

Provider Bulletin

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Did You Know?

Providers are reminded to verify member eligibility prior to rendering services. It is **critical** for providers to always check the eligibility response at each visit as eligibility may change. Obtaining prior authorization is not a guarantee of eligibility.

Providers are required to verify eligibility for each date of service through either the <u>Provider Web</u> <u>Portal</u> or batch X12N 270. Providers must review the entire eligibility response to ensure the benefit plan includes the type of service the provider is rendering.

Member eligibility verification is available electronically, 24 hours a day, 7 days a week. Eligibility information is updated daily, except for weekends and State holidays.

All Providers

Child Health Plan *Plus* (CHP+) State Managed Care Network (SMCN) Transition: Provider Contracting

Effective July 1, 2021, all CHP+ eligible members will be automatically enrolled into a CHP+ Managed Care Organization (MCO). As a result, the CHP+ SMCN will no longer be available to pay for health care services for CHP+ members delivered after June 30, 2021.

Improve health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado. Important information for CHP+ providers:

- Colorado Access will stop processing and paying claims for the SMCN for dates of service beginning on July 1, 2021.
- All providers must have a <u>current enrollment</u> in the Colorado interChange.
- All providers must have an active contract with a CHP+ MCO to be eligible for reimbursement for services delivered to CHP+ members starting July 1, 2021.

For more information about contracting with a CHP+ MCO, contact:

CHP+ MCO	Contact Information
Colorado Access	ProviderRelations@coaccess.com
Denver Health	1-303-602-2003
Friday Health Plans	Providers@fridayhealthplans.com
Kaiser Permanente	1-866-866-3951
Rocky Mountain Health Plans	Western Slope providers: 1-970-244-7798 Front Range providers: 1-303-689-7372

Visit the <u>State Managed Care Network Transition web page</u> for additional information.

Expanded Age Range for Flu Vaccine Code 90688

Effective September 1, 2020, the age range for procedure code 90688 has been lowered from a minimum of three years to a minimum of six months. All previously denied claims for this procedure code billed for a member under the age of three since September 1, 2020, will be reprocessed. The Health First Colorado Fee Schedule available on the <u>Provider Rates and Fee</u> <u>Schedule web page</u> was updated to reflect this change.

Contact Christina Winship at Christina.Winship@state.co.us with any questions.

Health Management Systems (HMS) Launches New Integrative Provider Portal for Third-Party Liability (TPL) and Recovery Audit Contract (RAC) Contracts for Health First Colorado Providers

HMS has launched a new Provider Portal for TPL and RAC for Health First Colorado (Colorado's Medicaid program) providers. In May 2021, HMS released a streamlined, single-interface system that allows providers access to information 24/7 and manages the entire claims review, submission and recovery process in one place for Health First Colorado audits.

HMS offered training on the new HMS Provider Portal at the end of April 2021. A recording of the RAC training will be available on the <u>Colorado RAC website</u>, or training can be provided by calling HMS's RAC Provider Services at 1-877-640-3419.

Providers may access a <u>pre-recorded training session</u> specific to the HMS TPL Disallowance/Recoupment HMS Portal processes. Training may also be requested by calling HMS Provider Relations for TPL Disallowance projects at 1-877-262-7396.

There are many benefits for providers that submit records via the HMS Provider Portal for RAC audits, whether it is the provider or facility submitting documentation or the provider's third party.

- Less documentation is needed; no affidavit or copy of a request letter is required
- Decrease user errors
- Eliminate affidavit errors
- Instantly confirm record submission
- Save time, resources, paper and postage
- Electronically track and confirm submissions
- Update contact information
- Quickly be notified of status change
- View medical record request letters online
- View submission history and tracking
- File your request for Informal Reconsiderations directly online



More benefits for providers, including providers using HMS Portal for a TPL Disallowance/Recoupment project:

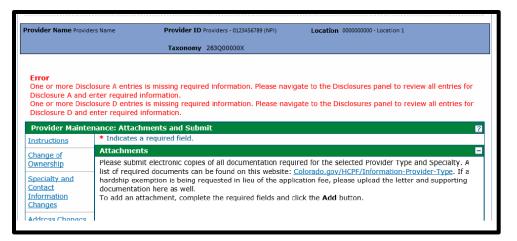
- A personalized dashboard displays the key functions to review and manage your claims
- Access a complete list of patients, claims and primary insurance information with just one click
- Update contact information
- Acknowledge Disallowance/Recoupment claims letters
- Respond to claims
- Communicate online with HMS about claim reviews
- Review, acknowledge, report and upload claims information in real time

To register for the new HMS Portal, visit the <u>HMS Portal web page</u> and choose 'Register.'

