

All Providers

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Did You Know?

Load letters or other timely filing requests are not necessary when the claim is submitted within 365 days from the date of service. Providers always have the initial 365 days to submit a claim. Referencing the previous claim number or attaching a timely filing override is only needed if the initial timely filing period has expired.

All Providers

Change in Provider Services Call Center Hours

Effective February 5, 2020, the [Provider Services Call Center](#) hours of operation changed as follows:

- Monday, Tuesday, Wednesday and Thursday: 7:00 a.m. - 5:00 p.m. MT. Previously, the Provider Services Call Center did not open until 10:00 a.m. MT on Wednesday.
- Friday 10:00 a.m. - 5:00 p.m. MT

The Provider Services Call Center utilizes the time between 7:00 a.m. and 10:00 a.m. MT on Fridays to return calls to providers.

National Correct Coding Initiative (NCCI) Notification of Quarterly Updates

Providers are encouraged to monitor Centers for Medicare & Medicaid Services (CMS) for updates to NCCI rules and guidelines. Updates to the procedure-to-procedure (PTP) and medically unlikely edit (MUE) files are completed quarterly with the next file update available April 2020.

For more information, visit the [CMS National Correct Coding Initiative Edits web page](#).

Provider Enrollment Updates Limited to One per Service Location

The [Provider Web Portal](#) limits the number of open/outstanding provider enrollment updates per unique service location as follows:

- One (1) open Provider Maintenance or Revalidation update and
- One (1) open Electronic Funds Transfer (EFT) update

Refer to the examples below:

- If the service location has previously submitted an EFT enrollment application and the application is still under review, the location will be unable to submit another EFT enrollment application.
- If the service location has previously submitted a provider maintenance request and the request is still under review, the location will be unable to submit another provider maintenance request or a revalidation application.

Refer to the Provider Maintenance Quick Guide available on the [Quick Guides and Webinars web page](#) for more information.

Contact the [Provider Services Call Center](#) at 1-844-235-2387 with questions.

Timely Filing and Resubmissions

Providers always have the initial timely filing period of 365 days from the date of service to submit claims. Providers have an additional 60 days from the date of the last remittance advice to resubmit, if the initial 365-day period has expired. If the date of service is still within 365 days, providers do not need to refile every 60 days.

The previous internal control number must be entered on the claim when resubmitting, if the date of service is past 365 days.

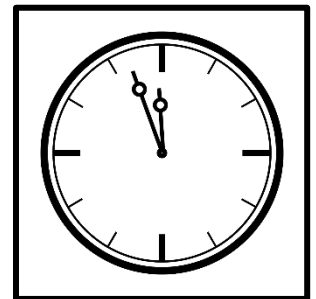
If a claim was originally submitted within the timely filing guideline and denied or recouped, providers have an additional 60 days from the date of the last remittance advice to resubmit.

A resubmission or adjustment of a paid claim must also be within timely filing guidelines.

Resubmissions do not need to be sent as a reconsideration.

Providers are required to resubmit claims every 60 days after the initial timely filing period to keep the claim within the timely filing period, even if the claim denies.

Waiting for prior authorization or correspondence from the Department of Health Care Policy & Financing (the Department) or the fiscal agent is not an acceptable reason for late filing. Phone calls and other correspondence are not proof of timely filing. The claim must be submitted, even if the result is a denial.



Home and Community Based Services (HCBS) & HCBS-Children's Extensive Support (CES) Waiver Providers

Explanation of Benefits (EOBs) Filtering for HCBS Providers

Effective February 26, 2020, the [Provider Web Portal](#) has been updated to simplify EOBs returned to HCBS providers. With this update, EOBs are filtered before they are delivered to HCBS providers. As a result, when claims or details deny for HCBS providers, only EOBs that pertain to HCBS benefit plans will be shown.

Contact the [Provider Services Call Center](#) at 1-844-235-2387 with questions.

New Benefit - Youth Day Services

Youth Day Services for youth ages 12-17 enrolled in the (HCBS-CES) waiver can now be added to members' service plans. Providers need to discuss with families and case managers when to distinguish between Youth Day and Respite.

The Youth Day Services Specialty (751) has been added to existing CES-Respite Providers' enrollment profiles retroactive to February 1, 2020.



Current CES-Respite Providers are eligible through this waiver. Providers need to discuss with families and case managers when to distinguish between Youth Day Services and Respite Services for billing. Providers should follow the billing codes and rates for each service, as outlined in the HCBS-IDD Billing Manual available on the [Billing Manuals web page](#) under the HCBS drop-down section.

