

In the Colorado Access Provider Manual, you will find information about:

Section 1. Colorado Access General Information

Section 2. Colorado Access Policies

Section 3. Quality Management

Section 4. Provider Responsibilities

Section 5. Eligibility Verification

Section 6. Claims

Section 7. Coordination of Benefits

Section 8. Provider-Carrier Disputes (Claim Appeals)

Section 9. Utilization Management Program

Section 10. Behavioral Health and Substance Use
Specific Policies and Standards

Section 11. Child Health Plan *Plus* (CHP+)
offered by Colorado Access
Specific Policies and Standards

Section 12. General Directive for all PCMPs

- Mission Statement
- Provider Manual
- Contract Documents
- Provider Network Services
- Forms
- Provider Portal
- Essential Community Provider
- Medical Application Assistance

Search Tip:

You can search quickly and easily by using the command Control+F. This will display a search box for you to enter what you want to find.

Colorado Access General Information

MISSION STATEMENT

Partner with communities and empower people with access to quality, affordable care.

Our employees will work together in an environment that promotes mutual respect and partnering in support of the following commitments:

- We will eliminate barriers to access to high quality health care for each of our members
- We will facilitate services to support coordinated care for all of our members
- We will develop programs that support continuity of care for the medically underserved
- We will work closely with Providers to develop and administer streamlined managed care principles
- We will support our partner Providers in an effort to improve the safety-net system
- We will work with our regulators to ensure the effective movement of the medically underserved populations into managed care programs
- We will strive to exceed expectations

THE PROVIDER MANUAL

This manual is part of the Provider contract, is updated frequently, and replaces in its entirety all previous versions. Colorado Access retains the right to add to, delete from and otherwise modify this Provider Manual. Providers and facilities must acknowledge this Provider Manual and any other written materials provided by Colorado Access as proprietary and confidential. If there is a conflict with the Provider Manual and your Agreement, your Agreement supersedes. We encourage you to contact your provider relations representative whenever you need clarification.

Please note: Material in this Provider Manual is subject to change. Please refer to the online version as it is the most current version. It is available online at coaccess.com/provider-resources.

We will notify you of updates through the provider newsletter and/or our website. The provider newsletter is distributed by email only, so please be sure we have your current email address for our distribution list. You can submit your email information to ProviderNetworkServices@coaccess.com. The most current version is available online at coaccess.com/provider-bulletins-and-updates.

YOUR CONTRACT DOCUMENTS

Your contract documents consist of your Provider Agreement and all documents and Addenda attached to the Agreement. In addition, your contract documents also include the terms, conditions, rights and obligations set forth in this Provider Manual. For questions about your



rights and obligations, you should always start with a careful review of your Provider Agreement and the attached Addenda. This Provider Manual is intended to supplement, segment and explain the Provider-Colorado Access relationship and to further articulate your rights and obligations to and with Colorado Access. In the event that there is a conflict between this Provider Manual and your Provider Agreement and Addenda, the Agreement and Addenda shall apply.

PROVIDER NETWORK SERVICES

We are committed to managing a network that is accessible and attentive to your concerns and needs. We continuously monitor and endeavor to improve our performance in this regard. Regular publications, including updates to this Provider Manual and periodic provider newsletters, facilitate a better understanding of the requirements for network Providers. You can also contact our customer service department for general information and policy clarification at 800-511-5010, or your provider relations representative as noted below in the next section.

We have provider relations representatives that can assist you with issues related to contracts. If you have general questions, please email ProviderNetworkServices@coaccess.com.

A provider relations representative map is on our website at coaccess.com/documents/Provider-Liaison.pdf.

FORMS

You can find required forms such as the emergency services notification form and prior authorization request forms on our website at coaccess.com/frequently-used-forms.

IMPORTANT CONTACT INFORMATION AND FREQUENTLY USED PHONE NUMBERS

AREA	PHONE NUMBER(S) AND EMAIL ADDRESS (IF APPLICABLE)
Colorado Access main line	800-511-5010
- Customer Service	800-511-5010 customer.service@coaccess.com
- Provider Network Services	720-744-5667, 844-430-6684 (toll free) ProviderNetworkServices@coaccess.com
- Utilization Management (coordinated clinical services)	844-683-1072
- Care Management (peer services)	866-833-5717
Colorado Crisis Services	844-493-8255 If the emergency is life-threatening, call 911
TTY/TDD	720-744-5126, 888-803-4494 (toll free)
Access Medical Enrollment Services	303-755-4138, 855-221-4138 (toll free)
Privacy Official	855-879-8286

compliance@coaccess.com
--

PROVIDER PORTAL

We maintain a provider portal that gives you access to member eligibility, member roster, claim status, and remittance advice information. To register for the portal, you'll need a provider ID number. Please send an email to ProviderNetworkServices@coaccess.com for assistance. Portal usernames and passwords are confidential and may not be shared. If your username or password has been compromised, contact Colorado Access immediately.

The provider portal is located at

<https://secure.healthx.com/v3app/publicservice/loginv1/login.aspx?bc=7be2e49e-b678-4291-9a17-699997acb06f&serviceid=3c53cf41-7238-4737-b4f1-c2c1f640ef57>.

ESSENTIAL COMMUNITY PROVIDER

We encourage all of our contracted Providers to become designated as Essential Community Providers (ECP) with the Colorado Department of Health Care Policy and Financing (HCPF). Essential Community Providers are providers that historically serve medically needy or medically indigent patients and demonstrate a commitment to serve low income and medically indigent populations who comprise a significant portion of our patient population. The ECP designation will apply to providers participating in Health First Colorado (Colorado's Medicaid program, hereto referred to as Medicaid), Child Health Plan *Plus* (CHP+), and Connect for Health Colorado.

ECPs are currently defined in Colorado state statute 25.5-5-403 (2) as a health care provider that:

- Has historically served medically needy or medically indigent patients and demonstrates a commitment to serve low income and medically indigent populations who make up a significant portion of its patient population or, in the case of a sole community provider, serves the medically indigent patients within its medical capability; and
- Waives charges or charges for services on a sliding scale based on income and does not restrict access or services because of a client's financial limitations.

To become designated please visit colorado.gov/hcpf/essential-community-providers and complete the application form. If your application is approved, you will be included on the current list of Essential Community Providers, which can be accessed from the same website. The website offers supplemental information regarding this designation as well as other resources, such as FAQs.

MEDICAL APPLICATION ASSISTANCE

As an Eligibility Application Assistance site, Access Medical Enrollment Services accepts and process applications for Child Health Plan *Plus* (CHP+) and all Medicaid programs.

**Services Provided:**

- Full processing of the State of Colorado Medical Assistance application into the State's system to determine Medicaid or CHP+ eligibility.
- Accept applications in person, by fax, or email.
- Assistance in completing the paper Medical Assistance Application for CHP+ and Medicaid, both in person and by telephone.
- Provide guidance and support of the PEAK online resource.
- Assistance with the state vendor Disability Application along with the Medical Assistance application when a disability determination is needed with specific programs.
- Verification of income, citizenship, and identification.
- Assist families to ensure all necessary documentation is submitted along with the application.
- Provide answers to questions about CHP+, Medicaid, which includes long-term care and Medicaid buy in programs.

Contact Information:

- Phone: 303-755-4138, 855-221-4138 (toll free)
- Fax: 720-744-5227
- Website: accessenrollment.org
- Address: 11100 E. Bethany Dr., Aurora, CO 80014
- Hours: 8:00 a.m. to 5:00 p.m., Monday through Friday