



December 14, 2018

Dear Home Health and Private Duty Nursing Provider:

On November 12, 2018, the Department of Health Care Policy & Financing (the Department) notified providers of claims reprocessing for all Long-Term Home Health (LTHH) and Private Duty Nursing (PDN) services reimbursed without an associated approved Prior Authorization Request (PAR). Beginning November 30, 2018, the Department reprocessed the affected claims and created an account receivable for claims that do not have an associated approved PAR in the Colorado interChange (the Department's claims processing system). Upon implementation of this process, the Department was notified that there are approved PARs that have not yet been entered in the Colorado interChange.

To resolve this matter, the Department has paused recoupments on the affected accounts and will remove outstanding accounts receivables incurred in the first reprocessing, by reprocessing the claim for payment. Any claim with an account receivable already recovered will be paid to the provider and be reflected on the Remittance Advice (RA) report. Please note that claims may deny for other edits, such a duplicate claim if the provider has already resubmitted a new claim. Claims will be reprocessed on December 21, 2018, and payment will post on the RA on December 24, 2018.

To assist providers in identifying the claims that are not associated with a valid PAR, the Department will provide the identified claims through a provider specific email in early January. The claims can also be identified through the remittance advice report as those claims originally denied and then reprocessed on December 21, 2018. Providers with affected claims must resubmit any **approved** PAR documentation to the authorizing entity, as instructed below, to ensure the PARs are associated with claims for future reprocessing.

If the affected claims are associated with a PAR submitted to a Single-Entry Point (SEP) agency or Community Centered Board (CCB), please contact and resubmit the PAR to the SEP or CCB so it can be entered in the Colorado interChange.

If the affected claims are associated with a pediatric LTHH or PDN PAR approved by eQHealth Solutions, the Department is working with eQHealth to successfully resubmit the PARs into the Colorado interChange. At this time, there is no action needed from providers on these claims. However, if you have specific questions on these PARs please contact Katie Denney at HCPF_UM@state.co.us.

After the review is completed of outstanding PARs, the Department will reprocess the claims. For any remaining claims that do not have an associated and approved PAR, the Department will issue demand letters and providers will have the opportunity to request informal reconsideration and appeal, prior to any recovery.

If you have any questions, please contact Jon Meredith at Escalated.Operations@state.co.us.

Thank you,

Department of Health Care Policy & Financing

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