Provider Bulletin

chcpf.state.co.us

Reference: B0800252 **September 2008**

Did you know...?

The fiscal agent (ACS) is conducting Statewide Beginning and Specialty Billing workshops from September 9, 2008 through September 23, 2008. On October 7, 2008 through October 23, 2008, Beginning, Specialty and PAR workshops will take place in the fiscal agent's Denver office.

Please refer to the calendar at the end of this bulletin for workshop topics, times and locations.

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Public Health Agencies, County Nursing Services and PE Sites

For most outpatient/office visit Evaluation and Management (E/M) services rendered at or by a public health agency, county nursing service, or PE site, the rendering provider must be a physician or advanced practice nurse. Registered nurses and other non-physician or non-advanced practitioners are not allowed to serve as the rendering provider on claims for most outpatient E/M codes. A supervising physician's provider number should only be listed as the rendering provider if that physician actually renders the service.

Claims submitted for most E/M codes with dates of service on or after September 1, 2008, which list a non-physician practitioner as the rendering provider, will be denied. Agencies may submit claims with dates of service prior to September 1, 2008, until October 17, 2008. Claims submitted after October 17, 2008 will be denied regardless of the date of service.

Listed below are several E/M codes (and reimbursement rates) for which non-physician and non-advanced practitioners may serve as the rendering provider.

For code descriptions, please refer to the most recent edition of the Current Procedural Terminology (CPT) manual published annually by the American Medical Association. In order to bill for these codes, all components of the code description must be satisfied.

E/M Code	Rate
99211	$17.78
99401	$31.54
99402	$43.13
99403	$74.39
99404	$95.29

For questions, please contact Ginger Burton at ginger.burton@state.co.us or 303-866-2693.

Public Health, County Nursing Services and PE Application Sites

Effective October 1, 2008, providers will be unable to bill for procedure code G9012. Claims billed using this code will be denied for dates of service October 1, 2008 forward. Criteria for use of this case management code have not been developed.

Denver Club Building
518 17th Street, 4th floor
Denver, Colorado 80202

ACS Contacts

Billing and Bulletin Questions
303-534-0146
1-800-237-0757

Claims and PARs Submission
P.O. Box 30
Denver, CO 80201

Correspondence, Inquiries, and Adjustments
P.O. Box 90
Denver, CO 80201

Enrollment, Changes, Signature authorization and Claim Requisitions
P.O. Box 1100
Denver, CO 80201

Agencies that assist in completing and processing presumptive eligibility (PE) applications cannot bill Medicaid for PE application assistance.

Medically necessary medical services provided by Medicaid practitioners on the same date that the PE application is complete must be documented and may be billed. Please refer to the most recent edition of the Current Procedural Terminology manual (CPT) published by the American Medical Association for a listing of codes and a description of services. The Medicaid fee schedule can be found at http://www.chcpf.state.co.us/HCPF/refmat/Reference_Include.asp. Procedure codes currently recognized by Colorado Medicaid are listed on the fee schedule. Please contact Teresa Knaack at teresa.knaack@state.co.us with questions related to the fee schedule.

Dental Providers

The *Current Dental Terminology* (CDT) published by the American Dental Association outlines a system for identifying teeth on dental claims. The system designates a supernumerary number that corresponds to each permanent and primary tooth. Effective **October 1, 2008**, dental providers should use this system to identify the appropriate supernumerary tooth when submitting claims.

Permanent Teeth Upper Arch																
Tooth #	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Super #	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66

Permanent Teeth Lower Arch																
Tooth #	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
Super #	82	81	80	79	78	77	76	75	74	73	72	71	70	69	68	67

Primary Teeth Upper Arch										
Tooth #	A	B	C	D	E	F	G	H	I	J
Super #	AS	BS	CS	DS	ES	FS	GS	HS	IS	JS

Primary Teeth Lower Arch										
Tooth #	T	S	R	Q	P	O	N	M	L	K
Super #	TS	SS	RS	QS	PS	OS	NS	MS	LS	KS

Please contact Marcy Bonnett, Dental and Therapies Program Administrator, at marcy.bonnett@state.co.us or 303-866-3604 with questions.

