

January 1, 2018 Health First Colorado Physician Fee Schedule Instructions

The reimbursement rates listed in this fee schedule are valid for services rendered on or after January 1, 2018.

CPT or HCPCS Procedure Code

The CPT or HCPCS procedure code is listed in this column, and the table is sorted in procedure code order beginning with CPT codes.

For **Physician Administered Drugs** procedure codes, please see the Physician Administered Drugs fee on the Provider Rates & Fee Schedule page.

Code descriptions are not contained in this file because they are copyrighted by the American Medical Association (AMA). We are legally prohibited from providing a list of procedure code descriptions.

Rate Type Description

The Rate Type Description indicates that overarching category of the rate. DEFAULT indicates no special conditions. POS (number) indicates rates specific to the indicated Place of Service code.

Procedure Code Modifier 1-4

CPT and HCPCS procedure code modifiers are listed in these columns. For example, radiology services may be billed using a modifier for the technical component of the procedure (modifier TC), the professional component of the procedure (modifier 26), or the total procedure (modifier field left blank.)

Total Allowable Amount

The total allowable reimbursement amount is listed in this column. Codes that are manually priced by invoice, by MSRP, or on a claim-by-claim basis by the Health First Colorado fiscal agent (are marked "code is manually priced".) Codes that are not benefits of the Health First Colorado program are marked "not a benefit". Codes that are available at no cost to providers through the Colorado Department of Public Health and Environment Vaccines for Children or Colorado Immunization programs are listed with a \$0.00 rate and are listed as "Vaccine for Child" under the Rate Description column. If you have specific questions on how rates were calculated please contact our rates department.



Anesthesia Conversion Factor

For anesthesia procedure codes, the conversion factor is listed as the Total Allowable Amount. The final reimbursement rate equals (Relative Value + procedure time) multiplied by the Anesthesia Conversion Factor.

Description	Conversion Factor Amount Effective 01/01/2018
Anesthesia	29.01

Relative Value

The relative value of a procedure is the first part of the formula used to determine the maximum allowable reimbursement for anesthesia codes.

Min Age / Max Age

The two columns -- one headed "Min Age" and one headed "Max Age" --- indicate the ages during which the procedure is considered a benefit for Health First Colorado clients. "000-999" means the procedure code is a benefit for clients of any age.

Post Op Days

The column headed "Post Op Days" indicates the number of days, including and following the date of service, during which care provided for the same diagnosis indicated for the rendered surgical procedure, must be provided as inclusive in the reimbursement for that surgical procedure.

Prior Authorization Needed

The column headed "Prior Authorization Needed" indicates whether or not a given procedure or service must be prior authorized. "Conditional" means that under some circumstances a service may not require prior authorization while, under other circumstances, it does. For example, many wheelchair component parts do not require prior authorization when they are being used as part of a repair, but when requested with a new wheelchair, they must be authorized in advance.



Physician Administered Drugs

Procedure codes that fall under the specific reimbursement methodology for Physician Administered Drugs are listed on the Health First Colorado Physician Fee Schedule directing users to view the Physician Administered Drugs Fee Schedule on this page to find reimbursement rates and coverage information.

Durable Medical Equipment

As a result of the Federal Upper Payment Limit (UPL) Requirement of the Consolidated Appropriations Act of 2016, a new reimbursement methodology has been applied to certain Durable Medical Equipment codes. More information regarding the methodology and process can be found here.

Procedure codes included in this reimbursement methodology are listed on the Health First Colorado Physician Fee Schedule directing users to view the Durable Medical Equipment fee schedule on this page to find reimbursement rates and coverage information. This includes any modifier combination for that procedure code that Health First Colorado covers.

Department Contact

If you believe you have found an error on the Health First Colorado Physician Fee Schedule, please contact Scott Nelson with the Colorado Department of Health Care Policy and Financing at scott.nelson@state.co.us

