

Provider Bulletin

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Did You Know?

The <u>Provider Services Call Center</u> virtual agent now has an option for Case Managers. This only applies to agencies that manage cases for Home and Community-Based Services (HCBS) and are already using the Care and Case Management (CCM) system. All other callers may enter the Provider ID or speak a key word to be transferred to the appropriate call queue.

All Providers

Provider Enrollment Revalidation

The flexibility that paused disenrollment for providers past their revalidation date during the COVID-19 Public Health Emergency (PHE) is ending effective November 12, 2023. Providers with revalidation due dates of October 1, 2020, through November 11, 2023, have been given a post-PHE grace period to complete the revalidation process. Providers can locate their new revalidation dates on the Provider Revalidation Dates Spreadsheet located on the <u>Revalidation web page</u>.

Those providers will also be sent another notification six (6) months prior to their revalidation date. Providers with revalidation due dates between October 1, 2020, through November 11, 2023, and with no claims activity in the last three (3) years must revalidate by November 11, 2023. Providers that do not complete the revalidation process by the revalidation due date will be subject to claim denial or disenrollment. Providers with revalidation applications that are 'in process' must complete the process by November 11, 2023.

Visit the <u>Revalidation web page</u> to learn more about the provider revalidation process and how to prepare.

Improve health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

Upcoming License Portal Panel Field Changes and License Reminder

Pharmacies and individual providers submitting licensure data issued by the Colorado Department of Regulatory Agencies (DORA) for enrollments, revalidations or maintenance request applications in the <u>Provider Web Portal</u> must currently enter this information manually. This manual process may lead to errors, increasing application returns to providers and processing times. Formatting inconsistencies can also cause errors with automatic licensure updates when new date spans come into effect.

Upcoming changes will include the Issuing Authority field being displayed first on the License panel and the license number shifting to the right. Automatic verification will be initiated when Colorado DORA is selected from the Issuing Authority drop-down menu and the license number is entered in the correct format. The Effective Date, Expiration Date and Issuing State fields will then auto-populate with a license record added to the provider's application. The fields will remain editable. Warning messages will display if no matching license number is found or if the DORA license format is entered incorrectly.

Providers are reminded that Health First Colorado (Colorado's Medicaid program) enrollment may be inactivated if the provider's license, certification or accreditation has expired or is subject to conditions or restrictions. Providers that are required to maintain a license as part of their enrollment will receive a letter from the Department of Health Care Policy & Financing (the Department) when the primary license is approaching expiration or has reached its expiration date.

Refer to the Provider Enrollment Manual located under the Enrollment Resources section on the <u>Provider Enrollment web page</u> for instructions on adding a license for new enrollment applications.

Refer to the Revalidation Manual located under the Revalidation Resources section on the <u>Revalidation web page</u> or the <u>Revalidation Quick Guide</u> for details on adding or updating a license for revalidation applications.

Refer to the <u>Provider Maintenance - Update License & CLIA Quick Guide</u> located on the <u>Quick</u> <u>Guides web page</u> for more information.

All Providers Who Utilize the ColoradoPAR Program

Inpatient Hospital Review Program (IHRP)

Official Launch of Inpatient Hospital Review Program (IHRP) 2.0

Step 1

The soft launch of Step 1 (Pre-Admission Reviews) of IHRP 2.0 has been extended until September 1, 2023. Step 1 includes submission of inpatient Prior Authorization Requests (PARs) for a small subset of bariatric and spine procedures. Providers have one (1) more

month to test pre-admission review workflows and processes before they are required for claims payment for the subset of codes included in the infographic on the <u>Inpatient Hospital</u> Review Program (IHRP) 2.0 web page.

Steps 2 and 3

IHRP 2.0 post-admission reviews performed on hospital inpatient day 6 (Step 2) and days 30, 60 and 90 and every 30 days thereafter (Step 3) have been required since May 1, 2023. Postadmission reviews do not impact claims payment and allow providers to ask the member's Regional Accountable Entity (RAE) for assistance in care coordination. The issue can be escalated by emailing <u>HCPF_IHRP_ACC@state.co.us</u> if a provider asks for, but does not receive, assistance from the RAE. Protected Health Information (PHI) should not be included in emails.

Joint Operating Committee and Resources

The IHRP Joint Operating Committee (JOC) will continue to meet monthly throughout the summer to discuss questions, issues, results and best practices. JOC meeting dates, training materials and additional information about IHRP 2.0 can be found on the <u>Inpatient Hospital</u> <u>Review Program (IHRP) 2.0 web page</u>. Contact either the ColoradoPAR Program Utilization Management (UM) Team at <u>hcpf_um@state.co.us</u> or Acentra (formerly Kepro[®]) Provider Relations at <u>COproviderissue@kepro.com</u> with questions or for assistance.

Secondary Medical Necessity Substance Use Disorder (SUD) Reviews

Senate Bill (SB) 21-137 Behavioral Health Recovery Act, Section 9, is effective as of July 1, 2023.

