

FAQs on Billing, Notes, and Transdisciplinary Teams

Update 10/2023-Background: This was an email to all new subcontractors after a “New Subcontractor Office Hour” – this has been put into a shareable document for subcontractors to refer to especially around FAQs like:

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PROGRESS NOTES:

Background:

Our contract with EICO explicitly states that we will verify billing with contact notes. As you learned when you first started, and as it states in the billing manual, your note counts as your invoice. When you are “submitting billing” to RMHS for reimbursement, you are submitting a progress note.

You can use the progress note template (developed by RMHS) on the website as your note or as a guide on what your note needs to include. Many practitioners and agencies have their own template or an EMR program they use for notes. Submitting those notes are fine, it does not have to be our template, but it must include those basics (which all EMRs typically would have).

FAQs:

Please read through the billing manual [on the website](#) and checkout the billing video and powerpoint (found in “Billing Resources”). Outside of those resources, here are some questions that still come up:

1. **Do I have to use the RMHS billing template?** *See above, no*
2. **When should I send in my invoices?** *Some providers send this weekly, bi-weekly, but at least monthly is **required** (by the 3rd of the month). It is better to send in your billing consistently and frequently with subject lines and attachments clearly titled.*
3. **Do I make one note per session? Can I submit multiple notes on one page?** *Once again, this is clinician discretion. It is best practice to submit one page per session. However, we have processed billing that includes multiple sessions for one client on one page or within one document. *If you use an EMR for your notes, you typically would have one page or printable PDF per session.*

Dropdowns!

**We understand that for some providers, the EI Progress Note template (developed by our billing department) is not loading correctly when you click the link on the RMHS EI provider page and you cannot choose the dropdowns for some items of the note!

The form is under [“forms” on the website](#) – **do the drop downs work for you? Let us know!**

TIP: *Please make sure you are opening this in Microsoft Word.

BILLING:

We know that as an independent contractor, you are many times your own biller (if you haven’t hired one to do this for you!) and billing Medicaid, submitting for exemptions to RMHS for Private Insurance, etc. is new to you. We do recommend you make sure you have accessed the Medicaid Billing manual from HCPF (we call it “hic-puff”!) specific to your discipline. KEPRO and MEDICAID also have trainings that a small business owner doing billing would benefit from accessing as well:

- a. **HCPF (Dept of Health Care Policy and Financing) billing manuals:** [Billing Manuals | Colorado Department of Health Care Policy & Financing](#)
- b. **Sign up for bulletins if you haven’t already – and check the website** [Bulletins | Colorado Department of Health Care Policy & Financing](#)
- c. **Access to training:** [Provider Training | Colorado Department of Health Care Policy & Financing](#)
- d. **KEPRO training:** [ColoradoPAR: Kepro Provider Training Information | Colorado Department of Health Care Policy & Financing](#)
- e. **ALSO: Pay attention to RECENT NEWS AND UPDATES (scroll down on the links below to find it) per your discipline:**
 - i. **FOR EXAMPLE:** [Outpatient Speech Therapy Benefit | Colorado Department of Health Care Policy & Financing](#)
 - ii. [Outpatient PT/OT Benefits | Colorado Department of Health Care Policy & Financing](#)

RESOURCES:

BILLING VIDEO

Our billing manager created a new billing video in the Fall of 2023. The link is [on the website](#) under “Billing Resources” along with the slides and a cheat sheet for funding scenarios!

You do NOT need a password for the link to the billing video.

OFFICE HOURS AND OTHER TRAINING VIDEOS

Previous trainings by guest speakers and office hours are available on our [Vimeo site](#). This is only for RMHS subcontractors so please do not share the password.

Password:

The password to access the “showcase” with all of these videos is: **e@rlyintervention99457**

OTHER QUICK BITS OF BILLING INFO:

Private Insurance Exemption

Exemption reasons are explained in the billing manual and these requests are submitted for private insurance.

- a. Pg. 35: [35fda2_ddb4e2b0dbe343d3b6a5a0d43a3b1e43.pdf \(rmhumanservices.org\)](#)

Denver Health Medicaid?

Most subcontractors (except some agencies, and some home health companies) do not have a Denver Health Medicaid contract. Therefore, they do not bill DH Medicaid and if they pick up a family with DH Medicaid, that progress note (which counts as your invoice) comes to RMHS for reimbursement. (No Kepro involved for you – **you use Kepro only for straightforward Medicaid**)

Denver Health Medicaid PAR:

If you pick up a child with DH Medicaid, and RMHS is doing your **Denver Health Medicaid Billing** (you know that because your contract is as an “opt in” provider and you do NOT have a network with Denver Health Medicaid... which is hard to get) – then **you’ll still need to put in a DH Medicaid PAR request** (you put in the PAR request form to the billing department so that THEY can bill on your behalf).

- b. Pg. 26: [35fda2_ddb4e2b0dbe343d3b6a5a0d43a3b1e43.pdf \(rmhumanservices.org\)](#)

Declination?

