

Provider Bulletin

Reference: B2000456



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Did You Know?

Not all deletions, changes and additions for 2021 Healthcare Common Procedure Coding System (HCPCS) and Current Procedural Terminology (CPT) are covered by Health First Colorado (Colorado's Medicaid Program). Providers are reminded to check the <u>Provider Rates & Fee</u> <u>Schedule web page</u> before billing, to ensure the codes are a covered benefit. All codes must be reviewed for medical necessity, prior authorization coverage standards and rates before the codes are reimbursable. Communications will be sent with coverage information in the coming weeks.

All Providers

National Correct Coding Initiative (NCCI) Notification of Quarterly Updates

Providers are encouraged to monitor the <u>Centers</u> <u>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 January 2021. For more information, visit the <u>CMS</u> <u>National Correct Coding Initiative Edits web page</u>.

National Provider Identification (NPI) Law

Currently-enrolled organization health care providers (not individuals) will be required to submit claims with **dates of service on or after January 1, 2021**, using the unique NPI that is associated with the **provider type** and **service location**.

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

Section 8.126.3 A.2.C of <u>10 CCR 2505-10 8.100 (Volume 8 Rules)</u> specifies that all health care providers must submit every claim using the unique NPI used for enrollment that identifies both the provider type and site (service location) effective for dates of service on or after January 1, 2021.

Home & Community-Based Services (HCBS) providers that are considered Atypical (nonmedical) are not required to have an NPI. However, Atypical providers are reminded that if already using an NPI, they must be in compliance with the law referenced above.

The <u>Provider Web Portal</u> has been updated to allow providers to add the newly obtained NPIs to the enrollment records. Visit the <u>Provider Maintenance - Adding an NPI Provider Web Portal</u> <u>Quick Guide web page</u> for more information.

The NPI is a standard, unique health identifier for health care providers or organization health care providers that is issued by the National Plan and Provider Enumeration System (NPPES). For more information on obtaining an NPI, visit the <u>National Plan & Provider Enumeration</u> <u>System (NPPES) website</u>.

Visit the <u>Colorado NPI Law web page</u> and the <u>NPI Impacts and Related Topics newsletter</u> for additional information, or contact the <u>Provider Services Call Center</u> with questions regarding the Colorado NPI Law.

All Medication Prescribers

Prescriber Tool Project

The Prescriber Tool is a multifunctional platform that will be accessible to prescribers through most electronic health record (EHR) systems. The goals of the Prescriber Tool project are to help improve health outcomes, reduce administrative burdens for prescribers, and better manage prescription drug costs. The Prescriber Tool will achieve these goals by providing patient-specific information to prescribers at the point of care.

The Prescriber Tool is being implemented in modules which will provide different types of patient information or functionalities. The opioid risk module will be implemented first and is anticipated to be operational in January 2021. Additional modules are expected to be implemented by summer 2021, including a module that will provide real-time patient-specific pharmacy benefit information. The cost to prescribers for accessing the Prescriber Tool will vary depending on the specific module(s) and EHR utilized.



Opioid Risk Module

OpiSafe has been contracted to administer an opioid risk module which will help prescribers prevent the misuse and abuse of opioids and benzodiazepines. The module will provide the following:

• Easy access to Prescription Drug Monitoring Program (PDMP) data

- Identification of Opioid Use Disorders (OUD)
- Educational tools with access to evidence-based treatment
- Tools for overdose prevention

Open Access License Program

In order to access the opioid risk module, each user must have an individual license. A limited number of user licenses will be awarded free of charge to qualified Health First Colorado prescribers to facilitate rapid adoption of the module. The subsidized license will be valid for one year, thereafter prescribers will need to pay an annual license fee to OpiSafe. **Note:** The Department is unable to assist with any EHR-related costs (if applicable) for accessing the opioid risk module.

The online application for the Open Access License Program will be available from January 2 through March 1, 2021, or until all subsidized licenses have been awarded.

Visit the <u>Prescriber Tool Project web page</u> to apply for a user license, or for more information about the Prescriber Tool project. Contact <u>hcpf_Colorado.SMAC@state.co.us</u> with any questions.