SB 21-137, Section 9, requires the Department to contract with an external vendor to provide a secondary medical necessity review for previously denied or partially denied residential or



inpatient Substance Use Disorder (SUD) requests. If a Regional Accountable Entity (RAE) denies or reduces SUD services and a Colorado Administrative Law Judge has upheld the denial, a member's providers can submit a request for a secondary medical necessity review. Providers submitting the request *must* be enrolled in Health First Colorado. Visit the <u>Secondary Medical Necessity SUD Reviews web page</u> to review the request form.

Members may also request the secondary review. Members should email their name and contact information to <u>HCPF_SUDreviewrequest@state.co.us</u>. The member will be contacted for more information and the name of their SUD provider. The identified provider will then be contacted with instructions on how to formally request the second SUD review.

Visit the <u>ColoradoPAR: Health First Colorado Prior Authorization Request Program web page</u> for more information about the ColoradoPAR Program and Prior Authorization Request (PAR) submissions.

Durable Medical Equipment, Prosthetics, Orthotics

& Supplies (DMEPOS) Providers

myAirvo[™] 2 Device Information

The myAirvo[™] 2 device currently uses procedure code E1399. This device requires a Prior Authorization Request (PAR) and may be approved for medical necessity when the member:

- Requires high-flow oxygen from 2-60 L/min
- Experiences spontaneous breathing
- Has trialed lower-cost options that were unsuccessful and the justification is clearly documented

myAirvo^M 2 parts and accessories are only indicated for use on Fisher & Paykel Healthcare myAirvo^M devices. Requests for these accessories to be used on other equipment will not be approved.

As a reminder, equipment expected to be needed for six (6) months or less should be rented. The equipment may be rented or purchased if the expected need is greater than six (6) months. Some items may require rental or purchase regardless of the expected duration. Refer to the <u>DMEPOS Billing Manual</u> for more information.

Contact Haylee Rodgers at <u>Haylee.Rodgers@state.co.us</u> with questions.

Hospital Providers

General Updates

All Hospital Providers

Hospital Stakeholder Engagement Meetings

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

• The next All-Hospital Engagement Meeting is scheduled for Friday, September 8, 2023, from 1:00 p.m. to 3:00 p.m. MT and will be hosted virtually on Zoom.

Visit the <u>Hospital Stakeholder Engagement Meetings web page</u> for more details, meeting schedules and past meeting materials. Contact Tyler Samora at <u>Tyler.Samora@state.co.us</u> with any questions or topics to be discussed at future meetings. Advance notice will provide the Rates Team time to bring additional Department personnel to the meetings to address different concerns.

Rural Health Clinics (RHC)

Rural Health Clinic (RHC) Bi-Monthly Meeting

The next RHC meeting is scheduled for Thursday, September 7, 2023, from 12:30 p.m. to 1:00 p.m. MT and will be hosted virtually on Zoom.

Visit the <u>Rural Health Clinics and Rural Hospital web page</u> for more details, meeting schedules and past meeting materials.



Contact Andrew Abalos at <u>Andrew.Abalos@state.co.us</u> with any questions or topics to be discussed at future meetings. Advance notice will provide the Rates Team time to bring additional Department personnel to the meetings to address different concerns.

Laboratory Service Providers

Newly Covered Benefit Current Procedural Terminology (CPT) 0047U

CPT 0047U is now a covered benefit under Health First Colorado effective July 1, 2023. A Prior Authorization Request (PAR) is required. The unit limit is one (1) per lifetime per member. This unit limit applies to all provider types.

Contact Sarah Kaslow at <u>Sarah.Kaslow@state.co.us</u> with any questions.

Pharmacy Providers

Changes in Buprenorphine/Naloxone Policy

Buprenorphine/naloxone Sublingual (SL) film products are available without prior authorization for Health First Colorado members. Brand Suboxone SL film products are no longer favored and will be subject to generic mandate policies.

Refer to <u>Appendix P</u> located on the <u>Pharmacy Resources web page</u> for more details. Consider prescribing buprenorphine/naloxone SL film products when appropriate.

Physician-Administered Drugs (PADs) Providers

Prevention of Duplicate Injectables Within Seven (7) Days of Billing

The Colorado interChange now compares fee-for-service pharmacy and professional/ professional crossover claim types to prevent duplicate reimbursement payments for Physician-Administered Drugs (PADs), effective for dates of service beginning January 14, 2022. A provider's office (clinic) will not be reimbursed for a PAD when another pharmacy or professional/professional crossover claim line has already been paid for the same drug's specified National Drug Code (NDC) range within seven (7) days of the date of service. The line will be denied, and providers will receive Explanation of Benefits (EOB) 1817 - "Duplicate claim. NDC previously paid" if a duplicate is detected.

Contact the **Provider Services Call Center** with questions about billing.

