

Beginning Billing Workshop Practitioner

Colorado Medicaid
2015

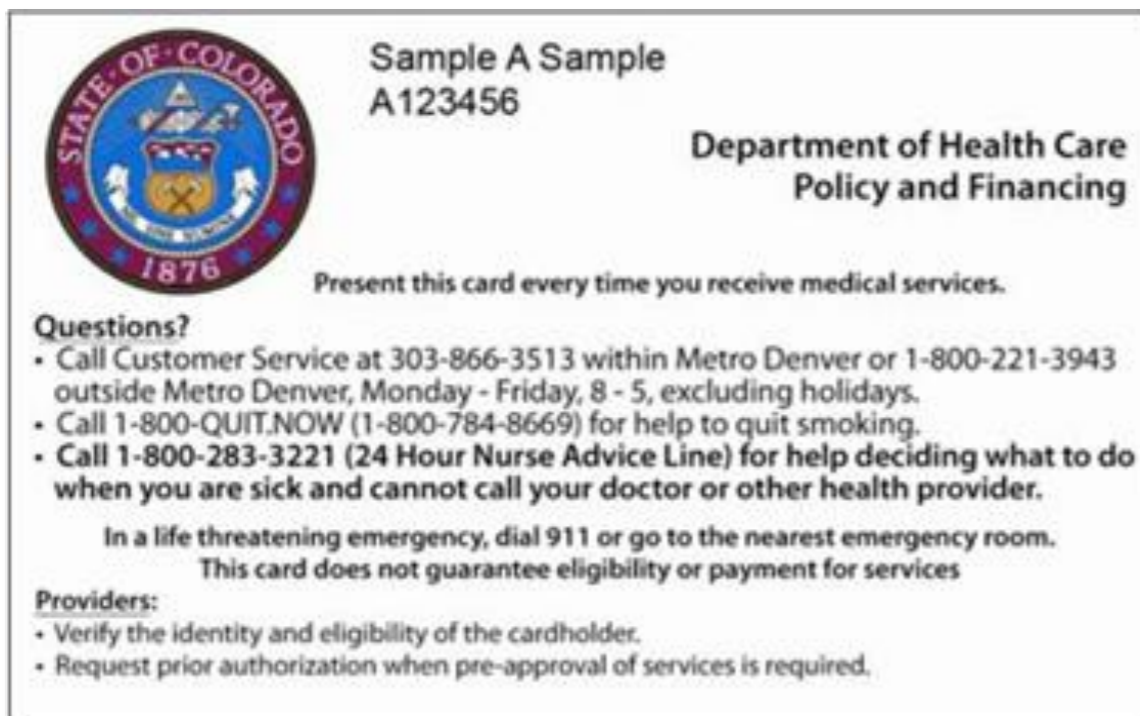


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Medicaid Identification Cards

- Both cards are valid
- Identification Card does not guarantee eligibility



EPSDT Program

- **Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Program**
 - Federally mandated health care benefits package for essentially all Colorado Medical Assistance Program children
 - Ages birth through 20 years
 - Emphasizes preventive care
 - Focuses on early identification and treatment of medical, dental, vision, hearing, and developmental concerns



EPSDT Program (cont.)

- EPSDT establishes a regular pattern of healthcare through routine health screenings, diagnostic, treatment services
 - See the AAP Bright Futures periodicity for recommended well child visits https://www.aap.org/en-us/professional-resources/practice-support/Periodicity/Periodicity%20Schedule_FINAL.pdf
 - EPSDT well child screenings must include testing for lead poisoning
 - at 12 and 24 months or between 36 and 72 months if not previously tested
 - This continues to be a CMS requirement for all Medicaid eligible children until Colorado can provide enough data to show it is not a concern in this region



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EPSDT - D = Diagnostic

- When a screening indicates the need for further evaluation, diagnostic services must be provided
 - The referral should be made without delay
 - Provide follow-up to make sure that the child receives a complete diagnostic evaluation

EPSDT - T = Treatment

- Health care must be made available:
 - Treatment or other measures to correct/improve illnesses or conditions discovered
- All services must be provided:
 - If Medicaid coverable
 - If medically necessary
 - Even if the service is not available under the State plan to other Medicaid eligibles



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EPSDT - Medical Necessity

- **No arbitrary limitations on services are allowed**
 - e.g., one pair of eyeglasses or 10 PT visits per year
- Additional services above what is covered in State plan must be allowed for any child or youth 20 and under:
 - when medically necessary
 - Must be Medicaid coverable as listed in 1905(a)(c) of the Social Security Act
- State may determine which treatment it will cover:
 - among equally effective & actually available alternative treatments
 - as long as the determination is specific to the individual child



EPSDT - Medical Necessity (cont.)