Clinic, Practitioner & Outpatient Hospital Providers

Physician Administered Drugs (PADs) - Healthcare Common Procedure Coding System (HCPCS)/National Drug Code (NDC) Crosswalk Update

Effective January 1, 2021, the HCPCS/NDC Crosswalk listed as <u>Appendix X</u> on the <u>Provider</u> <u>Billing Manuals web page</u> will contain a Benefit Qualifier field for each record listed. The Benefit Qualifier is for informational purposes and directs any HCPCS/NDC record questions to the most appropriate billing manual, fee schedule, and additional references.

Records on the Crosswalk will be labeled with one of the following and are categorized under the most applicable qualifier.

Benefit Qualifier (BQ)	Benefit	Resources
DIAG	Diagnostic agent, radiopharmaceutical	General Provider Information Billing ManualHealth First Colorado Fee SchedulePhysician Administered Drug ResourcesPhysician Administered Drug Fee Schedule

Benefit Qualifier (BQ)	Benefit	Resources		
DMEPOS	Durable Medical Equipment, Prosthetics, Orthotics, and Supplies	Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Billing ManualDurable Medical Equipment, Upper Payment Limit		
IMM	Immunization	Immunizations Billing Manual Immunization Rate Schedule Pharmacist Enrollment: Over-the-Counter and Immunizations		
IP	Inpatient Hospital	Inpatient/Outpatient (IP/OP) Hospital Billing Manual		
ОР	Outpatient Hospital	Inpatient/Outpatient (IP/OP) Hospital Billing Manual		
орнсо	Outpatient Hospital Specialty Drug Carve-Out	Inpatient/Outpatient (IP/OP) Hospital BillingManualAppendix ZPhysician Administered Drug Resources		
PAD	Physician Administered Drug	Physician Administered Drug Resources Appendix X Physician Administered Drug Fee Schedule		
PHARM	Pharmacy Benefit	Pharmacy Resources Pharmacy Rate List		
0 N/A	BQ To Be Determined	N/A		

Contact Felecia Gephart at Felecia.Gephart@state.co.us with questions or concerns.

Home & Community-Based Services (HCBS) Providers

Changes to Room and Board (R&B) and Personal Needs Amounts (PNA)

Effective January 1, 2021, there will be a 1.3% cost-of-living-adjustment (COLA) to both Social Security and Old Age Pension (OAP) beneficiaries. The maximum Supplemental Security



Income (SSI) monthly payment an individual may receive will increase to \$794.00 per month, and the maximum OAP amount will increase to \$832.00 per month. In response to the COLA increases, the Department is adjusting the Personal Needs Allowance (PNA) but Room and Board (R&B) payment amounts will remain the same for clients utilizing Group Residential Support Services (GRSS), Individual Residential Services and Supports (IRSS), Alternative Care Facilities (ACF) and Supported Living Programs (SLP).

The minimum amount participants must receive for their Personal Needs Allowance will increase to \$94.00 per month and the maximum amount a residential provider may charge a participant in a GRSS, IRSS, ACF or SLP setting for Room and Board will remain at **\$700.00**. The current and past amounts are calculated in the table below:

	2019	2020	2021	2019	2020	2021
	R&B	R&B	R&B	PNA	PNA	PNA
ACF/SLP/GRSS/IRSS	\$695	\$700	\$700	\$76	\$83	\$94

Contact Jeremy Branting in the Community Options Benefits Section at <u>Jeremy.Branting@state.co.us</u> for more information.

Children's Habilitation Residential Program (CHRP) Changes

Effective November 30, 2020, the following changes to the CHRP rules at 10 CCR 2505-8.508 will be in effect:

- Host Home Providers are now allowed to serve youth 18 to 20 years of age for CHRP Habilitation. The Host Home must meet all requirement of Host Homes as defined in <u>Regulation Section 8.600</u> and be contracted with a Program Approved Service Agency (PASA) that is an approved CHRP provider.
- In-Home Support in Transition and Intensive Support Services was changed to Child and Youth Mentorship. There are no other changes to the service.

• Supported Community Connections was changed to Community Connector. This service can now be provided on a unit or hours per year basis. The overall maximum is the same. The service is limited to 1,040 units or 260 hours per year.

Effective January 1, 2021, there will be increases to the Residential Child Care Facility (RCCF) change. Monitor the <u>Provider Rates & Fee Schedule web page</u> for these updates.

Contact Kathleen Homan at <u>Kathleen.Homan@state.co.us</u> or 303-866-5749 for more information.

