

# **Provider News & Resources**

April 8, 2022 Issue 46

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April 2022 Provider Bulletin (B2200477)

#### **Upcoming Holidays:**

Memorial Day -Monday, May 30

State Offices, the ColoradoPAR Program, DentaQuest and Gainwell Technologies will be closed.



#### **Did You Know?**

## Claims Submitted with Medicare Advantage Primary

If a member has a Medicare Advantage plan, the primary billing information should be reported on a claim in the Medicare fields, not as Third-Party Liability (TPL) fields.

A Medicare Advantage plan (such as a Health Maintenance Organization (HMO) or Preferred Provider Organization (PPO)) is another Medicare health plan choice a member may have as part of Medicare.

Refer to the <u>Submitting a Claim with Other Insurance or</u> <u>Medicare Crossover Information</u> Quick Guide for more information.

#### **Reminder:**

#### **Timely Filing**

Timely filing for Health First Colorado (Colorado's Medicaid program) claim submission is 365 days from the date of service (DOS).

Providers are responsible for ensuring that each claim filed with the fiscal agent appears on the Remittance Advice (RA) as paid, denied, or "in process."

If claim information does not appear on the RA within 30 days of an electronic transmission or paper claim mailing, the provider is responsible for contacting the fiscal agent to determine the status of the claim and resubmitting the claim if necessary.

#### **Dental Providers: DentaQuest Delay**

DentaQuest's claim file did not run as scheduled. Provider payment for the week of April 11, 2022 will be delayed.

It is anticipated that payment will be posted by Friday April 15, 2022. We apologize for any inconvenience.

## **Provider Enrollment:**

#### **Application Fees, Fingerprinting, Site Visits**

Application fees, fingerprinting, and site visits are required for enrollment for some providers. If any of these requirements were waived for the Public Health Emergency (PHE), they will be required to continue enrollment.



Refer to the New Provider Specialties for COVID-19 Long-Term Temporary Enrollment communication under the Enrollment News and Updates section on the <u>Provider Enrollment web page</u> for more information.

## **EMS COVID-19 Only Benefit**

To help alleviate the impact to Colorado's uninsured population, the Colorado Department of Health Care Policy & Financing (the Department) encourages uninsured Coloradans to apply for coverage through <u>Health First Colorado</u> (Colorado's Medicaid program). There is a special COVID-19 only Medicaid eligibility category for uninsured individuals (regardless of their income) that covers COVID-related testing and treatment services while the federal Public Health Emergency (PHE) remains in effect. The Department is verifying that the COVID-19 vaccines are covered under this program with the Centers for Medicare Services (CMS).

When uninsured individuals apply through <u>Health First Colorado</u>, applicants must attest that they live in Colorado, need health care for COVID-19 testing, treatment or care for complications related to COVID-19, and have been impacted through exposure to or potential infection of COVID-19. In addition, providers must be enrolled with Colorado Medicaid to submit claims on behalf of these uninsured individuals.

Claims with dates of service on or after March 11, 2021, under this program must have one or more of the following diagnosis codes present to identify the services as COVID-related or the claim will be denied.

B94.8	B99.9	J12.82	J18.9	
M35.81	M35.89	O98.5	R05	
R06.2	R50.9	U07.0	U07.1	
U09.0	Z11.52	Z11.59	Z13.9	
Z20.818	Z20.822	Z20.828	Z86.16	

Only the following diagnosis codes are covered under this benefit:

Any updates regarding vaccine coverage will be sent as they become available. Future communications will include any updates to this guidance.

Note: This article was originally published in the December 13, 2021, newsletter.

## Family Planning Providers: Rate Updates for Procedure Code 99203 with Modifiers FP and FP+GT

The rates for the Evaluation and Management (E&M) Current Procedural Terminology (CPT) code 99203, when billed with the Family Planning modifier (FP) or FP + GT (telemedicine modifier) were loaded into the Colorado interChange incorrectly.

The rates have been corrected on the FY 19-20, FY 20-21 and FY 21-22 Health First fee schedules. Claims submitted for 99203 (FP) or 99203 (FP+GT) with dates of service on or following March 28, 2020, were reprocessed on April 4, 2022, for the additional payment.

The corrected rate amounts, per fiscal year, for 99203 (FP) and 99203 (FP + GT) are listed below:

Code	Modifier Combinations		Note
99203	FP	FP+GT	
FY 21-22	\$122.77	\$127.84	2.5% increase applied to FY 20-21 rate
FY 20-21	\$119.78	\$124.73	1.0% decrease applied to FY 19-20 rate
FY 19-20	\$120.99	\$125.94	Base rate

## **Featured Quick Guide:**



## **Provider Maintenance - Update License**

The License panels of the Provider Enrollment Portal and the Provider Web Portal (Provider Maintenance function) have been updated to require additional information when adding a new license **or** updating/renewing an existing license (enrolled providers only).

Refer to the bulletin article, License Panel Update for the Provider Enrollment Portal and the Provider Web Portal, in the <u>April 2022 Provider Bulletin (B2200477)</u> for additional information.

Visit the <u>Quick Guides web page</u> to locate all published Provider Web Portal Quick Guides.

## Featured: Resources Section

The **Provider Address Usage** table appears under the **Resources** section located on the <u>Quick</u> <u>Guides web page</u>.

These scenarios provide guidance on updating the appropriate fields in the Provider Web Portal.

#### Provider Address Usage

There are several different provider address fields in the Colorado interChange. Below is the usage for each type of address:

Usage	Service Location Address	Mailing Address	Billing Address	Contact Information
Provider Renders Services	Х			
Populates "Find A Doctor" Directory	Х			
Shared National Provider Identifier (NPI) Zip Code Used for Claims	x			
Provider Communications (bulletins, newsletters, etc.)	x			
Prior Authorization Request (PAR) Letters Sent (if not receiving electronically)		х		
Paper Checks and Remittance Advice Statements Sent (if not receiving electronically)			x	
Maintenance Updates				Х
Enrollment Approvals				Х
Enrollment Applications				Х

For more information, refer to the:

- Address Changes section located in the <u>Provider Maintenance</u> Quick Guide
- Address Information, Addresses Panel and the Contact Information sections located in the
  <u>Provider Enrollment Manual</u>
- Provider Enrollment section on the <u>Quick Guide web page</u>

Visit the <u>Quick Guides web page</u> to locate all published Provider Web Portal Quick Guides.

## **Pharmacy Providers**

## **Reminder: 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.



Visit the <u>Provider Maintenance - Provider Web Portal Quick Guide web page</u> for more information on updating the fax number.

## **Recently Published Billing Manuals**

- Outpatient Behavioral Health Fee-for-Service
- Physical and Occupational Therapy (PT/OT)
- <u>Speech Therapy</u>

Visit the <u>Billing Manuals web page</u> to locate all published manuals.

## **Updated Fee Schedules**

- Health First Colorado Fee Schedule
- Hospital Discounted Care Rates
- Immunization Fee Schedule
- PAD Q1-Q2 Fee Schedule

Visit the <u>Provider Rates and Fee Schedule web page</u> to locate all published fee schedules.

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