Pharmacy Providers

Pharmacy Discount Programs

Pharmacies who offer prescription discount programs must use their discounted prices as the usual and customary charge on Medicaid claims. Pharmacies should not submit higher prices on Medicaid claims than prices offered to the general public.

As part of its ongoing compliance monitoring requirements, the Department's Pharmacy and Program Integrity Sections are coordinating claims reviews of pharmacies offering listed drugs at the usual and customary price of $4. Beginning October 1, 2008, pharmacy providers promoting the $4 prescriptions will receive lists of claims paid at more than $4 for those drugs.

The Department encourages pharmacy providers to review these lists to identify any claims that may have been overpaid and report their findings to Program Integrity by January 1, 2009. Providers who choose not to conduct this review or do **not** respond by January 1, 2009 will be contacted by Program Integrity for further review of the claims listed.

For further information on provider review procedures, please contact Kim Eggert, R.Ph, at 303-866-3176 or kimberly.eggert@state.co.us or Carol Strini, Program Integrity Reviewer, at 303-866-3148 or carol.strini@state.co.us.

Do you know Medicare-only individuals who are having trouble paying for prescription drugs?

If an individual is eligible for Medicare and has limited income and resources, they may qualify for extra help from Medicare. It could be worth over $3,300 in savings on prescription drug costs per year.

Encourage people with Medicare to file for extra help online at https://s044a90.ssa.gov/apps6z/i1020/main.html or by calling Social Security at 1-800-772-1213 to apply over the phone.

State Health Insurance Information Program (SHIP) offices can also assist with the application. Find contact information for a local SHIP Counselor at http://www.medicare.gov/contacts/static/allStateContacts.asp or by calling 1-800-MEDICARE (1-800-633-4227).

Tamper-Resistant Pads/Paper rule to be revised

Effective October 1, 2008, all written prescriptions for Medicaid clients are required to be written on tamper-resistant prescription pads/paper that incorporate all three characteristics listed in the Social Security Act, 42 U.S.C. 1396b(i)(23). This is an increase to the requirement that became effective April 1, 2008, which mandated the use of tamper-resistant prescription pads/paper that contain at least one of the characteristics stated in the legislation.

Due to additional information and clarifications received recently from the Centers for Medicare and Medicaid Services (CMS), it has been determined that Colorado will specify in rules the features that will be acceptable to consider a prescription in compliance with the tamper-resistant pad/paper requirement.

The Department will present these additions to the rules to the Medical Services Board for emergency adoption on Friday, September 12, 2008. If approved, these rules will be effective October 1, 2008.

To obtain a copy of the proposed changes, click on the September 2008 Medical Services Board meeting at http://www.chcpf.state.co.us/HCPF/msb/msbAgendas.asp . Stakeholder feedback is appreciated. Please contact Kerri Coffey at kerri.coffey@state.co.us or 303-866-4131 if you have any questions.

Holiday Processing Schedule

Labor Day Claims Processing Schedule

Due to the Labor Day holiday on Monday, September 1, 2008, claim payments will be processed on Thursday, August 28, 2008. The processing cycle includes electronic claims accepted before 6:30 P.M. on Thursday.

Correction to August Bulletin (B0800251)

The start time for the Practitioner and IP/OP Hospital workshops in Greeley was incorrectly listed as 2:00 pm. The correct start time for these workshops is 1:00 pm. Please refer to the corrected workshop calendar posted in:

The Bulletins section of the web site
http://www.chcpf.state.co.us/ACS/Provider_Services/Bulletins/Bulletins.asp

The Training and Workshops section of the web site
http://www.chcpf.state.co.us/ACS/Provider_Services/Train_Workshops/train_workshops.asp

and at the end of this bulletin. We apologize for any inconvenience this error may have caused.

Receive the Bulletin Earlier and Help Save the Environment!

Receive important information up to a week sooner than those receiving bulletins via mail by receiving the bulletins electronically.

Medical Assistance Program enrolled providers who are not receiving electronic notifications can complete and submit their information through the "(MMIS) Provider Data Maintenance" option via the Web Portal.

Providers may also complete and submit the Publication Preferences form in the Provider Services Forms section at http://www.chcpf.state.co.us/ACS/Provider_Services/Forms/Forms.asp.