Name Fields on the Disclosure Panels Updated in the Provider Web Portal

The name field on the Disclosure A and Disclosure D panels of the Provider Web Portal was updated to allow an Organization Name and an individual name to be entered separately. This update ensures the individual names for business owners and managing individuals are captured and stored appropriately in the Colorado interChange. Newly enrolling providers will complete these fields as part of the Provider Enrollment or Resume Provider Enrollment application. Existing providers will review and update the Disclosure panel during their next Provider Maintenance request or as part of the Revalidation application.

Existing providers performing a Provider Maintenance update will see the following error on the Attachments and Submit panel upon clicking "Submit" if the Disclosure panels have not been updated.



To resolve the error, providers should click the "Disclosure Changes" link, which will navigate the user to the Provider Maintenance: Disclosure panel. Disclosures requiring an update will be in a "Pending" status.

Select a pending disclosure. The current information on record will be reflected in the applicable field(s). Update the Organization Name and/or First Name, MI, Last Name and click "Add." Once all pending disclosures have been updated, click "Submit" to complete the request.

National Correct Coding Initiative (NCCI) Notification of Quarterly Updates

Providers are encouraged to monitor <u>Centers for Medicare & Medicaid Services (CMS) website</u> for updates to NCCI rules and guidelines. Updates to the procedure-to-procedure (PTP) and medically unlikely edit (MUE) files are completed quarterly with the next file update available July 2021. For more information, visit the <u>CMS National Correct Coding Initiative Edits web</u> <u>page</u>.

Hospital Providers

General Updates

All Hospital Providers

Hospital Stakeholder Engagement Meetings

Bi-monthly Hospital Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing. <u>Sign up to receive the Hospital</u> <u>Stakeholder Engagement Meeting newsletters.</u>

• The All-Hospital Engagement meeting is scheduled for Friday, July 9, 2021, from 1:00 p.m. - 4:00 p.m. MT and will be hosted virtually.

Visit the <u>Hospital Stakeholder Engagement Meeting web page</u> for more details, meeting schedules and past meeting materials. **Calendar Year 2021 meetings have been posted**.

Rural Hospital Stakeholder Engagement Meetings Discontinued

The need for separate Rural Hospital Stakeholder Engagement meetings has been periodically assessed and it has been decided to discontinue them. The rationale for this decision is that topics intended for discussion during both the rural and broader hospital engagement



meetings are identical, yet questions and concerns expressed amongst providers during these meetings are not always the same. The Department believes there are potentially harmful effects to hospital representatives only attending either meeting as responses to questions and concerns have impacts amongst the entire hospital community. There is also efficiency in having a single meeting for the purposes of later review. While further rural hospital-specific meetings are not currently scheduled, the Department remains amenable to dedicated meetings to this subgroup when sufficiently justified.

Contact Andrew Abalos at <u>Andrew.Abalos@state.co.us</u> for more information on the discontinuing of the Rural Hospital Stakeholder Engagement meetings. Contact Jonathan Rempfer at <u>Jonathan.Rempfer@state.co.us</u> with any questions or topics to be discussed at future meetings. Advanced notice will provide the Rates team the opportunity to bring additional Department personnel to the meetings to address different concerns.

General, Long-Term Acute Care, Rehabilitation, and Spine/Brain Injury Treatment Hospitals

<u>Senate Bill (SB) 21-205</u>, the 2021-22 Long Appropriations Bill, was signed in May, authorizing a 2.5% increase to Fee for Service payments on institutional claims for inpatient and outpatient hospital payments effective July 1, 2021. The Department will need approval from the Centers for Medicare & Medicaid Services (CMS) prior to the implementation of these updated rates. The updated rates and associated appeal rights will be posted for general, long-term acute care, rehabilitation and spine/brain injury treatment hospitals on the <u>Outpatient Hospital Payment web page</u>.

For hospitals paid through the All Patients Refined Diagnosis Related Groups (APR-DRG), updated rates and appeal rights can be found on the <u>Inpatient Hospital Payment web page</u>. Contact Diana Lambe at <u>Diana.Lambe@state.co.us</u> for further information regarding these rate updates.