The following procedure codes are available for Group (T2027 U7 HQ) and Individual (T2027 U7). A limit of ten (10) hours per member per day for these services (in any combo of group/individual units) applies. There is no Individual-Per Diem for Youth Day.

Youth Day Services (Individual) T2027 U7

- Reimbursed at \$5.70 per 15 minute Unit

Youth Day Services (Group) T2027 U7 HQ

- Reimbursed at \$1.90 per 15 minute Unit

Contact Kathleen Homan at Kathleen.Homan@state.co.us with questions or concerns related to CES - Youth Day or CES - Respite.

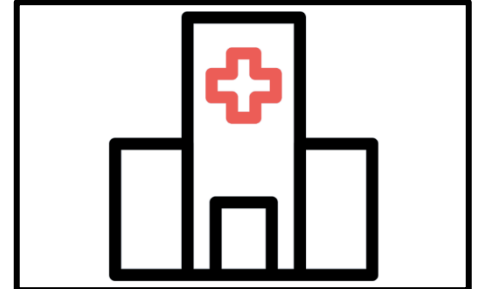
Hospital Providers

General Updates

All Hospital Providers

Bi-Monthly Hospital Stakeholder Engagement Meetings

The Department will continue to host bi-monthly Hospital Engagement meetings to discuss current issues regarding payment reform and operational processing. The next meeting is scheduled for **Friday, March 6, 2020, 9:00 a.m.-12:00 p.m. at 303 E 17th Ave, Denver, Conference Room 7B & 7C.** Calendar Year 2020 meetings have been posted.



[Sign up to receive the Hospital Stakeholder Engagement Meeting newsletters.](#)

[Visit the Hospital Engagement Meeting web page for more details, meeting schedule and past meeting materials.](#)

Contact Elizabeth Quaife at Elizabeth.Quaife@state.co.us with any questions or topics to be discussed at future meetings. Advanced notice will provide the Rates team time to bring additional Department personnel to the meetings to address different concerns.

Outpatient Hospital Providers

JW Modifier Mass Adjustment

Effective October 2, 2019, an issue involving the miscalculation of payment of discarded portions of drugs, as identified by the reporting of the JW modifier on drug lines for outpatient claims, was resolved in the Colorado interChange. With the resolution of this issue, the Colorado interChange reflects the Department's policy of disallowing payment for such drugs.

Though mass adjustments following the resolution of this issue were completed through the month of November 2019, additional claims were identified requiring adjustment. These adjustments are currently scheduled to occur within the first two weeks of March 2020.

Contact Andrew Abalos at Andrew.Abalos@state.co.us with any questions regarding outpatient hospital payment.

Nursing Facilities

Swing Bed Rate Effective January 1, 2020

Department rule 10 CCR 2505-5, §8.443.1.E. requires the nursing facility swing bed rate be updated annually and "shall be determined as the state-wide average class I nursing facilities payment rate at January 1 of each year." The updated swing bed rate effective January 1, 2020, is \$234.34. The Department has updated the rate in the Colorado interChange and claims reimbursement should reflect the updated rate for dates of services on or after January 1, 2020. Paid claims from January 1, 2020, through the present will be reprocessed and claims will be adjusted to reflect the new swing bed rate.

Contact Victoria Martinez at Victoria.L.Martinez@state.co.us with questions concerning rates or related issues.

Pharmacies and All Medication-Prescribing Providers

Preferred Drug List (PDL) Announcement of Preferred Products

The following PDL drug classes and preferred agents will become effective April 1, 2020.

Atypical Antipsychotics (oral)

Preferred products will be: Aripiprazole tab, Clozapine tab, Latuda2nd Line, Olanzapine, Q

Atypical Antipsychotics (oral)

Preferred products will be: Aripiprazole tab, Clozapine tab, Latuda2nd Line, Olanzapine, Quetiapine, Risperidone, Ziprasidone

Lithium agents

Preferred products will be: Lithium carbonate tab/cap, Lithium ER tab

CGRP Inhibitors

Preferred products will be: Emgality 120mg, Aimovig

Growth Hormones

Preferred products will be: Genotropin, Norditropin

Insulins (Mixtures)

Preferred products will be: Humalog 50/50 vial, Humalog 75/25 vial, Humalog mix pen, Humulin 70/30 vial/pen, Novolog 70/30 vial/pen

Insulins (Long-acting)

Preferred products will be: Lantus, Levemir

Insulins (Intermediate-acting)

Preferred products will be: Humulin N vial/pen

Insulins (Rapid-acting)