Please fax or mail the completed form to the fiscal agent at the fax number or address on the form. *The Medical Assistance Program will not be responsible for undeliverable notifications due to incorrect email addresses.*

Please Remember: *Providers may have only one email address on file with the fiscal agent.*

Go Green and Enjoy the Benefits of Direct Deposit

Providers who use Electronic Funds Transfer (EFT) can receive payments up to a week sooner than those receiving paper checks (warrants). EFT eliminates payment delays due to inclement weather or post office mishaps. Remember that banking holidays may also cause delays for paper warrants – another reason to sign up for EFT.

Sign-up to receive payments via EFT today! Complete the EFT form 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.

You may also use the same form noted above to update your bank account information. Simply indicate "Change" in the top-right corner and complete the form as directed.
Please allow 30 days to process your EFT request.

- You will receive paper warrants until EFT has been established or your update request has been processed.
- After 30 days, check with your bank to verify that EFT has been setup.

Please contact the Department of Health Care Policy and Financing at 303-866-4372 with any EFT questions.

September and October 2008 Statewide and Denver Provider Billing Workshops

Provider billing workshops include both Medical Assistance Program billing instructions and a review of Medical Assistance Program billing procedures.
The September and October 2008 workshop calendar is included with this bulletin and will be posted on the website. Additional schedules will also be included in future 2008 bulletins.

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***.

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

Press "**5**" to make your workshop reservation. 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.

All Workshops held in Denver are located at:
ACS
Denver Club Building
518 17th Street, 4th floor
Denver, Colorado 80202

Beginning Billing Class Description

This class is for new billers, billers who would like a refresher, and billers who would like to network with other billers about the Colorado Medical Assistance Program. Currently, the class covers in-depth information on resources, eligibility, timely filing, reconciling remittance statements, and paper claim completion for the UB-04 and the CO1500. *This class does **not** cover any specialty billing information.* The fiscal agent provides specialty training in their Denver office during April and October each year and statewide during May and September each year. *The classes do **not** include any hands-on computer training.*

Driving directions to ACS, Denver Club Building, 518 17th Street, 4th floor, Denver, CO:

Take I-25 toward **Denver**
Take exit **210A** to merge onto **W Colfax Ave (40 E),** 1.1 miles
Turn **left** at **Kalamath St,** 456 ft.
Continue on **Stout St,** 0.6 miles
Turn **right** at **17th St,** 0.2 miles

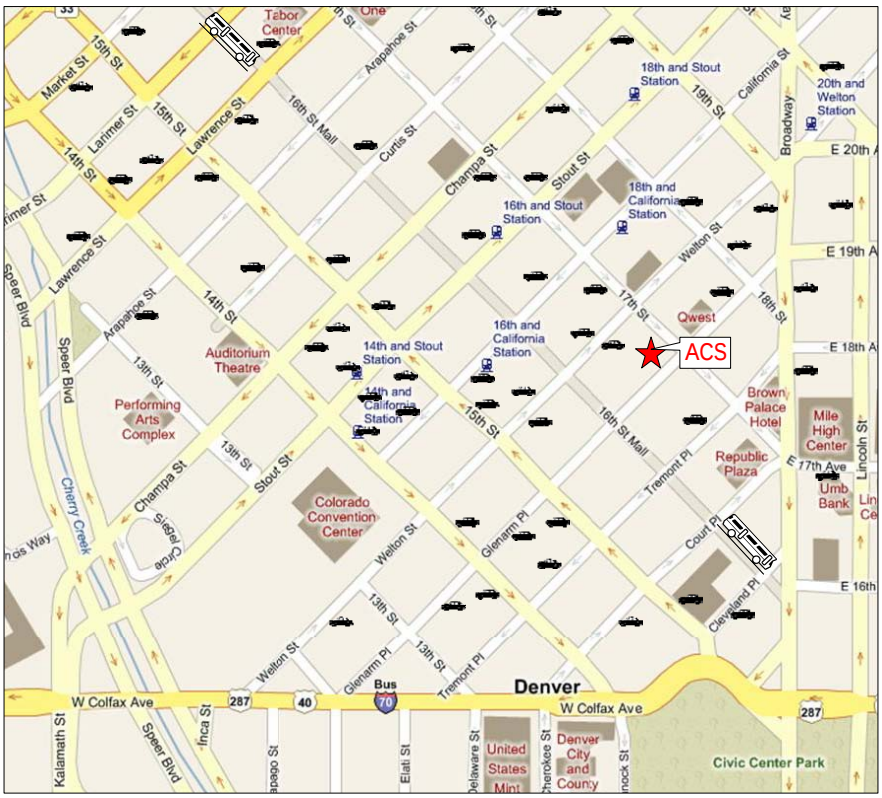
ACS is located in the Denver Club Building, on the west side of Glenarm Place at 17th Street (Glenarm is a two-way street).