Independent Living Skills Training (ILST) Policy Change for Travel Time Billing

Effective January 1, 2021, providers may no longer bill the Department for travel time units under procedure code T2013 for the Independent Living Skills Training (ILST) service under the Home & Community-Based Services (HCBS) waiver for persons with a Brain Injury (BI). Case managers will authorize units only for the duration of the direction provision of the ILST service. This change is in conjunction with the 21st Century Cures Act mandate, which requires state Medicaid agencies implement an Electronic Visit Verification (EVV) System.



The direction provided in <u>Operational Memo 20-093</u> for removing travel time units from prior authorization requests (PARs) containing personal care and homemaker services will also be applied to PARs containing the ILST services. Contact <u>evv@state.co.us</u> for more information.

Rendering Services

Home & Community-Based Services providers are reminded that services should only be rendered if the provider has enrolled for the correct specialty. Claims may be denied if services are submitted on a claim that do not match the provider enrollment specialty for the billing provider. Visit the <u>Provider Maintenance - Provider Web Portal Quick Guide web page</u> for more information about adding specialties.

Contact the <u>Provider Services Call Center</u> to ensure appropriate enrollment.

Home Health Agency Providers

Home Modification Evaluation Billing

Home Modification evaluation services are to be billed to the Health First Colorado when the member is enrolled in an Accountable Care Collaborate (ACC) managed care plan (Denver Health Medicaid Choice or Rocky Mountain Health Plans Prime). These services are "carved

out" from coverage in the managed care plans. The <u>Provider Web Portal</u> may be used for billing.

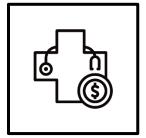
Contact Alex Weichselbaum at <u>Alex.Weichselbaum@state.co.us</u> with any questions.

Hospital Providers

General Updates

Inpatient All Patients Refined Diagnosis Related Groups (APR-DRG) Hospital Providers

Draft Inpatient Base Rate Methodology



A new Inpatient Base Rate methodology is being created to replace the current methodology which relies heavily on Medicare Base Rate methodology. The second draft methodology was presented during the November 2020 <u>Hospital Stakeholder Engagement Meetings</u>. Revised draft methodologies will be presented during the upcoming Hospital Stakeholder Engagement Meetings. See below for information on day and time of meetings.

All Hospital Providers

Hospital Stakeholder Engagement Meetings

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

- An extra Hospital Engagement Meeting for a discussion on the development of the new Inpatient Base Rate methodology and the transition to EAPG Version 3.16 is scheduled for <u>Friday, December 11, 2020, from 1:00 p.m. 3:00 p.m. MT</u> and will be hosted virtually.
- The next Rural Hospital Engagement meeting is scheduled for <u>Thursday, January 7,</u> <u>2021, from 2:00 p.m. - 4:00 p.m. MT</u> and will be hosted virtually.
- The All-Hospital Engagement meeting is scheduled for Friday, January 8, 2021, from <u>1:00 p.m. - 4:00 p.m. MT</u> and will be hosted virtually.

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

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.



Hospital Transformation Program (HTP) Update

HTP Refresher Training

An HTP Refresher training took place on Tuesday, November 10, 2020. Contact <u>COHTP@state.co.us</u> or contact Hospital Transformation Project Manager Joe Sekiya at <u>Joe.Sekiya@state.co.us</u> with questions or additional information. The training was recorded and posted to the <u>Colorado Hospital Transformation Program web page</u>.

Rural Support Payment Update

The Rural Support Payment is an integral part of the HTP that will aid in making the concepts of HTP operations a reality for many rural hospitals. The purpose of this fund is to assist rural hospitals as they transition towards a sustainable delivery model with \$12 million available



annually for each of the five years of the HTP waiver. This dedicated funding will help rural hospitals prepare for future value-based payment environments.

Funding will be awarded to rural hospitals demonstrating the most financial distress based on financial and utilization measures. Funding will be prioritized to low revenue critical access hospitals (bottom 10%), equating to about 17 hospitals state-wide. A revised draft hospital agreement was released in early November, with funding

determinations being made between December 2020 and January 2021.

HTP Contractor Update

This notice is to inform stakeholders that the State of Colorado's contract with Sellers Dorsey for services related to HTP will end on December 31, 2020. Sellers Dorsey will no longer be providing services relative to the HTP after that date.