For hospitals paid through the Enhanced Ambulatory Patient Grouping (EAPG) system, updated rates and appeal rights can be found on the <u>Outpatient Hospital Payment web page</u>.

Contact Andrew Abalos at <u>Andrew.Abalos@state.co.us</u> for further information regarding these rate updates.

For long-term acute care, rehabilitation, and spine/brain injury treatment hospitals paid through per diem rates, updated rates and appeal rights can be found on the <u>Inpatient</u> <u>Hospital Per Diem Reimbursement Group web page</u>.

Contact Jonathan Rempfer at <u>Jonathan.Rempfer@state.co.us</u> for further information regarding these rate updates.

Rural Health Clinics

Bi-monthly Rural Health Clinic Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing.

• The next <u>Rural Health Clinic Engagement meeting</u> is scheduled for June 16, 2021, and will be hosted virtually on Zoom.

Visit the <u>Rural Health Clinic Engagement Meeting web page</u> for more details, meeting schedules and past meeting materials. **Calendar Year 2021 meetings have been posted**.

Contact Erin Johnson at <u>Erink.Johnson@state.co.us</u> with any questions or topics to be discussed at future meetings. Advanced notice will provide the Rates team time to bring additional Department personnel to the meetings to address different concerns.

Hospital Transformation Program (HTP) Update

Application Review Oversight Committee

Implementation of the HTP started with the application period during the month of April 2021. Applications will now undergo a process of review and feedback and a final review by the Application Review Oversight Committee.

Additional details about the application review process and the Application Review Oversight Committee can be found on the <u>Colorado Hospital Transformation Program web page</u>.



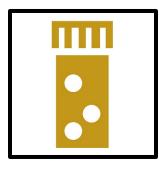
Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) Board Meeting

The next CHASE Board meeting will take place <u>via webinar</u> on Tuesday, June 22, 2021, at 3: 00 p.m. MT. Additional information about the board and meeting materials can be found on the <u>Colorado Healthcare Affordability and Sustainability Enterprise Board web page</u>.

Pharmacies and All Medication-Prescribing Providers

Drug Utilization Review

Notification of Quantity Limit Changes for Ingrezza (valbenazine)



Effective June 15, 2021, pharmacy claims for Ingrezza (valbenazine) will be subject to the following quantity limits: Ingrezza (valbenazine) 40mg limited to 1.77 capsules per day, 60mg limited to 1 capsule per day, and 80mg limited to 1 capsule per day.

Information regarding coverage and prior authorization criteria for Ingrezza (valbenazine) under the Health First Colorado pharmacy benefit is accessible in Appendix P located on the <u>Pharmacy</u> <u>Resources web page</u>.

New Pharmaceutical Benefit Help Guide

Wondering when a pharmaceutical product or medication is covered under the medical or pharmacy benefit?

The Pharmaceutical Benefit Help Guide has been published to assist providers and stakeholders with which benefit, policies and reimbursement methods apply to a medication in question. The help guide may be accessed from either the <u>Pharmacy Resources web page</u> or the <u>Physician Administered Drug web page</u>.

Contact Brittany Schock at <u>Brittany.Schock@state.co.us</u> or Felecia Gephart at <u>Felecia.Gephart@state.co.us</u> with any questions.

Pharmacy and Therapeutics (P&T) Committee Meeting

Tuesday, July 13, 2021

1:00 p.m. - 5:00 p.m. MT (to be held virtually online)

Agenda and virtual meeting information can be found at the <u>Pharmacy and Therapeutics</u> (P&T) Committee web page.

Pharmacy and Therapeutics (P&T) Committee Member Openings

There are two open positions for the P&T Committee member terms 2021-2022.

Applicants are being accepted for the following two (2) open positions:

- One physician who specializes in the practice of psychiatry
- One physician who specializes in the treatment of members with disabilities

If interested in serving or know someone who would be qualified, please submit/have them submit a CV along with a completed <u>Conflict of Interest form</u> to:

Colorado Department of Health Care Policy and Financing Attn: Brittany Schock, PharmD Fax to 303-866-3590 or email <u>Brittany.Schock@state.co.us</u>

Preferred Drug List (PDL) Announcement of Preferred Products

The following drug classes and preferred agents will become effective July 1, 2021:

Acne - Topicals

Preferred products will be: Aczone (BNR) gel, Adapalene gel, Adapalene/Benzoyl Peroxide gel, Clindamycin Phosphate swab/soln, Clindamycin/Benzoyl Peroxide gel (generic Duac), Clindamycin/Benzoyl Peroxide jar (generic Benzaclin), Differin pump (Rx), Erythromycin soln, Erythromycin/Benzoyl Peroxide gel, Retin-ABNR cream, Retin-A (BNR) gel, Sulfacetamide susp

Acne - Isotretinoins Preferred products will be: Amnesteem, Claravis

Tetracyclines Preferred products will be: Doxycycline Hyclate cap/tab, Doxycycline Monohydrate 50mg/100mg cap, Doxycycline Monohydrate tab, Minocycline cap

Rosacea Agents Preferred products will be: Finacea (BNR) gel, Metrogel (BNR), Metronidazole cream/lotion

Antineoplastic Agents, Topical Preferred products will be: Diclofenac 3% gel (generic Solaraze), Fluorouracil (generic Efudex) 5% cream, Fluorouracil solution



Non-Opioid Analgesics

Preferred products will be: Duloxetine 20mg/30mg/60mg, Gabapentin, Lidoderm (BNR) patch (Rx), Pregabalin cap, Savella tablet/dose pack

Short-Acting Opioids

Preferred products will be: Codeine/APAP tab, Hydrocodone/APAP soln/tab, Hydromorphone tab, Morphine tab/soln, Oxycodone tab/soln, Oxycodone/APAP tab, Tramadol 50mg, Tramadol/APAP tab

Fentanyl Preparations (buccal, intranasal, transmucosal, sublingual) Preferred products will be: No preferred agents Long-Acting Opioids

Preferred products will be: Butrans (BNR) patch, Fentanyl

12mcg/25mcg/50mcg/75mcg/100mcg patch, Morphine ER tablet, Tramadol ER tablet (generic Ultram ER)

Inhaled Anticholinergics Preferred products will be: Atrovent HFA, Ipratropium soln (generic Atrovent), Spiriva Handihaler/Respimat

Inhaled Anticholinergic Combinations Preferred products will be: Albuterol/Ipratropium soln, Anoro Ellipta, Combivent Respimat

Inhaled Beta Agonists - Short-Acting Preferred products will be: Albuterol soln, ProAir HFA (BNR), Ventolin HFA (BNR)

Inhaled Beta Agonists - Long-Acting Preferred products will be: Serevent Diskus

Inhaled Corticosteroids Preferred products will be: Asmanex Twisthaler, Budesonide respules, Flovent Diskus, Flovent HFA, Pulmicort Flexhaler

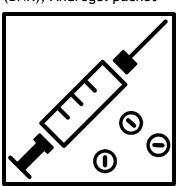
Inhaled Corticosteroid Combinations Preferred products will be: Advair Diskus (BNR), Advair HFA (BNR), Dulera, Symbicort (BNR)

Respiratory Inhalants, Phosphodiesterase Inhibitors (PDEIs) Preferred products will be: No preferred agents

Androgenic Agents Preferred products will be: Androderm patch, Androgel 1.62% pump (BNR), Androgel packet (BNR), Testosterone Cypionate vial

Phosphate Binders Preferred products will be: Calcium acetate cap, Phoslyra, Renagel (BNR) tablet, Renvela (BNR) tab/powder pack

Benign Prostatic Hyperplasia (BPH) Agents Preferred products will be: Alfuzosin, Doxazosin, Dutasteride, Finasteride, Tamsulosin, Terazosin



Newer Generation Antihistamines and Antihistamine/Decongestant Combinations Preferred products will be: Cetirizine 5mg/10mg tab (OTC), Cetirizine soln (OTC, Rx), Desloratadine tablet (Rx), Levocetirizine tab (OTC, Rx), Loratadine tab/soln (OTC)

Angiotensin Modifiers

Preferred products will be: Amlodipine/Benazepril, Amlodipine/Olmesartan, Amlodipine/Valsartan, Benazepril, Enalapril, Enalapril/HCTZ, Entresto, Fosinopril, Irbesartan, Irbesartan/HCTZ, Lisinopril, Lisinopril/HCTZ, Losartan, Losartan/HCTZ, Olmesartan, Olmesartan/HCTZ, Quinapril, Ramipril, Telmisartan, Valsartan, Valsartan/HCTZ

Skeletal Muscle Relaxants

Preferred products will be: Baclofen, Cyclobenzaprine 5mg/10mg tab, Methocarbamol, Tizanidine 2mg/4mg tab

Topical Immunomodulators Preferred products will be: Elidel (BNR), Protopic (BNR)

Brand name medication favored over equivalent generic

The Department manages certain brand name products by favoring them over the generic equivalent non-preferred medications. The **Brand Favored Product List** is accessible from the <u>Pharmacy Resources web page</u>. This list has recently migrated off of Appendix P. The Brand Favored Product List is a list of pharmacy benefit brand favored drugs including those on the PDL, those not on the PDL, and those on Appendix P.

