



**COLORADO**

Department of Health Care  
Policy & Financing

Dear Providers,

This email summarizes the past three weeks' additions to the [Known Issues & Updates web page](#). 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

#### Report Retention on the Provider Web Portal

Provider Web Portal users can pull electronic reports dated 3/1/17 (the date when claims processing transitioned to the Colorado interChange system) to current. This includes Remittance Advice (RA) reports and ERA X12 835s. The legacy Xerox provider portal had a 60-day retention rate. In the new Provider Web Portal, there is no limit on how long these reports are available.

Reports and PAR letters from the legacy Xerox portal are not available in the new Provider Web Portal. Call the Provider Services Call Center at 1-844-235-2387 to request an electronic copy of an RA (previously called a Provider Claim Report), prior to 3/1/17.

### Featured Provider Resources

#### National Correct Coding Initiative (NCCI) Notification of Quarterly Updates

Providers are encouraged to monitor the Centers for Medicare & Medicaid Services (CMS) for updates to NCCI rules and guidelines. Updates to the procedure-to-procedure and medically unlikely edit files are completed quarterly, with the latest file available as of July 2018.

For more information, visit the [National Correct Coding Initiative Edits page of the CMS website](#).

### Recently Added Issues

#### Claims Denials for 90791, 90832, 90834, 90837, 90846, 90847 and 90792 for EOB 0182

Claims for procedure codes 90791, 90832, 90834, 90837, 90846, 90847 and 90792 are denying for EOB 0182 – "Billing Provider Type and/or Specialty is not allowable for the service billed."

DXC and the Department are working to resolve the issue.

Claims will be reprocessed by DXC.

## Recently Updated Issues

### Claim Suspends for HCPCS Codes for EOB 0000 – “The Claim/Service is Pending for Program Review”

The following HCPCS codes are not being processed for payment:

- Q9991
- Q9992
- Q9993
- Q9994
- Q9995
- Q5103
- Q5104
- Q5105
- Q5106
- C9466

This is causing claims to suspend for EOB 0000 – “The Claim/Service is Pending for Program Review.”

Procedure codes Q9991, Q9992, Q9993, Q9994, Q9995, Q5105 and Q5106 are HCPCS updates effective July 1, 2018. Procedure codes Q5103, Q5104 and C9466 are HCPCS updates effective April 1, 2018. The Department and DXC are currently working on getting the rates loaded into the Colorado interChange system for these HCPCS codes.

Claims will be reprocessed by DXC.

**UPDATE 7/26/18:** This entry has been updated to include Q5105, Q5106 and C9466 with the list of affected procedure codes.

---

### Supply Provider Claim Denials for A9901 for EOB 1178 - “Service is Not Reimbursable for Date(s) of Service”

Supply provider (type 14) claims for code A9901 are denying for EOB 1178 - “Service is not reimbursable for Date(s) of Service.”

It was previously announced in the [May 2018 Provider Bulletin \(B18004115\)](#) that code A9901 should no longer be used for invoice manual pricing, effective for date of service (DOS) 7/1/18. As of DOS 7/1/18, this is a valid denial. However, A9901 should still be payable through DOS 6/30/18, in accordance with Health First Colorado (Colorado’s Medicaid Program) policy.

This issue was previously resolved as of 6/26/18, and affected claims were reprocessed by DXC on 6/29/18. However, a secondary problem has caused this issue to resurface. DXC and the Department are working to resolve this issue and claims will be reprocessed by DXC.

**UPDATE 7/26/18:** This entry has been updated to reflect the current status of issue resolution.

---

### Supply Provider Claim Denials for EOB 1178 - “Service is Not Reimbursable for Date(s) of Service”

Supply provider (type 14) claims for code E2377, E2313, E1002, E0973, E2311, K0861, A4211 and A9276 are denying for EOB 1178 - “Service is not reimbursable for Date(s) of Service.”

DXC and the Department are working to fix this issue.

Claims will be reprocessed by DXC.

**UPDATE 7/26/18:** This entry has been updated to include procedure code A4211 with the list of affected procedure codes.

---

### **Resolved 7/17/17: Updated EAPG Schedule Settings**

The Colorado interChange system was not updated with the Colorado-specific Enhanced Ambulatory Patient Group (EAPG) schedule settings. Claims processed since the transition to Colorado interChange were processed under the default EAPG settings which may have resulted in inaccurate payments. All claims submitted after 7/17/17 should pay correctly.

Claims were reprocessed by DXC in stages over the course of several months, with the final round of reprocessing completed on 6/6/18.

Issue resolved 7/17/17

**UPDATE 7/25/18:** This entry has been updated to reflect completed claims reprocessing.

## **Recently Resolved Issues**

### **Resolved 7/27/18: Inpatient Hospital Claims for Diagnosis Code Z302 Paid When Billed with ICD Surgical Procedure Codes**

Inpatient hospital claims for diagnosis code Z302 were paid if they were billed with ICD surgical procedure codes when they should have been denied. This issue affects claims billed on or after 7/3/18.

Affected claims will be reprocessed and payment will be recouped.

Issue resolved 7/27/18

---

### **Resolved 7/25/18: Speech Therapy Claims for Procedure Codes 92507 and 97532 Denying for EOB 1512 – “The Procedure Code/Modifier Combination is Not Payable for the Date of Service”**

Speech therapy claims billed for procedure codes 92507 and 97532 with or without the GN or GP modifiers were denying for EOB 1512 – “The Procedure Code/Modifier Combination is Not Payable for the Date of Service.”

Providers should not bill modifier GT as a workaround to this issue unless it is the appropriate modifier based on program policy.

Claims will be reprocessed by DXC.

Issue resolved 7/23/18

---

### **Resolved 7/19/18: H2019 Claim Denials for EOB 1381 - "No Billing Rule for Procedure"**

Claims for H2019 with dates of service on or after July 1, 2018, were denying for EOB 1381 - "No billing rule for procedure." The issue has been resolved.

Claims were reprocessed by DXC on 7/27/18.

Issue resolved 7/19/18

---

### **Resolved 7/13/18: Outpatient Hospital Claims for Radiology and Imaging Services Billed Without TC Modifier Denying for EOB 1010 – “This Is a Duplicate Item that was Previously Processed and Paid”**

Outpatient hospital claims billed without the previously required technical component (TC) modifier were denying for EOB 1010 – “This is a duplicate item that was previously processed and paid” if the separate professional component claim (modifier 26) was paid

first.

It was previously announced in the [June 2018 Provider Bulletin \(B1800417\)](#) that the TC modifier will no longer be required on outpatient institutional claims (UB-04) for procedure codes that allow a technical and professional component split. The technical component, not the global service, will be assumed for these codes when billed on the UB-04 claim.

Affected claims were reprocessed by DXC on 7/13/18.

Issue resolved 7/13/18

---

**Resolved 7/13/18: Claims Billed for the Professional Component for Radiology and Imaging Services Denying for EOB 1010 – “This Is a Duplicate Item that was Previously Processed and Paid”**

Professional claims billed with modifier 26 may have denied for EOB 1010 – “This is a duplicate item that was previously processed and paid” if the separate hospital claim (modifier TC) was paid first.

It was previously announced in the [June 2018 Provider Bulletin \(B1800417\)](#) that the TC modifier will no longer be required on outpatient institutional claims (UB-04) for procedure codes that allow a technical and professional component split. The technical component, not the global service, will be assumed for these codes when billed on the UB-04 claim.

Affected claims were reprocessed by DXC on 7/13/18.

Issue resolved 7/13/18

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