- EPSDT does NOT include:
 - Experimental/Investigational Treatments
 - Services or items not generally accepted as effective
 - Services primarily for caregiver or provider convenience
 - Services or items in which an equally effective but less expensive option is available



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EPDST - How to Request Services or Items - PAR Process

- Use the standard PAR process outlined earlier in this presentation
- You can and should request services or items where the Fee schedule code list shows it is not a benefit of Colorado Medicaid
 - i.e. circumcisions, personal care



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Letter of Medical Necessity

- Must include a letter of medical necessity (LMN) with request
 - Letters should include appropriate CPT and HCPC codes, units or other details related to the request.
 - Detailed information as to how the service or procedure will improve or maintain the child/youth health, prevent it from worsening or prevent the development of additional health problems.
 - Include duration and treatment goals for the request as well as any previous treatments and responses.
 - Is the service or item safe?
 - How do you believe the item to be effective?
 - Send relevant documents, manufacturer information, etc. with your request



PARs Reviewed by ColoradoPAR

- With the exception of Waiver and Nursing Facilities:
 - The ColoradoPAR Program processes all PARs
 - Including revisions
 - Including EPSDT exceptions
 - Visit ColoradoPAR.com for more information

Mail:

Prior Authorization Request
55 N Robinson Ave., Suite 600
Oklahoma City, OK 73102

Phone:

Phone: 1.888.454.7686
FAX: 1.866.492.3176
Web: ColoradoPAR.com



Electronic PAR Information

- PARs/revisions processed by the ColoradoPAR Program must be submitted via CareWebQI (CWQI)
- The ColoradoPAR Program will process PARs submitted by phone for:
 - emergent out-of-state
 - out-of area inpatient stays
 - e.g. where the patient is not in their home community and is seeking care with a specialist, and requires an authorization due to location constraints



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PAR Letters/Inquiries

- Continue utilizing Web Portal for PAR letter retrieval/PAR status inquiries
- PAR number on PAR letter is only number accepted when submitting claims
- If a PAR Inquiry is performed and you cannot retrieve the information:
 - contact the ColoradoPAR Program
 - ensure you have the right PAR type
 - e.g. Medical PAR may have been requested but processed as a Supply PAR



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PAR Requests

- All requests for services or items will be reviewed by the ColoradoPAR Program for medical necessity and a response will be returned to the requesting provider in 4-6 days.
 - May be a response that is pended for additional information
 - May be approved
 - May be denied and will include a reason for denial
 - May be partially approved and will include what specific items were denied and why
- For more information on the PAR process, please visit the Colorado PAR website at ColoradoPAR.com



Department Website

The screenshot shows a web browser at the URL <https://www.colorado.gov/hcpf>. The page header includes the Colorado logo and the text "Colorado The Official Web Portal". The main heading is "COLORADO Department of Health Care Policy & Financing". A navigation menu contains "Home", "For Our Members", "For Our Providers", and "For Our Stakeholders". A callout box labeled "1" points to the URL in the browser's address bar. Another callout box labeled "2" points to the "For Our Providers" menu item. Below the navigation, a sub-header reads: "We administer Medicaid, Child Health Plan Plus, and other health care programs for Coloradans who qualify." The main content area features four large blue buttons: "Explore Benefits" (with a magnifying glass icon), "Apply Now" (with a checkmark icon), "Find Doctors" (with a group of people icon), and "Get Help" (with an information icon). At the bottom, there are two promotional banners: "Feeling Sick? For medical advice, call the Nurse Line: 800-283-3221" (with a nurse icon) and "Get Covered. Stay Healthy. colorado.gov/health" (with an umbrella icon).



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Provider Home Page

Find what you need here

Contains important information regarding Colorado Medicaid & other topics of interest to providers & billing professionals

The screenshot shows the 'Provider Home Page' of the Colorado Department of Health Care Policy & Financing. The page has a blue header with the text 'The Official Web Portal' and a 'Translate' button. The main content area features the department's logo and name. A navigation menu is located below the header, with 'For Our Providers' selected. The 'For Our Providers' section contains four main links: 'Why should you become a provider?' (with a cross icon), 'How to become a provider (enroll)' (with a document icon), 'Provider services (training, & more)' (with a dollar sign icon), and 'What's new? (bulletins, newsletters, updates)' (with a radio tower icon). Below these are six quick links: 'CBMS Colorado Benefits Mgmt. System', 'DDweb', 'Web Portal', 'Get Help', 'Get Info', and 'Find a Doctor Are you a client?'.



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Thank you!



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