If a generic is medically necessary for the member (over the equivalent Brand name), additional clinical information will need to be provided during the normal prior authorization process.

Pharmacies may reach out to Magellan Rx Management Pharmacy Call Center at 1-800-424-5725 for assistance, if needed, available 24 hours a day, 7 days a week.

As a reminder, Brand Suboxone Film is favored over generic buprenorphine-naloxone film. Refer to Appendix P available on the <u>Pharmacy Resources web page</u>, BUPRENORPHINE CONTAINING PRODUCTS section, for more details.

Pharmacy Providers

Total Annual Prescription Volume (TAPV) and COVID-19 Vaccines

Guidance has been received from the Centers for Medicare & Medicaid Services (CMS) that COVID-19 vaccinations may be excluded from the TAPV count. This exclusion will be granted for the September 1, 2020, through August 31, 2021, reporting volume timeframe **only**. The TAPV surveying will begin October 1 through October 31, 2021, and will include a note that COVID-19 vaccinations may be excluded from the pharmacy's TAPV count.



As a reminder, pursuant to 10 CCR 2505-10, Section 8.800.13.1: The designation of a pharmacy's Dispensing Fee shall be updated annually. Every October, the Department shall contact a pharmacy requesting the completion of an attestation letter stating the pharmacy's Total Prescription Volume for the period September 1 to August 31. A pharmacy shall have until October 31 to provide the completed attestation letter to the Department. Using the attestation letter, the Department shall update a pharmacy's Dispensing Fee effective

January 1. A pharmacy failing to provide the Department an attestation letter on or before October 31, regardless of their previous Dispensing Fee, shall be reimbursed the \$9.31 Dispensing Fee.

Contact Kristina Gould at <u>Kristina.Gould@state.co.us</u> with any questions related to this guidance.

Reminder to Update Fax Numbers

Pharmacy providers are encouraged to ensure their fax numbers are accurate and current to receive important pharmacy fax blasts. Many pharmacies either do not have a fax number on file or have a corporate fax number on record. For more information on updating the fax number, refer to the <u>Provider Maintenance - Provider Web Portal Quick Guide</u>.

<u>Physician-Administered Drugs (PADs)</u> <u>Providers</u>

PADs Prior Authorization (PA) Update

A select number of PADs will be subject to PA requirements no earlier than July 1, 2021.

After implementation, providers should ensure that any Health First Colorado member due to receive any of the following PADs have an approved PA on file prior to administration.

Drug Class	HCPCS	Drug Name
Bone Resorption Inhibitor Agents	J0897	Prolia
	50877	Xgeva
	J1459	Privigen
	J1556	Bivigam
	J1557	Gammaplex
		Gammaked
	J1561	Gamunex
Immune Globulin Agents		Gamunex-C
	J1566	Gammagard S/D
	J1568	Octagam 5%, 10%
	J1569	Gammagard Liquid
	J1572	Flebogamma DIF
	J1599	Asceniv

Drug Class	HCPCS	Drug Name	
		Panzyga	
	J0517	Fasenra	
	J1300	Soliris	
	J1745	Remicade	
Monoclonal Antibody Agents	J2182	Nucala	
	J2357	Xolair	
	J2786	Cinqair	
	J3380	Entyvio	
Multiple Sclerecis Agents	J2323	Tysabri	
Multiple Sclerosis Agents	J2350	Ocrevus	
	J0585	Botox	
Neuropuscular Agents	J0586	Dysport	
Neuromuscular Agents	J0587	Myobloc	
	J0588	Xeomin	

All PAD PA procedures and clinical criteria will be located in the upcoming Appendix Y: Physician Administered Drug Medical Benefit Prior Authorization Procedures and Criteria. Notification will be sent out when this appendix becomes available.