Preferred products will be: Novolog vial/pen/cartridge, Humalog vial/pen/Jr kwikpen/cartridge

Insulins (Short-acting)

Preferred products will be: Humulin R vial, Humulin R U-500 vial/pen

Glucagon, Self-Administered

Preferred products will be: GlucaGen hypokit, Glucagon emergency kit, Gvoke

Intranasal Rhinitis Agents

Preferred products will be: Azelastine, Budesonide, Fluticasone (generic Rx Flonase), Ipratropium, Triamcinolone (generic Nasacort)

Leukotriene Modifiers

Preferred products will be: Montelukast tab/chewable



Statins/Statin Combinations

Preferred products will be: Atorvastatin, Lovastatin, Pravastatin, Rosuvastatin, Simvastatin

Bile Salts

Preferred products will be: Ursodiol

Other Lipotropics

Preferred products will be: Colestipol tab, Cholestyramine, Colesevelam tab, Ezetimibe, Fenofibrate tab/cap (generic Lofibra and generic Tricor), Gemfibrozil, Niacin ER, Omega-3 (generic Lovaza)

Immune Globulins

Preferred products will be: Gammaplex, Privigen, Gammagard liquid, Gammaked, Gamunex-C, Hizentra, Cuvitru

Multiple Sclerosis Agents

Preferred products will be: Aubagio 2nd Line, Avonex, Betaseron, Copaxone 20mg, Gilenya 2nd Line, Tecfidera 2nd Line

Neurocognitive Disorder Agents

Preferred products will be: Donepezil 5mg tab, Donepezil 10mg tab, Donepezil ODT, Rivastigmine cap/patch, Memantine tab

Anti-Parkinson's Agents

Preferred products will be: Amantadine, Benztropine, Carbidopa/Levodopa IR, Carbidopa/Levodopa ER, Pramipexole IR, Ropinirole IR, Selegeline, Trihexyphenidyl tab/elixir

Ophthalmic Allergy Agents

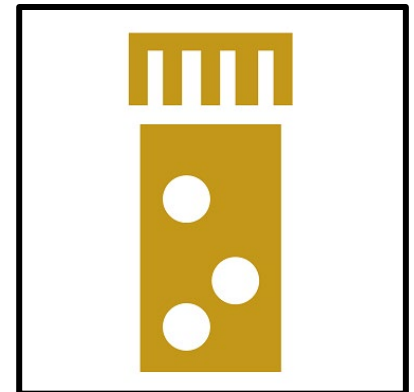
Preferred products will be: Alrex, Cromolyn, Ketotifen, Lastacaft, Olopatadine, Pazeo

Ophthalmic Anti-inflammatory Agents

Preferred products will be: Acuvail, Bromfenac, Diclofenac, Ketorolac, Flurbiprofen, Lotemax drops/ointment, Pred Mild, FML Forte, Flarex, Prednisolone acetate

Ophthalmic Glaucoma Agents

Preferred products will be: Alphagan P, Azopt, Brimonidine, Combigan, Dorzolamide, Dorzolamide/Timolol, Dorzolamide/Timolol PF, Latanoprost, Levobunolol, Lumigan, Timolol (generic Timoptic), Travatan Z

**Sedative Hypnotics**

Preferred products will be: Eszopiclone, Zaleplon, Zolpidem IR/ER, Temazepam 15mg, Temazepam 30mg, Triazolam

Topical Corticosteroids (Low Potency)

Preferred products will be: Fluocinolone acetonide cream, Hydrocortisone cream/oint/supp/lotion, Derma-Smoothe oil, Desonide cream/ointment

Topical Corticosteroids (Medium Potency)

Preferred products will be: Fluticasone cream/oint, Mometasone cream/oint/solution, Triamcinolone acetonide cream/ointment/lotion, Betamethasone dipropionate lotion, Betamethasone valerate ointment

Topical Corticosteroids (High Potency)

Preferred products will be: Betamethasone Dipropionate/Propylene Glycol cream, Fluocinonide gel/solution, Triamcinolone cream/oint, Fluocinonide oint

Topical Corticosteroids (Very High Potency)

Preferred products will be: Betamethasone Dipropionate/Propylene Glycol oint, Clobetasol Propionate cream/gel/oint/solution

Hemorrhoidal and Related Anorectal Agents

Preferred products will be: Hydrocortisone acetate 25mg supp, Cortifoam aerosol, Proctosol-HC 2.5% cream, Hydrocortisone 2.5% cream, Proctozone-HC 2.5% cream, Procto-Pak 1% cream, Procto-Med HC 2.5% cream, Hydrocortisone enema, Proctofoam-HC 1%-1%, Hydrocortisone-Pramoxine 1%-1%/2.5%-1% cream, Lidocaine-Hydrocortisone 3-0.5% cream

