



Automated Medical Payments

# Medicaid Bulletin Colorado Title XIX

Fiscal Agent



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

[coloradomedicaid.acs-inc.com](http://coloradomedicaid.acs-inc.com)

Distribution: Pharmacy Providers

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## Pricing changes for the pharmacy program

Effective April 1, 2002 the reimbursement calculation for payments to Colorado Medicaid Pharmacy providers is changing.

### Reimbursement formula change

Colorado Medicaid is raising the discount to 12% for the Average Wholesale Price (AWP). The reimbursement for all Colorado Medicaid Pharmacy Providers will be the AWP minus 12%.

All other reimbursement formulas remain the same.

Colorado Medicaid uses pricing methodology that allows the lowest price.

Please direct questions about these changes to PDCS

Pharmacy Support at:

1-800-365-4944

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 Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.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.