

# Medical Assistance Program Bulletin

Colorado Title XIX

Fiscal Agent



600 Seventeenth Street Suite 600 North Denver, CO 80202

### Medical Assistance Program 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

Medical Assistance Program
Fiscal Agent Information
on the Internet

www.chcpf.state.co.us

Click on the Provider Services tab at the top of the web page

Medical Assistance Program bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medical Assistance Program 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 Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.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 Medical Assistance Program Provider Services.

**Distribution: All providers** 

February 2007 Reference: B0700229

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# All Providers NPI: Get It. Share It. Use It.

Over 1 million National Provider Identifiers (NPIs) have been issued. Do you have yours?

If you are a health care provider who bills for Colorado Medical Assistance Programs, you need an NPI, pursuant to federal regulation 45CFR Part 162. *As of January 23, 2006, only four months remain until the NPI compliance* 



date. The implementation of the NPI is a complex process that will impact all business functions pertaining to your practice, office or institution including: billing, reporting and payment. This is why providers are urged to get, share, and use their NPI NOW to avoid a disruption in cash flow. The Centers for Medicare and Medicaid Services (CMS)

continues to urge providers to include legacy identifiers on their NPI applications. This information is critical for health plans and health care clearinghouses in the development of crosswalks to aid in the transition to the NPI.

#### **Sharing NPIs**

Once providers have received their NPIs, they should share their NPIs with other providers with whom they do business and with health plans that request it. In fact, as outlined in current regulation, all providers must share their NPI with other providers, health plans, clearinghouses, and any entity that may need it for billing purposes – including designation of ordering or referring physician. Providers should also consider letting health plans, or institutions for whom they work, share their numbers for them.

#### **NPIs are FREE!**

Health care providers should know that getting an NPI is free. Providers do not need to pay an outside source to obtain an NPI. All CMS education on the NPI is also free. CMS does not charge for its education or materials.



#### **Getting your NPI**

Providers can apply for an NPI online at https://nppes.cms.hhs.gov or call the NPI enumerator to request a paper application at 1-800-465-3203.

#### **NPI Questions**

The Department of Health Care Policy and Financing's Provider Services Web Page has a new FAQ section for NPI! This is found at http://www.chcpf.state.co.us/ACS/FAQ/Faq.asp

Providers should remember that the NPI Enumerator can <u>only</u> answer/address the following types of questions/issues:

- Status of an application
- Forgotten/lost NPI
- Lost NPI notification letter
- Trouble accessing NPPES (National Plan and Provider Enumeration System)
- Forgotten password/User ID
- The request of a paper application
- Clarification on information that is to be supplied in the NPI application

Providers needing this type of assistance may contact the enumerator at 1-800-465-3203.



# **Upcoming WEDI Events**

WEDI has several NPI events scheduled in the upcoming month. Visit http://www.wedi.org/npioi/index.shtml to learn more about these events. Please note that there is a charge to participate in WEDI events.

#### Still Confused?

Not sure what an NPI is and how to get it, share it and use it? As always, more information and education on the NPI can be found at the CMS NPI page www.cms.hhs.gov/NationalProvIdentStand on the CMS website. Providers can apply for an NPI online at https://nppes.cms.hhs.gov or call the NPI Enumerator to request a paper application at 1-800-465-3203.

#### Getting an NPI is free - not having one can be costly.

#### The Fiscal Agent is Collecting NPIs!

The fiscal agent (ACS) has started collecting NPI numbers. Please submit NPI information on the provider's letterhead with the corresponding Medicaid provider number and a signature of the person whose NPI number is listed (i.e. the doctor) You may also use the Provider Update form located at:

http://www.chcpf.state.co.us/ACS/Pdf Bin/Updated Procedure.pdf

Effective May 1, 2007, the fiscal agent will pend new provider applications without NPI numbers. The new enrolling providers will have 60 days to provide their NPI number. If the NPI number is not submitted within 60 days, the enrollment application will be denied.



