D7260	\$205.00
D7270	\$101.00
D7280	\$169.00
D7281	\$82.00
D7285	\$112.00
D7286	\$86.00
D7290	\$103.00
D7291	\$65.00
D7310	\$84.00
D7320	\$112.00
D7340	\$85.00
D7410	\$74.00
D7420	\$110.00
D7430	\$97.00
D7431	\$118.00
D7450	\$183.00
D7451	\$222.00

Dental Procedure Code	Maximum Allowed Fee
D7461	\$260.00
D7465	\$60.00
D7470	\$187.00
D7480	\$92.00
D7510	\$52.00
D7520	\$87.00
D7530	\$62.00
D7550	\$38.00
D7670	\$267.00
D7910	\$61.00
D7960	\$109.00
D7970	\$124.00
D7971	\$51.00
D8010	\$298.00
D8020	\$330.00
D8030	\$361.00
D8040	\$392.00
D8210	\$214.00
D8220	\$237.00
D9110	\$43.00
D9220	\$172.00
D9221	\$42.00
D9230	\$21.00
D9240	\$213.00
D9310	\$32.00
D9410	\$52.00
D9420	\$52.00
D9940	\$182.00
D9951	\$60.00
D9952	\$216.00
X9250	\$42.00
X9260	\$26.00
X9925	\$26.00