If your client has a “**declination**” or has “declined” insurance (which you’ll see on the referral sheet) then you are not submitting a PAR request or an exemption request – you just send your note (note counts as your invoice) to RMHS for processing.

- c. Pg. 34 [35fda2_ddb4e2b0dbe343d3b6a5a0d43a3b1e43.pdf \(rmhumanservices.org\)](#)

EVV-Electronic Visit Verification

EVV information is found here. [Electronic Visit Verification | Colorado Department of Health Care Policy & Financing](#) This is required for MEDICAID clients who receive certain discipline services (i.e., OT, PT, ST) in person. It is not required for telehealth. It is also not required for DH Medicaid... just straightforward Medicaid.

More on EVV: Health First Colorado is Colorado’s Medicaid Program, and it’s “straightforward” Medicaid. This is different from Denver Health Medicaid, which is managed care, and is only for residents in Denver, Jefferson, Arapahoe, or Adams counties.

EVV was mandated (effective Aug 2020) for home and community based services that include an “element” of personal care and home health care services. Providers billing services to the Dept of Health Care Policy and Financing (what you hear us all call ‘hiccpuff’ / HCPF) must collect EVV (i.e., OT, PT, nursing, hospice, ST, etc.). There are some exceptions with EVV including the fact that it’s not required from some publicly funded plans of non-fee for service plans. CHP+ and Denver Health

Medicaid are examples we see here in EI a lot. Other parts of RMHS serve individuals through SLS waivers, which also do not require EVV. Here are some links for your to save to dig in a bit more if you'd like but I hope this helps you!

- [Electronic Visit Verification Program Manual | Colorado Department of Health Care Policy & Financing](#)
- [Managing Medicaid in Colorado | Colorado Health Institute](#)

TRANSDISCIPLINARY TEAM

Background: At this time, not all CCBs in Colorado have transdisciplinary teams. At RMHS, we are trying to practice the Primary Service Provider (PSP) model and trans-teaming, as best we can, by promoting our EI providers to work with a team of professionals to “team” and learn strategies to try with their families. In EI, we are looking at the whole child and able to work on all areas of development. Therefore, it’s important to utilize our team and learned strategies, approaches, and coaching techniques with families before adding consults or other providers to the family’s plan.

As of October 2023, there is a Workforce Committee (“PSP Workgroup”), [through EICO](#), meeting and discussing the Primary Service Provider Model and Transdisciplinary Teaming for Colorado. We will continue to learn updates as they discuss, vote, and make decisions.

There is more information about trans teaming in the RMHS manual including how to bill for it (it’s reimbursable at the reduced teaming rate). Subcontractors are not required to join a transdisciplinary team, but it is highly encouraged.

Interested in joining a trans team?

If you are not yet on a trans team and are interested in learning more about it – please reach out to Lisa Abrams! It is highly recommended that our EI providers take part in our transdisciplinary teaming!

CONSULTS

Background: In September 2023, we announced a change in how consults will be added for a family’s plan. Previously, consults were added to an IFSP, and then put on the referral spreadsheet. In order to find a match for that consult in a more succinct and targeted manner, we are requiring that we find a provider for the consult before adding it to the IFSP plan. This way, the consult is not on the referral spreadsheet with families who are needing regular services to start.

Process: Going forward, we would like for Early Intervention providers to **first** bring up any concerns that they think may lead to a consult to their trans team. You will be able to implement strategies provided to you by your team members and work together to determine if consult is needed.

- [Consult with a trans-team member: If someone on your team can provide consults, let the SC know, so the IFSP can be updated.](#)
- [If a consult cannot occur with a trans team member, you will reach out to the therapy manager and support specialist \(see process below for when someone is not on a trans team\).](#)

If you are not on a trans team, as some of you are not, we will work to find a provider to do that consult BEFORE adding it to the IFSP. *This does not mean that a family cannot receive consults if not on a trans team.*

IF NOT ON A TRANS TEAM:

If you are talking to your service coordinator about consults, and you are not on a trans team, please know that they will ask you to reach out to the Therapy Manager and our Support Specialist (Lisa Abrams) for support in finding a provider to engage in that consult for you and your family. Both the support specialist and therapy manager know our providers and their skillsets, and will work diligently to find a consult provider! Once a provider is found, the consult would then be added to the IFSP and the services will start. *Once again though, if you **are** on a trans team, please be utilizing your team for this support and coaching for role expansion.*

**We hope this information helps – we appreciate you and your feedback!
Please do reach out with any questions.**

**Warmly,
Danielle & Lisa**

Danielle – Therapy Manager: *here for all your bigger quesitons, business operations, provider/agency specific questions, process questions, etc.*

DCastle@rmhumanservices.org

720-653-5648

Lisa – Support Specialist: *here to help you with all things EI: writing outcomes, trans teaming, PSP model, Global Outcomes, etc. !*

LAbrams@rmhumanservices.org

720-614-4573