First Databank (FDB) termination of National Drug Codes (NDCs) from Mission Pharmacal

The following products from Mission Pharmacal may not be payable through the pharmacy system after March 31, 2020:

FERRALET 90 TABLET

CITRANATAL BLOOM TABLET

CITRANATAL HARMONY CAPSULE*

CITRANATAL 90 DHA COMBO PACK*

CITRANATAL ASSURE COMBO PACK*

CITRANATAL DHA PACK*

CITRANATAL RX TABLET*

CITRANATAL 90 DHA PACK*

FDB will terminate the products' NDCs from their system, which may cause rejected claims. Additionally, pricing that originates from FDB may not be available.

The Department will provide further details as they become available from involved parties, including the Centers for Medicare & Medicaid Services (CMS).

Drugs with an asterisk are preferred products in the prenatal vitamins/minerals therapeutic drug class on the PDL. Members utilizing these products should consider switching to a different agent to avoid possible interruption in therapy. Preferred products are listed on the Preferred Drug List (page 89-90), available on the [Pharmacy Resources web page](#). Alternative prenatal vitamins/minerals products include the following:

CONCEPT DHA capsule; CONCEPT OB capsule; M-NATAL PLUS; NESTABS tablets; PNV OB+DHA COMBO PACK PNV; PNV-FERROUS FUMARATE-DOCU-FA tablet; PRENAISSANCE PLUS capsule; PRENATAL LOW IRON tablet; PRENATAL VITAMIN PLUS LOW IRON; PREPLUS tablet; TRINATAL RX 1; TRUST NATAL DHA; VIRT-ADVANCE TABLET; VIRT-VITE GT TABLET; VOL-PLUS tablet

Pharmacy claim questions and prior authorization questions may be directed to Magellan Rx Management Pharmacy Call Center at 1-800-424-5725.

Physical, Occupational and Speech Therapy Providers

Updates to Healthcare Common Procedure Coding System (HCPCS)

Effective January 1, 2020, the Centers for Medicare & Medicaid Services (CMS) submitted new procedure codes.

Dry Needling

Procedure codes 20560 and 20561 for dry needling procedures will replace the current indicated code 97799. Providers should continue to use procedure code 97799 for dry needling if they currently have a prior authorization.

Cognitive Skills Development

Effective January 1, 2020, procedure codes 97129 and 97130 replaced G0515. Claims with dates of service on or after January 1, 2020, with procedure code G0515, will deny.

- For existing prior authorizations that have G0515, which also have an end-date in 2020, providers should *amend* those authorizations to add codes 97129/97130. This will be allowed without having to update the treatment plan or referral order.
- For *new* Prior Authorization Requests (PARs) beginning on or after January 1, 2020, procedure codes 97129/97130 must be requested instead of G0515.
- Procedure codes 97129 and 97130 require prior authorization in all instances.



The new 2020 Physical, Occupational and Speech Therapy HCPCS codes have been added to eQSuite®.

If the PAR had a start date on or after January 1, 2020, submit a [Helpline ticket](#) requesting a correction. Please include the code(s) and/or modifier that was affected along with the PAR number or review ID. Those corrections will be added to the review for eQHealth Solutions staff to process.

If the PAR had a start date prior to January 1, 2020, please submit a modification request for that PAR with the new code(s) or modifier(s) affected. The modification request start date should reflect January 1, 2020, and should only include the units needed for January 1, 2020, through the end of the PAR, and the total number of combined units should not exceed the total number of units approved on the original PAR.

The eQSuite® system requires documentation to be uploaded with a modification request. Providers should upload a document stating "This modification is due to the 2020 Physical Therapy/Occupational Therapy codes."

Contact Alex Weichselbaum at Alex.Weichselbaum@state.co.us with questions on the policy.

Physician Services and Women's Health Providers

Health First Colorado (Colorado Medicaid) Selected for Federal Program to Reduce Maternal Opioid Misuse

The Department has been awarded federal funding under the Maternal Opioid Misuse (MOM) Model. The MOM Model is intended to improve the quality of care and reduce expenditures for pregnant and postpartum women with Opioid Use Disorder (OUD) as well as their infants.

