



Dear Providers,

This special newsletter summarizes the emails and communications concerning COVID-19 from the past week. The Department knows providers will have many questions about COVID-19 and will post updates on policies, codes and other important information on the new [COVID-19 Information for Health First Colorado and CHP+ Provider and Case Managers web page](#). The new web page will be frequently updated with resources and guidance on COVID-19 as information becomes available.

COVID-19 Topics & Resources

COVID-19 CPT, Diagnosis and HCPCS Coding Information

A new section has been added to the [COVID-19 Information for Health First Colorado and CHP+ Providers and Case Managers web page](#) to cover COVID-19 CPT, Diagnosis and HCPCS Coding Information.

Colorado interChange Updated to Receive HCPCS Codes for 2019 Novel Coronavirus (COVID-19) Laboratory Tests

The Colorado interChange will be updated to receive and process claims billed with new HCPCS codes U0003 and U0004 for dates of service on or after March 18, 2020.

Billing with these specific codes will allow for better tracking of the public health response for COVID-19.

New HCPCS Codes for Specimen Collection for 2019 Novel Coronavirus (COVID-19)

New HCPCS codes G2023 and G2024 (used to identify and reimburse specimen collection for COVID-19 testing) have been released for dates of service on or after March 1, 2020. The Colorado interChange has been updated to receive and process claims for these codes.

Member Eligibility Verification Without ID Card

With the anticipated increase in member eligibility and the need to access care quickly, members should not be turned away for not having their identification cards. Providers are reminded to use the Provider Web Portal to verify eligibility rather than requiring members to bring their Member ID cards to appointments.

Payment Error Rate Measurement (PERM) Audit Suspended

The PERM audit is suspended until further notice. Visit the [PERM web page](#) for more information.

New Provider Specialties for COVID-19 Long Term and Temporary Enrollment

Effective April 10, 2020, providers will be allowed to temporarily enroll in Health First Colorado (Colorado's Medicaid Program) to provide services during the public health emergency. Temporary enrollment will end once the public health emergency ends. Prior to any temporary enrollments being terminated, providers will be notified and given the opportunity to convert from temporary enrollment to long term enrollment by updating the application and completing the requirements.

New applicants will be required to indicate temporary enrollment due to the public health emergency or long term enrollment.

In addition to selecting a provider type and primary specialty, each applying provider will need to add one of the following specialties to their application:

- COVID-19 Long Term Enrollment – Add this specialty to the application if the provider intends to continue providing services beyond the public health emergency.
- COVID-19 Temporary Enrollment – Add this specialty to the application if the provider is only enrolling to provider services during the public health emergency

This applies only to provider types for which application fees, fingerprinting and/or site visits are required, including:

<ul style="list-style-type: none"> • Ambulatory Surgery Center • Community Mental Health Center • Dialysis Center • Federally Qualified Health Center • Home & Community-Based Services (certain specialties only) • Home Health • Hospice • Hospital • Independent Laboratory • Indian Health Services • Nursing Facility 	<ul style="list-style-type: none"> • Personal Care Agency • Pharmacy with Durable Medical Equipment • Physical Therapist • Psychiatric Residential Treatment Facility • Rehabilitation Agency Comprehensive Outpatient Rehabilitation Facility • Rural Health Clinic • Supply • Transportation • X-Ray Facility
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For providers choosing to enroll temporarily:

- By adding the COVID-19 Temporary Enrollment specialty to the application, providers are acknowledging that application fees, fingerprinting and site visits, which are usually required for enrollment, will be waived.
- Once the public health emergency designation is lifted, no new temporary enrollment applications will be approved.
- Temporary providers will be able to submit claims, maintain access to program tools and finalize billing for up to 6 months following the public health emergency end date for dates of services within the emergency designation date spans.
- Temporary providers must be licensed and legally authorized to practice or deliver the services for which they will file claims in the state where the services are performed and cannot be listed on the Office of Inspector General's exclusion list for Medicare/Medicaid services.

Please do not reply to this email; this address is not monitored.