



Dear Providers,

This email summarizes last week's additions to the [Known Issues & Updates web page](#).

We frequently update our Known Issues & Updates web page, so make sure to check it for updates on a regular basis. Click the button below to visit the Known Issues & Updates web page. Please note that the Known Issues 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

Global Billing Requirements for Obstetrical (OB) Care

Colorado Medical Assistance Program OB billing guidelines instruct that whenever possible, medical care provided during pregnancy, including antepartum care, labor and delivery and the postpartum period should be billed using the global obstetrical CPT codes. **The global code must be used if four or more prenatal visits, as well as delivery and post-partum care, are provided by the same billing group.** This is in alignment with the American Medical Association [AMA] Current Procedural Terminology [CPT] guidelines and guidance from the American Congress of Obstetricians and Gynecologists [ACOG].

The global codes should be billed whenever the same billing group of practitioners all work to provide the components for the patient's obstetrical care. Group practitioners should **not** itemize and bill OB services separately when a global code is available for use. Billing by the same group of providers is identified in the Colorado interChange when specified global OB billable services (those codes used for antenatal, labor & delivery and postnatal care) are billed utilizing the same Billing Provider Medicaid ID number and the same date of service or date span.

For more information about global billing requirements for OB care, including a complete listing of global OB CPT codes, tips to prevent duplicate billing errors, and examples of exceptions to the global billing guidelines, refer to pages 7 - 9 of the [November 2017 Provider Bulletin \(B1700406\)](#).

DXC Now Accepting Fingerprint Cards for High Risk Providers

On May 1, 2018, DXC Technology (DXC) will be mailing official requests for Fingerprint submissions to providers considered high risk on behalf of the Department. Providers will have 30 days from the date of the request letter to comply with this requirement.

Individuals may **not** fingerprint themselves; fingerprints **must** be obtained from a law enforcement agency. Providers should contact their local [law enforcement agencies](#) to verify the

agency has fingerprinting services available and to identify the associated cost. Most [law enforcement agencies](#) will provide the Applicant Fingerprint Card as part of their service.

Once the fingerprint card has been completed, mail the completed card(s) to:

DXC Technology
Attn: Provider Enrollment - Fingerprinting
P.O. Box 30
Denver, CO 80201

Fingerprint cards must be sent by the individual directly to DXC for processing. Original cards must be sent; copies, faxes, emails or electronic versions will not be accepted.

Once the provider receives the official Request for Fingerprint letter in May, they will have 30 days from the date of the letter to send in the completed fingerprint card. **However, providers are encouraged to begin this process in advance (before receipt of the request letter), as fingerprint cards are currently being accepted by DXC.**

For more information, refer to the [Federal Criminal Background Check Frequently Asked Questions \(FAQs\)](#).

Practices Must Contract with RAEs (formerly RCCOs) for Medicaid Payment

On 7/1/18, new Regional Accountable Entities (RAEs) will be responsible for coordinating both physical and behavioral health for Health First Colorado (Colorado's Medicaid Program) members, developing a network of primary care providers and behavioral health providers, and administering the capitated behavioral health benefit. These duties were previously contracted to Regional Care Collaborative Organizations (RCCOs) and Behavioral Health Organizations (BHOs).

All primary care providers who want to serve as a primary care medical provider (PCMP) and receive an Administrative Medical Home payment for Health First Colorado patients must contract directly with the RAE(s). The Department of Health Care Policy & Financing (the Department) will no longer make Per Member Per Month payments directly to PCMPs. Physical Health services will continue to be reimbursed by the Department fee-for-service through the Colorado interChange.

For more information, including FAQs and fact sheets, visit the [Accountable Care Collaborative \(ACC\) Phase II web page](#).

Featured Provider Resources

New Provider Web Portal Quick Guide: Provider Maintenance - License Update

The new [Provider Web Portal Quick Guide: Provider Maintenance - License Update](#) is now available on the [Quick Guides and Webinars web page](#). The new quick guide provides detailed, step-by-step instructions on how to add a new license or update existing license information within the Provider Maintenance area of the Web Portal.

Recently Added Issues

Over-Recoupment for Duplicate Durable Medical Equipment (DME/Supply) Provider Claims

Some DME/supply providers (provider type 14) experienced a payment issue after submitting a duplicate claim for supply services. While the Colorado interChange should have denied the duplicate claim, a system error occurred resulting in the claim being paid. This issue was resolved on 3/14/18. When the claim was adjusted by DXC on 4/6/18 in order to recoup the amount paid for the duplicate claim, an error occurred where the amount recouped was equal to the amounts paid for both the duplicate and the original claim.

Claims will be reprocessed by DXC in order to return payment for the original claim.

Recently Updated Issues

Resolved 1/10/18: Claim Denials due to Bypass Modifiers for the National Correct Coding Initiative (NCCI) Update

Claims were denying due to the bypass modifiers not being set up correctly in Colorado interChange. The Department and DXC have made adjustments to the system that reflect the current [NCCI Policy and billing documentation](#).

Providers are advised to resubmit affected claims.

Issue resolved 1/10/18

UPDATE 4/13/18: This entry has been updated to reflect current issue status and to instruct providers to resubmit affected claims.

Resolved 1/8/2018: Claims for Revenue Code 434 Paying at the Incorrect Rate

Home health provider claims for revenue code 434 were not paying the current rate. The Department and DXC have fixed this issue.

Claims with dates of service on or after 7/1/17 were reprocessed by DXC on 1/19/18, 1/26/18, and 2/16/18.

For a complete list of current rates, please refer to the [Home Health Rate Schedule](#).

Issue resolved 1/8/18

UPDATE 4/13/18: This entry has been updated to reflect completed claims reprocessing.

Resolved 12/7/17: Claim Denials for Revenue Codes 270, 424, 434, 569, 583, 589 and 780 for EOB 2222 – Policy Not Currently Enforced

Home health provider claims for revenue codes 270, 424, 434, 569 and 589 and Telehealth revenue codes 583 and 780 were denying for EOB 2222 – "Policy not currently enforced."

Some claims with dates of service on or before 6/30/17 were reprocessed on 12/1/17, 12/8/17, 2/16/18 and 2/23/18 by DXC. Claims with dates of service on or after 7/1/17 were not affected and should have processed properly.

Issue resolved 12/7/17

UPDATE 4/13/18: This entry has been updated to reflect completed claims reprocessing.

Resolved 3/15/18: Inpatient Claims Reimbursing Incorrectly when "To" and "From" Dates of Service are the Same Day

Inpatient transfer claims were not reimbursing correctly when the "to" and "from" dates of service were the same day.

Claims were reprocessed by DXC on 4/13/18.

Issue resolved 3/15/18

UPDATE 4/13/18: This entry has been updated to reflect completed claims reprocessing.

Recently Resolved Issues

No new Resolved Issues posted to the website this week. DXC and the Department are aware of several newly-resolved issues and are in the process of developing content to be posted on the Known Issues page as soon as possible.

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