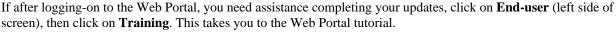
If a provider does not know if they are required to have an NPI, they should contact the enumerator at 1-800-465-3203.

#### Web Portal Tip

#### **Provider Enrollment Updates**

Did you know that provider information updates and affiliation changes can be made through the Web Portal and are effective within 24 hours? Providers may update/change the following information through the Web Portal: **Addresses**,

Phone numbers, Fax numbers, Publications preference, Medicare information and Affiliations.



You may also select the **specific category** on the left side of screen and then click on "*Help*" on the navigation bar on the top of the screen. The "*Help*" category provides additional details about provider updates.

Use the Web Portal to update your provider information – It's much faster and far easier than submitting information on your letterhead!

#### **Eligibility Reminder**

# Did you know that calling Medical Assistance Program Provider Services for eligibility information is not a guarantee of the client's eligibility?

Many times, provider staff members spend unnecessary time on this non-guaranteed process. Other eligibility verification methods are guaranteed and both the Web Portal and FaxBack provide hardcopies for the client's file. Eligibility verification methods are listed below in the order of preferred use.

Eligibility verification should be made by:

- 1. Obtaining a copy of the Medical Identification (MID) card, and
- 2. Obtaining birth date and State ID or Social Security Number (SSN), and
- 3. Verifying eligibility and coverage through one of the following methods:
  - Web Portal: X12N 270 Eligibility Inquiry
  - **Fax-Back**: 1-800-493-0920 Toll free
  - CMERS: 303-534-3500 Denver Metro; 1-800-237-0044 Toll free Colorado

Maintain copies of eligibility and coverage information in the client's file for audit purposes.

**Please Note:** The Web Portal, Fax-Back and CMERS **cannot** verify eligibility for services **over 365 days old**. For eligibility inquiries for services over 365 days old, providers must call Provider Services at 303-534-0146 or 1-800-237-0757 and choose the Eligibility option.



# **Presidents' Day Claims Processing Schedule**



Due to the Presidents' Day holiday on Monday, February 19, 2007, claim payments will be processed on Thursday, February 15, 2007. The processing cycle includes electronic claims accepted before 6:30 P.M. on Thursday.

#### **Colorado Medical Assistance Program Enrollment Application Workshop**

The fiscal agent will conduct the first of four 2007 Provider Enrollment Application workshops on Wednesday, February 21, 2007 (9:00am-1:00pm). The workshop focuses on the importance of correctly completing the Colorado Medical Assistance Provider Application. The workshop is located at:

ACS

600 Seventeenth Street Suite 600 N (6th Floor, North Tower) Denver, CO 80202



Please email reservations to: workshop.reservations@acs-inc.com or Call Medical Assistance Program Provider Services to make reservations. 1-800-237-0757 or 303-534-0146

Please go to http://www.chcpf.state.co.us/ACS/Enrollment/new\_providers.asp and click on your provider type. Please download and print your enrollment documents and bring them with you to the workshop.



In December 2006, the 2007 Practitioner, Radiology and Laboratory, Vision and Supply HCPCS, the 2007 Dental ADA codes, the 2007 ASC codes and the 2007 Immunization bulletins were posted in the Provider Services Bulletins section of the Department's website at http://www.chcpf.state.co.us/ACS/Provider\_Services/Bulletins/Bulletins.asp. A

CD containing these bulletins was mailed in January 2007 to providers who do not have an email address on file with the fiscal agent.

To receive links to future bulletins, sign-up for email notification. You will receive the information up to a week sooner than waiting for the mail. This can easily be done through the Web Portal.

# Sign-up for Electronic Bulletin Notification!

Did you know you can stop receiving paper bulletins and start receiving your Colorado Medical Assistance Program bulletins by email notification? Email notifications contain a link to the latest bulletin and allow providers to receive bulletin information up to a week sooner than bulletins sent by mail. *Medical Assistance Program enrolled providers who do not have their email on file with the fiscal agent should complete and submit their information through the Inquiry/Update Provider Data option located at the main menu within the Web Portal.*Providers may also complete and submit the attached Publication Preferences form (Attachment B). Please fax or

Providers may also complete and submit the attached Publication Preferences form (Attachment B). Please fax or mail the completed form to the fiscal agent at the fax number/address on the form. Thank you for promptly completing and submitting the Publication Preferences form.