Contact <u>HCPF_PAD@state.co.us</u> with questions regarding policy.

Physician Services Providers

eConsult Platform Informational Update

A statewide Medicaid electronic consultation platform called the eConsult platform is being implemented by the Department. This platform will promote the Department's mission to improve health care equity, access and outcomes for the people served.

The eConsult platform will enable asynchronous (store and forward) clinical communications between a Primary Care Medical Provider (PCMP) and a specialty provider. The PCMP will be able to transmit an electronic clinical question to a specialty provider, the specialty provider will be able to review the case without the member being present. The specialty provider can then provide electronic medical consultative guidance that assists the PCMP in the diagnosis or management of the member's healthcare needs or facilitates a clinically appropriate referral for a face-to-face visit with a specialty provider.

The Centers for Medicare & Medicaid Services (CMS) has approved the contract for the eConsult platform.

Safety Net Connect was awarded the eConsult vendor contract, and the design, development and implementation of the eConsult platform are underway. It is anticipated that the platform will be up and running in early 2024. Additional provider communications on this topic will be published as needed.

Anticipated Timeline

- Fall/Winter 2022 Contract Negotiations
- Spring 2023 CMS Review of Contract
- Summer/Fall 2023 Implementation Activities
- Winter 2024 eConsult Platform Go Live

Note: The timeline is subject to change without prior notice and is only provided as a reference.

Visit the <u>eConsult Platform web page</u> or email <u>HCPF_econsult@state.co.us</u> for more information.

MED-178 Sterilization Consent Form

The Spanish and English versions of the MED-178 Sterilization Consent Form have been combined into one consent form document to minimize any language barriers and to provide readily available information and clarification of consenting requirements for providers, members and translators.

Providing both languages on one consent form:

- Promotes accurately completed forms
- Allows easier language access for translators, Spanish-speaking clinicians or clinical staff and reviewer support
- Improves the consent form review process

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The combined language (Spanish/English) MED-178 Sterilization Consent Form is currently available for use. Visit the <u>Provider Forms</u> web page under the Sterilization Consent Forms drop-down to view the form.

Physician Services, Clinic Providers

Free Screening, Brief Intervention and Referral to Treatment (SBIRT) Training for Health First Colorado Providers

Free Screening, Brief Intervention and Referral to Treatment (SBIRT) training for Health First Colorado providers is available through partnership with Peer Assistance Services, Inc. (PAS). PAS has provided SBIRT training and support since 2006. The SBIRT program promotes prevention and early intervention efforts through in-person, online and virtual training; technical assistance; and hands-on SBIRT implementation.

Visit the <u>SBIRT Training Calendar web page</u> to register for an upcoming training. The shared goal of Health First Colorado and PAS is to promote SBIRT as a standard of care throughout Colorado. Refer to the <u>SBIRT Billing Manual</u> to learn more about SBIRT in Colorado.

Contact Janelle Gonzalez at <u>Janelle.Gonzalez@state.co.us</u> with questions.

Speech Therapists

Incorrect Rate Reduction

Rates for outpatient speech therapy codes were inadvertently reduced as of July 1, 2023, due to an error during the calculation of targeted rate increases for Ear, Nose and Throat (ENT) physician services. The rates will not be decreased at this time, and any further change to these rates will be communicated in future bulletins. Rates have been corrected on the fee

schedule and in the Colorado interChange. Claims have been reprocessed to adjust any underpaid claims for services.

Refer to the Health First Colorado fee schedule located on the <u>Provider Rates and Fee</u> <u>Schedule web page</u>.

The following codes have been impacted by this error:

92507	92508	92520	92521	92522	92523
92524	92526	92606	92607	92609	92610
92611	92612	92626	92627		

Provider Billing Training Sessions

August 2023 Provider Billing Training Sessions

Providers are invited to sign up for training sessions on an overview of Health First Colorado billing instructions and procedures. These sessions are virtual-only webinars. The current month's training calendar is shown below.

Who Should Attend?

Staff who submit claims, are new to billing Health First Colorado services or who 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 <u>the Department's</u> <u>website</u>, using the <u>Provider Web Portal</u> and more. Refer to the Beginner Billing Training: Professional Claims (CMS 1500) and the 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 a preview of the training materials used in these sessions.

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

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

Monday	Tuesday	Wednesday	Thursday	Friday
	1	2	3	4
7	8	9	10 Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m 11:30 a.m. MT	11
14	15	16	17	18
21	22	23	24 Beginner Billing Training: Institutional Claims (UB-04) 9:00 a.m 11:30 a.m. MT	25
28	29	30	31	

August 2023

Live Webinar Registration

Click the title of the desired training session in the calendar above to register for a webinar. An automated response will confirm the reservation.

Upcoming Holidays

Holiday	Closures		
Labor Day Monday, September 4, 2023	State Offices, the ColoradoPAR Program, DentaQuest and Gainwell Technologies will be closed. Capitation cycles 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