The Department began working with consultants from Myers and Stauffer LC as of October 14, 2020, for services related to HTP. Continue to direct any HTP-related questions to <u>COHTP@state.co.us</u>.

Community Advisory Council

Community Advisory Council meetings continue to take place on a monthly basis, with the most recent meeting taking place on Monday, October 19, 2020. The agenda, meeting materials and previous meeting notes can be found on the HTP Community Advisory Council website.

Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) Board meeting



A CHASE Board meeting took place <u>via webinar</u> on Tuesday, November 17, 2020 at 3:00 p.m. MT. Meeting materials and information about the board are posted on the <u>Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) Board web page</u>.

Pharmacies and All Medication-Prescribing Providers

Preferred Drug List (PDL) Announcement of Preferred Products

The following will be the preferred products for the PDL drug classes listed below effective January 1, 2021.

NSAIDs - Oral

Preferred products will be: Celecoxib, Diclofenac Sodium EC/DR, Diclofenac Potassium, Ibuprofen tab/susp (Rx), Indomethacin, Ketorolac tab, Meloxicam tab, Nabumetone, Naproxen IR/EC/DR/susp (Rx), Sulindac

NSAIDs - Non-Oral

Preferred products will be: Diclofenac 1% gel (Rx), Diclofenac soln, Voltaren(BNR) gel (Rx)

Antiherpetic Agents

Preferred products will be: Acyclovir, Denavir, Famciclovir, Valacyclovir, Zovirax(BNR) cream/ointment

Fluoroquinolones - Oral

Preferred products will be: Cipro(BNR) susp, Ciprofloxacin susp, Ciprofloxacin tab, Levofloxacin tab

Antibiotics, Inhaled

Preferred products will be: Tobramycin inhalation solution, Cayston (2nd Line)

Hepatitis C Virus Treatments

Preferred products will be: Harvoni pellets, Ledipasvir/Sofosbuvir (generic Harvoni - Asequa only), Mavyret, Ribavirin cap/tab, Sofosbuvir/Velpatasvir (generic Epclusa - Asequa only), Vosevi (2nd Line)

Pulmonary Arterial Hypertension Agents

Preferred products will be: Epoprostenol, Letairis (BNR), Orenitram ER, Sildenafil tab (generic Revatio), Tracleer(BNR) 62.5 mg, 125 mg tablet, Tadalafil (generic Adcirca), Ventavis

Newer Generation Antidepressants

Preferred products will be: Bupropion 75mg, 100mg tablet, Bupropion ER 100mg, 150mg, 200mg, 300mg tablet, Citalopram, Desvenlafaxine (generic Pristiq), Duloxetine (generic Cymbalta), Escitalopram, Fluoxetine cap/soln, Fluvoxamine IR, Mirtazapine, Paroxetine, Sertraline, Trazodone, Venlafaxine IR, Venlafaxine ER caps

Monoamine Oxidase Inhibitors (MAOIs)

Preferred products will be: No preferred agents

Tricyclic Antidepressants (TCAs)

Preferred products will be: Amitriptyline, Doxepin 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg capsule, Doxepin solution, Imipramine HCl, Nortriptyline

Triptans and Other Migraine Treatments

Preferred products will be: Eletriptan, Imitrex(BNR) intranasal, Naratriptan, Rizatriptan, Sumatriptan tab/vial

Antipsoriatics

Preferred products will be: Acitretin, Calcipotriene soln, Dovonex(BNR) cream, Taclonex(BNR) susp/oint

Antiemetics - Oral

Preferred products will be: Doxylamine Succinate/Vitamin B6 (generic Diclegis - **Analog Pharma only**), Ondansetron, Meclizine (Rx), Metoclopramide sol/tab, Prochlorperazine, Promethazine syrup/tab, Trimethobenzamide

Antiemetics - Non-Oral

Preferred products will be: Prochlorperazine suppository, Promethazine 12.5 mg and 25 mg suppository, Transderm-Scop(BNR) patch

Pancreatic Enzymes

Preferred products will be: Creon, Zenpep

Proton Pump Inhibitors

Preferred products will be: Esomeprazole Magnesium cap, Lansoprazole cap, Nexium(BNR) packet, Omeprazole cap, Pantoprazole tab, Prevacid(BNR) solutab

