



Automated Medical Payments

Medicaid Bulletin

Colorado Title XIX

Fiscal Agent

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Medicaid Provider Services

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Mailing Addresses

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

Correspondence, Inquiries & Adjustments
P.O. Box 90
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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 Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.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: Nursing facility providers

April 2000

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Urgent Read Immediately

Medicaid Activates Edit for Nursing Facility claims

Some Nursing Facility (NF) claims were paid in error because the Medicaid claims processing system did not have the prior authorization edit activated. These claims should have been denied for "Prior authorization not on file."

The prior authorization edit will be activated on May 1, 2000. Any NF claims submitted on and after May 1, 2000 without an approved prior authorization on file will be denied.

Nursing Facilities must have a valid ULTC 100 approved by the Colorado Foundation for Medical Care (CFMC). CFMC approves the care, assigns a confirmation number, and submits the approval to the fiscal agent. The NF receives ULTC 100 prior authorization notification from CFMC.

If providers believe their claims were denied in error for no prior authorization on file, they should contact CFMC. CFMC can verify that the ULTC 100 was approved and submitted to the fiscal agent.

Please note that approval of a ULTC 100 does not guarantee Medicaid payment and does not serve as a timely filing waiver. All claims, including those for prior authorized services, must meet eligibility and claim submission requirements before payment can be made.

If you have questions about ULTC 100 prior authorizations, please contact CFMC at:

303-695-3040 or 1-800-888-7053 (toll-free Colorado).

Please direct questions about Medicaid billing or the information in this bulletin to Medicaid Provider Services at:

303-534-0146 or 1-800-237-0757 (toll free Colorado)