



Dear Provider,

In accordance with [state](#) and federal law, 42 C.F.R. [§§447.53, 447.56\(f\),\(1\),\(2\),\(3\)](#), the Department has made updates to the Health First Colorado (Colorado’s Medicaid Program) co-payment policies. These changes have been previously reflected in the Department’s [December Provider Bulletin \(B1700407\)](#) and [December Special Provider Bulletin - Co-payment Policy Updates \(B1700408\)](#). This message reiterates the policy updates and points you to a [recorded a webinar](#) that discusses the updates to Health First Colorado co-payment policies.

Co-Payment Increase for Health First Colorado Members Effective January 1, 2018

In accordance with [SB17-267](#) and as stated in the Department’s [December Provider Bulletin \(B1700407\)](#) and [December Special Provider Bulletin - Co-payment Policy Updates \(B1700408\)](#), the Department plans to change the following co-payment policies effective January 1, 2018, for Health First Colorado Members:

Service	Dates of service on and prior to December 31, 2017	Dates of service on and after January 1, 2018
Outpatient hospital visit	\$3	\$4
Outpatient hospital non-emergent emergency room visit	\$3	\$6
Generic drug*	\$1	\$3
Brand name drug *	\$3	\$3

*Changes apply to all new and refill prescriptions.

The emergency status of an Emergency Department visit must be determined by the hospital/provider. The Colorado interChange will deduct a \$6 co-payment amount from the UB-04 (837I) claim based on the presence of Revenue Code 0456 or Revenue Code 0459 on the claim for all co-pay eligible members.

The Department’s Medical Services Board voted December 8, 2017, to adopt the Revision to the Medical Assistance Rule Concerning Client Co-Payment, Section 8.754 rule that supports the co-payment increase. For more information on the Medical Services Board, visit: CO.gov/hcpf/medical-services-board.

Providers can learn more about the co-payment increases by viewing our [recorded webinar](#) featuring the Department’s Chief Medical Officer, Dr. Judy Zerzan.

Co-pay Limit for Health First Colorado Members

As previously stated in the Department’s [December Provider Bulletin \(B1700407\)](#) and [December Special Provider Bulletin - Co-payment Policy Updates \(B1700408\)](#), all providers should be aware that members are liable for no more than 5% of their monthly household income

towards co-payments per month.

Beginning in October 2017, Health First Colorado now notifies members by mail when their household has met its co-payment maximum for the month. The co-payment maximum is 5% of the household monthly income. The head of household will receive a letter showing the household has reached the monthly limit, and how the limit was calculated. Once a member has paid 5% of their monthly household income on co-pays in a month, no one in the household pays co-pays for the rest of that month. For more information, visit:

HealthFirstColorado.com/copay.

As with current practice, it is critical that providers verify a member's eligibility and co-payment amount at each visit. The Colorado interChange Provider Web Portal will reflect the member's current eligibility and the proper co-payment amount.

Resources

The following resources are available on the Department's [DXC and interChange Resources web page](#), in addition to the direct links provided:

- The [Verifying Member Eligibility and Co-payment Quick Guide](#) provides step-by-step instructions for providers on how to verify a member's eligibility and check a member's co-payment amount.
- The [Reading Your Remittance Advice \(RA\) Quick Guide](#) provides step-by-step instructions for providers on how to read their remittance advice.
- Providers can learn more about the 5% co-payment maximum by viewing the [recorded webinar](#) featuring the Department's Chief Medical Officer, Dr. Judy Zerzan.

As always, provider questions should be directed to the DXC Technology [Provider Services Call Center](#) at 1-844-235-2387.

Thank you,

Health First Colorado (Colorado's Medicaid Program)

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