Parking: Parking is not provided by ACS and is limited in the Downtown Denver area.
Providers attending workshops are urged to carpool and arrive early to secure parking or use public transportation.

🚆 = Light Rail Station: A Light Rail map is available at: http://www.rtd-denver.com/LightRail/lrmap.htm

🚌 = **Free** MallRide: MallRide stops are located at every intersection between RTD's Civic Center Station and Union Station.

🚗 = Commercial parking lots: Lots are available throughout the downtown area. The daily rates range from about $5 to $20.



Fall 2008 Statewide Workshop Locations

Alamosa, CO
Inn of the Rio Grande
333 Santa Fe Ave.
Alamosa, CO 81101
719-589-5833

Pueblo, CO
Pueblo Convention Center
320 Central Main St.
Pueblo, CO 81003
719-542-1100

Greeley, CO
Greeley Guest House
5401 W. 9th St.
Greeley, CO 80634
970-353-9373

Grand Junction, CO
Doubletree Hotel
743 Horizon Dr.
Grand Junction, CO 81506
970-241-8888

Colorado Springs, CO
Hilton Garden Inn
1810 Briargate Pkwy.
Colorado Springs, CO 80920
719-598-6866

Ft. Collins, CO
Hilton Hotel
425 W. Prospect Rd.
Ft. Collins, CO 80526
970-482-2626

Specialty Class Descriptions

Audiology
This class is for billers using the CO1500/837P format for audiology services. The class covers billing procedures, common billing issues and guidelines specifically for Audiologists.

FQHC/RHC
This class is for billers using the UB-04/837I and CO1500/837P format. The class covers billing procedures, Encounter Payments, common billing issues and guidelines specifically for FQHC/RHC providers.

Dental
The class is for billers using the ADA/837D claim format. The class covers billing procedures, claim formats, common billing issues and guidelines specifically for the following provider types: Dentists, Dental Hygienists.
(This class is not for Nursing Facilities or FQHC/RHCs – Please refer to the Nursing Facility and FQHC/RHC Classes)

Dialysis
This class is for billers who bill for Dialysis services on the UB-04/837I and/or CO1500/837P claim format. The class covers billing procedures, common billing issues and guidelines specifically for dialysis providers.
(This class is not for Hospitals – please refer to Hospital Class)

DME/Supply
This class is for billers using the CO1500/837P claim format. The class covers billing procedures, common billing issues and guidelines specifically for Supply/DME providers.

DME/Supply PAR
The PAR class focuses on completing the PAR correctly and avoiding common mistakes. This class is for DME/Supply providers who bill procedures requiring prior authorization.
(This class is not for Dental, HCBS, Nursing Facility, Pharmacy or Pediatric Home Health Providers.)

HCBS-BI
This class is for billers using the CO1500/837P claim format for the following services: adult day care, non-medical transportation, home electronics, home modifications and personal care. The class covers billing procedures, common billing issues and guidelines specifically for HCBS-BI providers.

HCBS-EBD/PLWA/MI
This class is for billers using the CO1500/837P claim format for the following services: adult day care, non-medical transportation, home electronics, home modifications and personal care. The class covers billing procedures, common billing issues and guidelines specifically for the following provider types:
HCBS-EBD HCBS-PLWA HCBS-MI

Home Health
This class is for billers using the UB-04/837I format. The class covers billing procedures, common billing issues and guidelines specifically for Home Health providers.