Keystone Peer Review Organization (Kepro) will offer various training sessions to providers within the coming months. Additional information will be sent via email, newsletters, monthly provider bulletins and posted to the <u>ColoradoPAR: Health First Colorado Prior Authorization</u> <u>Request Program web page</u> and the <u>Physician Administered Drug Provider Resources web</u> <u>page</u>.

Email <u>HCPF_PAD@state.co.us</u> with all other PAD questions.

340B Drug Pricing Program Providers

Policy and Procedures for Physician-Administered Drugs

Health First Colorado would like to remind all providers who participate in the 340B Drug Pricing Program of the 340B Policy and Procedures for physician-administered drugs (PADs):

- Health First Colorado requires covered entities to determine whether they will dispense only 340B drugs to Health First Colorado members (carve-in) or whether they will not dispense 340B drugs to Health First Colorado members (carve-out).
 - Covered entities cannot bill both 340B purchased drugs and non-340B drugs for Health First Colorado members.
- Covered entities which carve-in must have their National Provider Identifier(NPI) number listed on the Health Resources & Service Administration (HRSA) Medicaid Exclusion File.

Covered entities must bill PAD claim lines at acquisition cost and the line must include the "UD" modifier.

Visit the 340B Policy and Procedures Manual web page for more information.

Email <u>HCPF_PAD@state.co.us</u>. with questions regarding PADs and this policy.

Provider Billing Training Sessions

June and July 2021 Provider Billing Webinar-Only Training Sessions

Providers are invited to participate in training sessions for an overview of Health First Colorado billing instructions and procedures. The current and following months' workshop calendars are shown below.

Who Should Attend?

Staff who submit claims, are new to billing Health First Colorado services, or need a billing refresher course should consider attending one or more of the following provider training sessions.

The institutional claims (UB-04) and professional claims (CMS 1500) training sessions provide high-level overviews of claim submission, prior authorizations, navigating the <u>Department's website</u>, using the <u>Provider Web Portal</u>, and more. For a preview of the training materials used in these sessions, refer to the Beginner Billing Training: Professional Claims (CMS 1500) and Beginner Billing Training: Institutional Claims (UB-04) available on the <u>Provider Training web page</u> under the Billing Training - Resources drop-down section.



For more training materials on navigating the Provider Web Portal, refer to the Provider Web Portal Quick Guides available on the <u>Quick Guides web page</u>.

Note: Trainings may end prior to 11:30 a.m. MT. Time has been allotted for questions at the end of each session.

June 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10 <u>Beginner</u> <u>Billing</u> <u>Training:</u> <u>Professional</u> <u>Claims (CMS</u> <u>1500)</u> <u>9:00 a.m</u> <u>11:30 a.m.</u> <u>MT</u>	11	12
13	14	15	16	17	18	19
20	21	22	23	24 <u>Beginner</u> <u>Billing</u> <u>Training:</u> <u>Institutional</u> <u>Claims (UB-</u> <u>04)</u> <u>9:00 a.m</u> <u>11:30 a.m.</u> <u>MT</u>	25	26
27	28	29	30			

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3
4	5 Independence Day (observed)	6	7	8 Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m 11:30 a.m. <u>MT</u>	9	10
11	12	13	14	15	16	17
18	19	20	21	22 <u>Beginner</u> <u>Billing</u> <u>Training:</u> <u>Institutional</u> <u>Claims (UB-</u> <u>04)</u> <u>9:00 a.m</u> <u>11:30 a.m.</u> <u>MT</u>	23	24
25	26	27	28	29	30	31

July 2021

Live Webinar Registration

Register for a live webinar by clicking the title of the desired training session in the calendar above and completing the webinar registration form. An automated response will confirm the reservation. For questions or issues regarding webinar registration, email <u>co.training@gainwelltechnologies.com</u> with the subject line "Webinar Help." Include a description of the issue being experienced, name and contact information (email address and phone number), and the name and date of the webinar(s) to be attended. Allow up to 2-3 business days to receive a response.

<u>Upcoming Holidays</u>

Holiday	Closed Offices/Offices Open for Business
Independence Day (observed) Monday, July 5	State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be closed. Capitation cycles for managed care entities may potentially be delayed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.

Gainwell Technologies Contacts

Provider Services Call Center 1-844-235-2387

Gainwell Technologies Mailing Address P.O. Box 30 Denver, CO 80201