Providers are responsible for ensuring that the fiscal agent has their current publications email address on file. The Colorado Medical Assistance Program is not responsible for undeliverable notifications due to incorrect email addresses.

**Please Remember:** Providers may have **only one** email address on file with the fiscal agent. The person receiving the email notification should forward the email to all additional people needing the updated information.

#### It's Time to Sign-up for EFT!



Don't let snow storms delay your paper checks (warrants)! To avoid mail delays, sign up for Electronic Funds Transfer (EFT). EFT is the safest, best, fastest and easiest way to receive Medical Assistance Program payments. The EFT form is located in the Provider Services Forms section of the Department's website at:

http://www.chcpf.state.co.us/ACS/Provider\_Services/Forms/Forms.asp

EFT permanently solves paper check (warrant) problems!

# **Dental Providers**Update to Dental ADA Codes Bulletin

The Dental ADA Codes (B0600221) bulletin has been updated to include Exclusions for Adult Clients. The revised bulletin is posted in the Provider Services Bulletins section of the Department's website at:

http://www.chcpf.state.co.us/ACS/Provider\_Services/Bulletins/Bulletins.asp

# **Pharmacy Providers**

### Coming Soon - A New Version of the Prescription Drug Card System

In an ongoing effort to improve pharmacy drug claims processing, the Department of Health Care Policy and Financing will implement a new version of their Prescription Drug Card System within the coming months. Affiliated Computer Services (ACS) will continue to serve as the Prescriptions Benefit Manager (PBM) during and after this system conversion. Information related to pharmacy claims processing changes will be distributed before the implementation to ensure a smooth transition. Please watch for upcoming news about the transition.



# **Changes to Pharmacy Prior Authorization Criteria**



Starting March 1, 2007, the Department of Health Care Policy and Financing (Department) will implement the following changes to the pharmacy prior authorization criteria. The DUR Board approved these changes at the quarterly DUR Board meeting held on November 8, 2006. Medications that will require a prior authorization starting March 1, 2007 will only be approved when the listed criteria has been met. These changes are also posted on the Department's pharmacy webpage at

http://www.chcpf.state.co.us/HCPF/Pharmacy/phmindex.asp.

Please direct any questions or concerns about the prior authorization changes to Kim Eggert at 303-866-3176 or kimberly.eggert@state.co.us.

| Medication  | Criteria for Approval  |  |  |
|---|--|--|--|
| Zantac Liquid   | For clients 12 to 64 years of age.  A prior authorization will be granted for clients with a feeding tube or who have difficulty swallowing. A prior authorization is not required for children under 12 years of age.   |  |  |
| Methadone/<br>Revia/Revex/<br>Narcan/Depad/Trexan   | A prior authorization will no longer be required   |  |  |
| Tramadol  | A prior authorization is required for more than 8 tablets per day or 400mg/day   |  |  |
| Vicodin/Lortab/Lorcet/Norco/Percocet/ Darvocet/Wygesic/Fioricet/Tylox/ Tylenol w/ Codeine/Ultracet/ Zydone/Panlor/Esgic and all generic equivalents and strengths | A prior authorization is required for dosages over 4000mg/day.   |  |  |
| Injectables: Risperdal Consta/Zyprexa/Geodon/ Vivitrol/Didronel/Boniva/Aredia/ Miacalcin/Zemplar/Hectorol/Zometa/ Pamidronate/Ganite/Xolair                       | A prior authorization will only be approved as a pharmacy benefit when the medication is administered in a long-term care facility or in a client's home.  |  |  |
| Provigil  | Approved for clients 16 years of age and older with excessive sleepiness associated with one of the following conditions:  Narcolepsy  Obstructive Sleep Apnea/Hypopnea Syndrome  Shift Work Sleep Disorder  Multiple Sclerosis related fatigue  |  |  |
| Ritalin/<br>Concerta/<br>Daytrana/Focalin Xr/ Metadate  | Prior authorization is required for clients 5 years of age and under (3-5 years old) and for clients 18 years of age and older, both must meet the following criteria:  > Clients must be 3 years of age or older  > Diagnosis of Narcolepsy, ADD, ADHD or Traumatic Brain Injury  Notes:  > Clients between the ages of 6-17 years old do not require a prior authorization.  A PA will not be granted for a diagnosis of obesity control   |  |  |
| Dexedrine and Adderall  | Approvals will no longer be given for senile depression.  The current criteria will remain the same.  Prior authorization is required for clients 5 years of age and under (3-5 years old) and for clients 18 years of age and older, both must meet the following criteria:  Clients must be 3 years of age or older  Diagnosis of Narcolepsy, ADD or ADHD or Traumatic Brain Injury  Notes:  Clients between the ages of 6-17 years old do not require a prior authorization.  A PA will not be granted for a diagnosis of obesity control |  |  |

