



Dear Providers,

This email summarizes additions to the [Known Issues & Updates web page](#) from the past week. The Known Issues & Updates web page is frequently updated. Please note that the Known Issues web page is not an all-inclusive list of known issues.



Known Issues Web Page

Provider Web Portal updates,
known issues, work-arounds,
resolved issues, & general updates

Take me there!

Hot Topics

National Provider Identifier (NPIs) and Multiple Locations

A unique nine (9) digit zip code or taxonomy code is required to identify the Health First Colorado (Colorado's Medicaid Program) billing provider ID, if the provider shares an NPI with multiple locations or multiple provider types. In some cases, an additional enrollment record may have been created in the Colorado interChange during revalidation if all data did not match exactly.

If a claim denies for Explanation of Benefits (EOB) 1473 - "Multiple Provider Locations Found for Billing Provider," contact the [Provider Services Call Center](#) at 1-844-235-2387. The call center representative can analyze the existing enrollment information and give guidance to providers regarding the correct taxonomy or zip code to be used on the claim. All providers rendering medical services must use an NPI on the claim. Using a Health First Colorado ID either in place of, or in addition to an NPI, is not acceptable.

Tax Year 2018 1099 Miscellaneous Income Forms

1099 Miscellaneous Income (1099-MISC) forms from the State of Colorado for Tax Year 2018 were mailed on January 30, 2019. Contact the [Provider Services Call Center](#) at 1-844-235-2387 with any questions regarding 1099-MISC forms.

Featured Provider Resources

February Provider Bulletin - Now Available

The [February 2019 Provider Bulletin \(B1900427\)](#) was published on 1/31/19 on the [Bulletins web page](#).

Upcoming Holiday - Presidents Day

On Monday, 2/18/19, State Offices, DentaQuest, DXC and the ColoradoPAR Program will be closed in observance of Presidents Day.

Upcoming holidays are posted to the [Provider Resources web page](#) and on the last page of every monthly [Provider Bulletin](#).

Short-Term Behavioral Health Service Limit Details Added to Verifying Member Eligibility and Co-Pay Provider Web Portal Quick Guide

The [Verifying Member Eligibility and Co-Pay Provider Web Portal Quick Guide](#), available on the [Quick Guides and Webinars web page](#), has been updated with detailed, step-by-step instructions on checking a member's available units of short-term behavioral health services.

Recently Added Issues

Prior Authorization (PA) Letters Unavailable in the Provider Web Portal

PA letters are currently unavailable in the Provider Web Portal as of 1/8/19.

DXC, the Department and eQHealth are working to resolve this issue. Once the issue has been resolved, the PA letters which were unavailable will be provided.

As a workaround until this issue is resolved, providers are advised to contact the [Provider Services Call Center](#) at 1-844-235-2387 and request that the call center representative look up the PA number. Providers can then search that PA number in the Provider Web Portal in order to view and save PA information. After logging into the Provider Web Portal, select the "Care Management" option from the menu, then select the "View Status of Authorizations" option on the Care Management page. Providers can view all of their PAs on the Perspective Authorization tab or search for specific PAs on the Medical/Dental tab.

If the provider is listed as the billing or rendering provider on the PA, they do not need to know the PA number to search for it. Only the following search criteria is required:

- At least one field in the "Authorization Information" section; *or*
- At least one field in the "Provider Information" section; *or*
- Member ID or Last Name, First Name and Birth Date in the "Member Information" section

Recently Updated Issues

Resolved 1/23/19: Claims Suspending for HCPCS 2019 Procedure Codes for EOB 0000 – "This Claim/Service Is Pending for Program Review"

Claims billed with a HCPCS 2019 procedure code were suspending for EOB 0000 - "This claim/service is pending for program review." The Colorado interChange has been updated with the 2019 HCPCS billing codes based on the Centers for Medicare & Medicaid Services (CMS) annual release of deletions, changes and additions.

Claims were reprocessed by DXC on 2/1/19.

Issue resolved 1/23/19

UPDATE 2/1/19: This entry has been updated to reflect completed claims reprocessing.

Recently Resolved Issues

Resolved 1/31/19: Pediatric Behavioral Therapy Claims (Provider Types 83 and 84) Suspended or Denied for Duplicate for Procedure Code H0046 with Modifier TJ

Pediatric Behavioral Therapy claims billed with both procedure codes H0046 (without modifier TJ) and H0046 (with modifier TJ) were incorrectly denying when both procedure codes were billed for the same day for EOB 0101 – "This is a duplicate service." This issue was previously resolved for provider types 24 and 25 and is now resolved for provider types 83 and 84.

Claims were reprocessed by DXC on 2/1/19.

Issue resolved 1/31/19

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