



Dear Alternative Care Facility (ACF) Provider,

The ACF daily rate for Community Mental Health Supports (CMHS) clients increased by \$0.72 beginning October 1, 2017, from \$51.20 to \$51.92. However, the increased rates were not paid from October through December, as the Department received a retroactive effective date from the Centers for Medicare & Medicaid Services (CMS). Your case managers did not have the opportunity to revise Post Eligibility Treatment of Income (PETI) and Prior Authorization Requests (PARs) before October billing began.

You have the option to correct this and receive the additional \$0.72 per day per client by following the steps below. Note that claims for all impacted dates of service **must be voided** by providers in order for PAR revisions to be performed. The steps below, if followed, will minimize the financial impact to your agency and to the case manager. Interim payments are also available and can be initiated by contacting the Provider Services Call Center at 1-844-235-2387.

- 1) Stop billing all ACF-CMHS claims.
- 2) Contact your case manager by **February 7, 2018**, indicating you wish to get the higher rate. Delaying this decision will compound the financial impact and its subsequent resolution.
- 3) Agree on the time period the case manager will complete the revision.
 - You will need to give the case manager about a week for the PAR revision to take place.
 - Given the number of revisions that will need to be completed, an agreed upon timeframe must be in place before this process begins. **Example:** "The Case Manager can complete the revision between February 12, 2018, and February 16, 2018."
 - ***No billing can take place during this time.***
- 4) Using the instructions from [this Quick Guide](#), void the impacted claims before the date you agree to with the case manager.
- 5) Allow the case manager the agreed upon time to complete the revision, changing the line item to reflect an end date of September 30, 2017, and a start date of October 1, 2017, and obtain confirmation that the work was done (screenshots, etc.).
- 6) Rebill all impacted claims.

A copy of this message has been provided to all Single Entry Point Case Management Agencies to assure maximum cooperation across all impacted parties.

We acknowledge the frustration this issue has caused you and your agency. Interim payments are available to help mitigate the financial impact your agency may experience. Please contact the Provider Services Call Center at 1-844-235-2387 if your agency needs assistance with voiding, rebilling, or to request an interim payment. Please also be patient with your case manager as this rate change impacts approximately five thousand clients.

Thank you,

Health First Colorado (Colorado's Medicaid Program)

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