



Dear Provider,

This email provides several updates on the known issue where habilitative therapy claims for CPT 97532 for dates of service after December 31, 2017, were denying for EOB 3261 or EOB 3181. For more information about the known issue, see the email dated January 19, 2018, below.

The necessary HCPCS 2018 procedure codes, including procedure code G0515, and billing rules were loaded into the Colorado interChange on March 7, 2018. As of March 7, 2018, claims billed for procedure code G0515 are no longer suspending for EOB 0000 - "This claim/service is pending for program review."

Habilitative Therapy Claims for CPT 97532

Providers are advised that CPT 97532 has been replaced with procedure code G0515.

Habilitative therapy claims for CPT 97532 for dates of service after December 31, 2017, will deny for either or both of the following EOBs:

- EOB 3261 - "The procedure code currently is not a benefit for date of service billed. Refer to the CPT or the HCPCS listing for valid procedure codes."
- EOB 3181 - "The procedure code is invalid for date of service. Correct the procedure code. Refer to the CPT or the HCPCS listing for valid procedure codes."

Habilitative Therapy Claims with SZ Modifier

Providers are advised that the SZ modifier has been replaced by the 96 modifier, effective January 1, 2018.

Habilitative therapy claims with the SZ modifier for dates of service after December 31, 2017, will deny for EOB 3170, 3171, 1127 or 1514, with the following EOB description - "The first/second/third/fourth modifier code is invalid for date of service," depending on the position the modifier is in.

Claims billed with the 96 modifier were denying for EOB 0504 – "There is no PA [*prior authorization*] on file for the procedure with the billed modifier. Check the approved PA and verify the procedure and modifier." **These claims were reprocessed on March 9, 2018.**

PARs with SZ Modifier and/or CPT 97532

The Department is working on a solution to address Prior Authorization Requests (PARs) that cross from 2017 to 2018 for the SZ modifier or CPT 97532. Providers are advised to call eQHealth Solutions for further direction on revising current authorizations to reflect the new codes for dates of service in 2018.

To revise a PAR that included the **SZ modifier, 97532** code(s) with services dates of service on or after January 1, 2018, you will need to submit either a modification request or a correction ticket request via the eQHealth Solutions Helpline as follows:

- If the PAR had a start date on or after January 1, 2018, please submit a **Helpline ticket** requesting a correction. Please include the code(s) and/or modifier that was affected.
- If the PAR had a start date prior to January 1, 2018, please submit a **modification request** for that PAR with the new code(s) and/or modifier affected. The modification request start date should reflect January 1, 2018, and should only include the units needed for January 1, 2018, through the end date of that PAR, and the total number of combined units should **not** exceed the total number of units approved on the original PAR.

Thank you,

Department of Health Care Policy & Financing

Dear Provider,

A known issue has been identified where habilitative therapy claims for CPT 97532 for dates of service after December 31, 2017, are denying for either or both of the following EOBs:

- EOB 3261 - "The procedure code currently is not a benefit for date of service billed. Refer to the CPT or the HCPCS listing for valid procedure codes."
- EOB 3181 - "The procedure code is invalid for date of service. Correct the procedure code. Refer to the CPT or the HCPCS listing for valid procedure codes."

This is due to CPT 97532 being replaced by procedure code G0515, effective January 1, 2018. However, this code is part of the HCPCS 2018 annual update, and HCPCS 2018 procedure codes and the billing rules have not yet been loaded into the Colorado interChange system. Therefore, claims billed for procedure code G0515 will suspend for EOB 0000 - "This claim/service is pending for program review." Providers are advised to continue submitting claims to keep them timely and to resubmit affected claims once the HCPCS 2018 procedure codes and billing rules have been loaded.

Habilitative therapy claims with the SZ modifier for dates of service after December 31, 2017, are denying for any of the following EOBs, depending on the position the modifier is in:

- EOB 3170 - "The first modifier code is invalid for date of service. Read the procedure description. Refer to the Provider Manual, Help Screens, CPT or HCPCS for a listing of valid modifiers."
- EOB 3171 - "The second modifier code is invalid for date of service. Read the procedure description. Refer to the Provider Manual, Help Screens, CPT or HCPCS for a list of valid modifiers."
- EOB 1127 - "The third modifier code is invalid for date of service. Read the procedure description. Refer to the Provider Manual, Help Screens, CPT or HCPCS for a listing of valid modifiers."
- EOB 1514 - "The fourth modifier code is invalid for date of service. Read the procedure description. Refer to the Provider Manual, Help Screens, CPT or HCPCS for a list."

This is due to the SZ modifier being replaced by the 96 modifier, effective January 1, 2018. The Department is working on a solution to address PARs that cross from 2017 to 2018 for the SZ modifier or CPT 97532. Claims billed with modifier 96 are denying for EOB 0504 – "There is no PA on file for the procedure with the billed modifier. Check the approved PA and verify the procedure and modifier." Providers are advised to continue submitting claims to keep them timely and to resubmit affected claims once the issue has been resolved.

The Department and DXC are working to fix these issues and will provide an update once they have been resolved.

Thank you,

Health First Colorado (Colorado's Medicaid Program)

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

See what's happening on our social sites