IP/OP Hospital
This class is for billers using the UB-04/837I format. The class covers billing procedures, common billing issues and guidelines specifically for: In-patient Hospital, Out-patient Hospital
(This is not the class for FQHC/RHC – Please refer to the FQHC/RHC Class)

Occupational, Physical and Speech Therapy
This class is for billers using the CO1500/837P format for therapies. The class covers billing procedures, common billing issues and guidelines specifically for Occupational, Physical and Speech Therapists providers.

Pediatric HH PAR
The Pediatric Home Health PAR class focuses on the PAR completion instructions for Pediatric Home Health procedures. This class is specifically for Pediatric Home Health providers.

Pharmacy
This class is for billers using the Pharmacy claim format/Point of Sale and/or UCF Format. The class covers billing procedures, common billing issues and guidelines specifically for Pharmacies.

Practitioner
This class is for providers using the CO1500/837P format. The class covers billing procedures, common billing issues and guidelines specifically for the following provider types:

- Ambulance
- Anesthesiologists
- ASC
- Family Planning
- Independent Labs
- Independent Radiologists
- Nurse Practitioner
- Physician Assistant
- Physicians, Surgeons

Skilled Nursing Facility
This class is for billers using the UB-04/837I claim format. The class covers billing procedures, common billing issues, PETI, Medicare Crossovers and guidelines specifically for Nursing Facility providers.

Transportation
This class is for transportation providers billing on the CO1500/837P and/or UB-04/837I format. The class covers billing procedures, common billing issues and guidelines primarily for non-emergency Transportation providers.

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) and *please 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*

The September 2008 Statewide Workshop and October 2008 Denver Workshop Calendars are on the following page.

September 2008 Statewide Workshop Calendar

	1	2	3	4	5	6
7	8	**9 – Alamosa** Beginning Billing (Professional & Institutional) 8:30-11:30 am Home Health 1:00-4:00 pm Practitioner 1:00-4:00 pm	10	**11 – Grand Junction** Beginning Billing (Professional & Institutional) 8:30-11:30 am Practitioner 1:00-4:00 pm IP/OP Hospital 1:00-4:00 pm	12	13
14	15	16	**17 – Pueblo** Beginning Billing (Professional & Institutional) 9:00-11:30 am Practitioner 1:00-4:00 pm FQHC/RHC 1:00-4:00 pm	**18 – Colorado Springs** Beginning Billing (Professional & Institutional) 8:30-11:30 am Practitioner 1:00-4:00 pm IP/OP Hospital 1:00-4:00 pm	19	20
21	**22 – Fort Collins** Beginning Billing (Professional & Institutional) 9:00-11:30 am Practitioner 1:00-4:00 pm IP/OP Hospital 1:00-4:00 pm	**23 – Greeley** Beginning Billing (Professional & Institutional) 9:00-11:30 am Practitioner 1:00-4:00 pm IP/OP Hospital 1:00-4:00 pm	24	25	26	27
28	29	30				

October 2008 Denver Workshop Calendar

			1	2	3	4
5	6	**7** Beginning Billing Professional 9:00 am – 3:00 pm	8	**9** Beginning Billing Institutional 9:00 am – 3:00 pm	10	11
12	**13** IP/OP Hospital 9:00 am-11:30 pm Hospice 1:00 pm-3:30 pm	**14** Practitioner 9:00 am-11:30 am OP/PT/ST 1:00 pm-3:30 pm	**15** Pediatric HH PAR 9:00 am-11:30 Home Health 1:00 pm-3:30 pm	**16** FQHC/RHC 9:00 am-11:30 am Dental 1:00 pm-3:30 pm	**17** DME/Supply PAR 9:00 am-11:00 am DME/Supply Billing 11:30 am-1:30 pm Pharmacy 2:30 pm-4:00 pm	18
19	20	**21** HCBS-EBD/PLWA/MI/CDCE 9:00 am-11:30 am HCBS-BI 1:00 pm-3:30 pm	**22** Skilled Nursing Facility 9:00 am-11:30 am Dialysis 1:00 pm-3:30 pm	**23** Transportation 9:00 am-11:30 am Audiology 1:00 pm-3:30 pm	24	25
26	27	28	29	30	31	