### **Practitioners**

# Update to Immunization Benefit Update Bulletin

The Immunization Benefit Update bulletin (B0600222) has been updated to include the Recommended Immunization Schedule for 2007. The revised bulletin is posted in the Provider Services Bulletins section of the Department's website at:



http://www.chcpf.state.co.us/ACS/Provider Services/Bulletins/Bulletins.asp

#### Medicaid Reimbursement for Administration of HPV Vaccine

As of January 19, 2007, the Colorado Vaccines for Children (VFC) program is accepting orders for quadrivalent Human Papillomavirus (HPV) vaccine for VFC eligible females 9-18 years of age. Quadrivalent HPV vaccine is an inactivated, vaccine that protects against four major types of HPV. These include types of HPV that cause approximately 70% of cervical cancer. The vaccine is administered in a 3 injection series. Colorado Medicaid will reimburse providers for administration of HPV vaccine to girls and young women when the vaccine is obtained through VFC. Please remember that VFC vaccine can't be used on anyone older than 18 years of age.

Medicaid will also reimburse Medicaid providers for administration of the HPV vaccine for eligible young women, ages 19 and 20, through the Infant Immunization program.

To order the vaccine, providers should contact Rosemary Spence at 303-692-2798 or Rosemary.Spence@state.co.us





Effective February 1, 2007, the Primary Care Provider (PCP) referral requirement for Outpatient Substance Abuse Treatment Services has been eliminated. When filing a claim, in either electronic or paper form, please do not enter a Referring Provider number. Approved services must still be provided by a practitioner or facility with a substance abuse provider specialty type.

# February and March 2007 Denver Provider Billing Workshops

#### **General Information**

Provider billing workshops include both Medical Assistance Program Billing instructions and a review of Medical Assistance Program billing procedures. There are specific classes for new billers to the Medical Assistance Program and for specialty training for different types of providers. The schedule for February and March 2007 Denver workshops follows.



#### Who Should Attend?

New and experienced receptionists, front desk personnel, admission personnel, office managers, billing services, and other billers should attend the appropriate workshops.

#### Do I need Reservations?

Yes, reservations are necessary for *all workshops*. We are currently requesting reservations for both Statewide and Denver workshops in order to provide adequate space in all workshops.



Email reservations to: workshop.reservations@acs-inc.com

Call Medical Assistance Program Provider Services to make reservations. 1-800-237-0757 or 303-534-0146

Press "5" to make your workshop reservation. This transfers you to a voice mail where you must leave the following information:

- Medical Assistance Program provider billing number
- The date and time of the workshop
- The number of people attending and their names
- Contact name, address and phone number

Without all of the requested information, your reservation will not be processed successfully.

Your confirmation will be mailed to you within one (1) week of making your reservation. If you do not receive a confirmation within one (1) week please contact Provider Services and talk to a Provider Relations Representative.