The MOM Model also increases access to treatment while creating sustainable coverage and payment strategies that support the ongoing coordination and integration of care. Community partners will have the opportunity to apply for regionally-specific sub-awards to implement interventions into primary and obstetric care sites that will better integrate obstetric and substance use disorder services. The Department will provide more information on how stakeholders can engage in our next bulletin.

[Refer to the press release](#) for additional information or contact Jerrilyn Chavez at Jerrilyn.Chavez@state.co.us with specific questions.



Physician-Administered Drug (PAD) Providers

Quarter 1 Rate Updates 2020

The PAD rates for the first quarter of 2020 have been updated. The new rates have a start date of January 1, 2020, and are posted to the [Provider Rates & Fee Schedule web page](#) under the Physician Administered Drug Fee Schedule drop-down section.

Contact Emily Ng at Emily.Ng@state.co.us with any questions about PAD rates.

Provider Billing Training Sessions

March and April 2020 Provider Billing Training Sessions

Providers are invited to participate in training sessions for an overview of Health First Colorado billing instructions and procedures. The current and following months' workshop calendars are shown below.

Who Should Attend?

Staff who submit claims, are new to billing Health First Colorado services, or need a billing refresher course should consider attending one or more of the following provider training sessions.

The UB-04 and CMS 1500 training sessions provide high-level overviews of claim submission, prior authorizations, navigating the [Department's website](#), using the [Provider Web Portal](#), and more. For a preview of the training materials used in these sessions, refer to the UB-04 Beginning Billing Workshop and CMS 1500 Beginning Billing Workshop available on the [Provider Training web page](#) under the Billing Training and Workshops drop-down section.

Specialty training sessions provide more training for that particular provider specialty group. Providers are advised to attend a UB-04 or CMS 1500 training session prior to attending a specialty training. For a preview of the training materials used for specialty sessions, visit the [Provider Training web page](#) and open the Billing Training and Workshops drop-down section.

For more training materials on navigating the Provider Web Portal, refer to the Provider Web Portal Quick Guides available on the [Quick Guides and Webinars web page](#).

Note: Trainings may end prior to 11:30 a.m. MT. Time has been allotted for questions at the end of each session.

March 2020

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|--------|--------|---------|-----------|---|--------|----------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 CMS 1500 Provider Workshop 9:00 a.m. - 11:30 a.m. MT | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 UB-04 Provider Workshop 9:00 a.m. - 11:30 a.m. MT | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |

April 2020

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|--------|--------|---------|-----------|---|--------|----------|
| 5 | 6 | 7 | 8 | 9 CMS 1500 Provider Workshop 9:00 a.m. - 11:30 a.m. MT | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 UB-04 Provider Workshop 9:00 a.m. - 11:30 a.m. MT | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 | | |

Live Webinar Registration

Register for a live webinar by clicking the title of the desired training session in the calendar above and completing the webinar registration form. An automated response will confirm the reservation. Do **not** register via these links if planning to attend a training session in person at the DXC office (see instructions below for RSVPing to attend in person).

For questions or issues regarding webinar registration, email co.training@dxc.com with the subject line "Webinar Help." Include a description of the issue being experienced, name and contact information (email address and phone number), and the name and date of the webinar(s) to be attended. Allow up to 2-3 business days to receive a response.

In-Person Training Registration

Providers who would like to attend a training session **in person** should RSVP to co.training@dxc.com by noon the day prior to the training, with the subject line "In-Person RSVP." Please include attendee name(s), organization, contact information (email address and phone number), and the name and date of the training session(s) to be attended. Allow up to 2-3 business days to receive a confirmation for in-person training reservations. Do not send an RSVP via email unless planning on attending **in person**.

In-person training sessions will be held at the following address:

DXC Technology Office
Civic Center Plaza
1560 Broadway St, Suite 600
Denver, CO 80202

Parking and Transportation

Free parking is not provided, and parking is limited in the downtown Denver area. Commercial parking lots are available throughout the downtown area. The daily rates range between \$5 and \$20. Carpooling and early arrival are recommended to secure parking. Whenever possible, public transportation is also recommended. Some forms of public transportation include the [Light Rail](#) and [Free MallRide](#).

Upcoming Holidays

| Holiday | Closed Offices/Offices Open for Business |
|---|--|
| <p>Memorial Day Monday, May 25</p> | <p>State Offices, DentaQuest, DXC and the ColoradoPAR Program will be closed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.</p> |

DXC Contacts

DXC Office

Civic Center Plaza
1560 Broadway St, Suite 600
Denver, CO 80202

Provider Services Call Center

1-844-235-2387

DXC Mailing Address

P.O. Box 30
Denver, CO 80201