H. Pylori Treatments

Preferred products will be: Pylera

Ulcerative Colitis Agents - Oral

Preferred products will be: Apriso, Lialda, Pentasa, Sulfasalazine

Ulcerative Colitis Agents - Non-Oral

Preferred products will be: Mesalamine suppository (generic Canasa), sf-Rowasa (mesalamine) enema



Antiplatelet Agents

Preferred products will be: Aggrenox(BNR), Aspirin/Dipyridamole, Brilinta, Cilostazol, Clopidogrel, Dipyridamole, Pentoxifylline, Prasugrel

Methotrexate Agents

Preferred products will be: Methotrexate vial, tablet

Targeted Immune Modulators

Preferred products will be: Enbrel, Humira, Taltz (2nd Line), Xeljanz IR, Otezla (2nd Line)

Epinephrine Products

Preferred products will be: Epinephrine autoinjector (generic Epipen - Mylan only)

Antihyperuricemics

Preferred products will be: Allopurinol, Mitigare(BNR), Probenecid, Probenecid/Colchicine

Pharmacy and Therapeutics (P&T) Committee Meeting



Tuesday, January 12, 2021

1:00 p.m. - 5:00 p.m. MT

303 E. 17th Ave (meeting to be held virtually, not in person)

Visit the <u>Pharmacy and Therapeutics (P&T) web page</u> for the agenda and meeting information.

Pharmacy and Therapeutics (P&T) Committee New Member Openings

The decision-making process for P&T Committee member terms 2021-2022 is underway.

Applicants are being accepted for the following 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 a CV along with a completed <u>Conflict of Interest form</u> to:

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

Medication Prior Authorization Request (PAR) Form Requirements

Per <u>Appendix P</u>, medication PAR forms are available on the <u>Pharmacy Resources web page</u> and can be faxed to the Magellan Rx Management Pharmacy Call Center at 1-888-424-5881.

- The PAR form must contain the following items:
 - The member's full name, date of birth and Medicaid ID number/Social Security Number
 - The authorized provider's full name, NPI number and signature
 - The drug name, strength and formulation
- PAR forms can be signed by anyone who has authority under Colorado law to prescribe the requested medication. Assistants of authorized persons cannot sign the PA form.
- Pharmacists from long-term-care pharmacies and infusion pharmacies must obtain a signature from someone who is authorized to prescribe the requested drug(s) before submitting the PA form.

The following individuals can request a PAR by phone at 1-800-424-5725:

- Physicians
- Assistants who are acting as the agent of the physician
- Pharmacists from long-term-care pharmacies (if specified in PA criteria)
- Pharmacists from infusion pharmacies (if specified in PA criteria)

Refer to the Preferred Drug List (PDL) and Appendix P on the <u>Pharmacy Resources web page</u> for more information regarding medication prior authorization criteria and policies.

Provider Billing Training Sessions

December 2020 and January 2021 Provider Billing and ClaimsXten™ 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 UB-04 and 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 - Schedule and Signup 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.

ClaimsXten[™] Training Sessions

The ClaimsXten $^{\mathbb{M}}$ training sessions will be conducted by Gainwell Technologies during the month of December.

See the training session schedule below. Providers are encouraged to visit the <u>Provider</u> <u>Training web page</u> for the latest updates and information on the ClaimsXten^M training session schedule as dates and times are subject to change.

Note: Time has been allotted for questions at the end of each session.

December 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4 <u>ClaimsXten™</u> <u>Training</u> <u>2:00 p.m</u> <u>3:00 p.m.</u> <u>MT</u>	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 Beginner Billing Training: Institutional Claims (UB- 04) 9:00 a.m 11:30 a.m. MT	18 <u>ClaimsXten™</u> <u>Training</u> <u>2:00 p.m</u> <u>3:00 p.m.</u> <u>MT</u>	19
20	21	22	23	24 Christmas Eve	25 Christmas Day	26
27	28	29	30	31 New Year's Eve		

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

January 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@dxc.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.

Upcoming Holidays

Holiday	Closed Offices/Offices Open for Business
Christmas Eve Thursday, December 24	State Offices will be closed. DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be open.
Christmas Day Friday, December 25	State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be closed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.
New Year's Eve Thursday, December 31	State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be open.
New Year's Day Friday, January 1	State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be closed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.
Martin Luther King, Jr. Day Monday, January 18	State Offices and the ColoradoPAR Program will be closed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks. DentaQuest and Gainwell Technologies will be open.

This article has been updated since it was originally published.