

# Colorado Partnerships Provider Newsletter



## December 2017

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Did you know that Colorado Provider Relations team does monthly training webinars?

These webinars are designed as an overview of Beacon Health Options ~ CCARs, contacts, contracting and credentialing, documentation and Clinical requirements, coding, claims and Provider Connect Overview. We allow time to answer questions from providers.

Here is our 2018 schedule for the WebEx Training Sessions:

<b>January 5th</b>	<b>July 6th</b>
<b>February 2nd</b>	<b>August 3rd</b>
<b>March 2nd</b>	<b>September 7th</b>
<b>April 6th</b>	<b>October 5th</b>
<b>May 4th</b>	<b>November 2nd</b>
<b>June 1st</b>	<b>December 7th</b>

You can register for the sessions by clicking [here](#).

\*you will need to hold down the Control button on your keyboard, and click on the link above at the same time.



# Statement Regarding Billing of Medicaid Members



## Statement Regarding Billing of Medicaid Members:

Medicaid expansion in Colorado means that thousands of Coloradans now have health insurance, some for the first time. While this is positive overall, it has also created pressure on the Medicaid provider network. Medicaid members may sometimes seek services from non-Medicaid providers, who may not know or understand Colorado law regarding billing Medicaid members.

The Department has received numerous questions and reports of health care providers billing Medicaid members for co-insurance, deductibles, or full payment for services. It is important that all health care providers know that Medicaid members cannot be billed for any service covered by Medicaid.

Code of Colorado Regulations [10 CCR 2505-10 8.012](#), "Providers Prohibited from Collecting Payment from Recipients", states that no Medicaid member shall be liable for the cost or the cost remaining after payment by Medicaid,

Medicare, or a private insurer, of medical benefits authorized under Title XIX of the Social Security Act. This law applies regardless if:

- \* Medicaid has or has not reimbursed the provider,
- \* Claims are rejected or denied by Medicaid due to provider error,
- \* A provider is enrolled in the Colorado Medical Assistance Program,
- \* A Medicaid member agrees to pay for part or all of a covered service.

Payment may be collected from or billed to a Medicaid member **only** if the specific service rendered is not covered by Medicaid. In this situation, the Department requires that providers obtain a statement prior to service, signed by the Medicaid member, acknowledging that the specific service is not a Medicaid-covered benefit and agreeing to pay.

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The Department encourages providers to consider enrolling with Medicaid to ensure reimbursement for services provided to Medicaid services.

Enrolling in Medicaid does not mean that a provider must accept all Medicaid members who request services. **Medicaid providers have full control of the number of Medicaid members they see.** Accepting both commercial insurance and Medicaid also means providers can serve families with mixed health insurance coverage, and can continue to serve patients when their circumstances change and along with them, their health insurance. Medicaid and your communities need you – please consider enrolling today. For more information, please refer to the [Provider Enrollment](#) web page.

Please contact the Department's fiscal agent, Xerox State Healthcare, at 1-800-237-0757 for questions related to proper billing of Medicaid-covered services.

For more information about the benefits of enrolling with Medicaid, please contact Marceil Case, Provider Relations Manager, [Marceil.Case@state.co.us](mailto:Marceil.Case@state.co.us).



As a reminder, in the Provider Handbook, for the BHOs has information about balance billing. You can find this on page 16 it states:

### **COLLECTION OF CO-PAYMENTS/ DEDUCTIBLES**

Members covered through Health First Colorado are not subject to co-pays or deductibles. Collection of fees directly from a Health First Colorado member may result in termination as a participating provider. This includes charges for non-covered services, including missed appointments.

Also, regarding co-payments, on page 58 of the Provider Handbook, on page 58 it states:

### **RECIPIENT CO-PAYMENTS**

The BHO and its contracted provider network will not assess any charges to Health First Colorado recipients for covered services. This includes co-payments. **Balance billing is also not allowed.** Members receiving treatment for SUD covered diagnoses should have a signed copy of the Release of Information form on file before providers reach out to the BHO for authorization or coordination of care. Members receiving SUD services who do not feel comfortable allowing their providers to bill Health First Colorado may work with their provider to find other funding sources for the treatment, including member self-pay, if the member chooses this option.

# Updates and Information

## USCSM Coding Manual Updates

The Uniform Services Coding Manual (USCM) has been updated. This manual went into effect on **January 1, 2018.**

The USCM holds the requirements of billing procedure codes for behavioral health services covered by the Department and the Office of Behavioral Health.

The manual is updated periodically in order to keep it as current as possible and in order to maintain consistency between the BHO contract, the OBH contract, the State Plan Amendments, the 1915(b)(3) waiver, and coding guidelines.

The updated USCM can be located at <https://www.colorado.gov/pacific/hcpf/mental-health-rate-reform-0>

We have had a lot of providers call and ask us about the Accountable Care Collaborative Phase II changes in 2018.

The official information can be found at this website: <https://www.colorado.gov/hcpf/accphase2>.

Please make sure you are subscribing to the updates that will be sent out by the Department of Health Care Policy & Financing to keep abreast of the on-going changes.



# Colorado Partnerships

## Provider Helpful Contacts

### Contact Information

In order for your experience in communicating with Beacon Health Options to be as efficient as possible, please be sure to contact the correct department to have your questions answered.

CO Clinical	
Phone Number	Reason to Contact
1-800-804-5008	Questions regarding SCAs or authorizations

National Claims Line	
Phone Number	Reason to Contact
1-800-888-3944	Questions regarding claim status/repayment

EDI Helpdesk	
Phone Number	Reason to Contact
1-888-247-9311	Questions regarding ProviderConnect

Your Colorado Provider Relations Team is here to help you.

Please fell free to contact us.

CO Provider Relations	
Phone Number	Reason to Contact
1-800-804-5040	Any questions not covered by other departments