#### Class Descriptions

For a complete list of class descriptions, please see bulletin B0700227 (January 2007) or the 2006 Denver and Statewide Workshop Schedule in the Provider Services Training and Workshops section of the Department's website at: http://www.chcpf.state.co.us/ACS/Provider\_Services/Train\_Workshops/train\_workshops.asp.



600 Seventeenth Street Suite 600 N (6th Floor, North Tower) Denver, CO 80202

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ACS

# Denver Beginning Billing Schedule 9:00am – 3:00pm

**Beginning Training CO-1500/837P** 

02/06/07 - Tuesday 03/13/07 - Tuesday Beginning Training UB-92/837I

02/07/07 - Wednesday 03/14/07 - Wednesday



# **Denver Specialty Training Schedule**

**Audiology** 

03/19/07 - Monday, 10:00am-11:30am

Dental

03/29/07 - Thursday, 10:00am-12:00pm

**Dialysis** 

03/28/07 - Wednesday, 3:00pm-4:00pm

FQHC/RHC

03/29/07 - Thursday, 1:00pm-3:00pm

HCBS CO-1500/837P

03/21/07 - Wednesday, 10:00am-12:00pm

**HCBS UB-92/837I** 

03/21/07 - Wednesday, 1:00pm-3:00pm

**Home Health** 

03/20/07 - Tuesday, 11:45am-1:00pm

Hospice

03/22/07 - Thursday, 9:30am-10:30am

Hospital

03/22/07 - Thursday, 11:00am-2:00pm

**Nursing Facility** 

03/20/07 - Tuesday, 9:00am-11:15am

**Obstetrical Care** 

03/27/07 - Tuesday, 3:30pm-4:30pm

Physical/ Occupational and Speech Therapy

03/27/07 - Tuesday, 9:00am-11:00am

Pharmacy

03/28/07 - Wednesday, 9:00am-11:00am

**Practitioner** 

03/27/07 - Tuesday, 1:00pm-3:00pm

Supply/DME

03/28/07 - Wednesday, 12:30pm-2:30pm

**Transportation** 

03/19/07 - Monday, 2:00pm-4:00pm

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

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

Remember to check the Provider Services section of
The Department's website at:

http://www.chcpf.state.co.us/ACS/Provider\_Services/provider\_services.asp For Provider News and Updates

#### **Publication Preferences**

#### **Publication and Notification Preference**

Medical Assistance Program updates and billing instructions are communicated through Medical Assistance Program publications. An email notification with a link to the publication will be sent to providers when new bulletins, publication revisions and program updates are posted on the Provider Services Section of the Department's website. Providers are responsible for ensuring that the fiscal agent has their current publications email address on file. The Colorado Medical Assistance Program is not responsible for undeliverable notifications due to incorrect email addresses.

All publications are available in the Provider Services section of the Department's website:

| http://www.chcpf.state.co.us/ACS/Provider_Services/provider_services.asp  |  |   |                |  |  |
|---|--|---|----------------|--|--|
| Please complete the following information:  |  |   |                |  |  |
| Provider Name:  |  | Medical Assistance<br>Program Provider Number | er:            |  |  |
| Contact Name:   |  | Telephone Number: (                           | )              |  |  |
| Address:  | Street/PO Box  |   | 75.0.1         |  |  |
|   | Street/PO Box  |   | State Zip Code |  |  |
| Provider Publications Email Address:  |  |   |                |  |  |
|   |  |   |                |  |  |
| Publications Media:<br>(Please check one)   | A settlement it is a little of the control of the c |   |                |  |  |
| None (I understand that I am responsible for retrieving publications from the website and<br>that I will <b>not</b> receive an email notification from the Colorado Medical Assistance<br>Program). |  |   |                |  |  |
|   | Authorized Signature   |   | Date           |  |  |
| Please complete all of the above information and  |  |   |                |  |  |

Fax to: Mail to:

Medical Assistance Program Provider Enrollment Medical Assistance Program Provider Enrollment 303-534-0439 PO Box 1100 Denver, CO 80201-1100

Revised 04/26/05

Reference #: B0600229 Attachment A