



Laboratory, Physician Services and Hospital Providers

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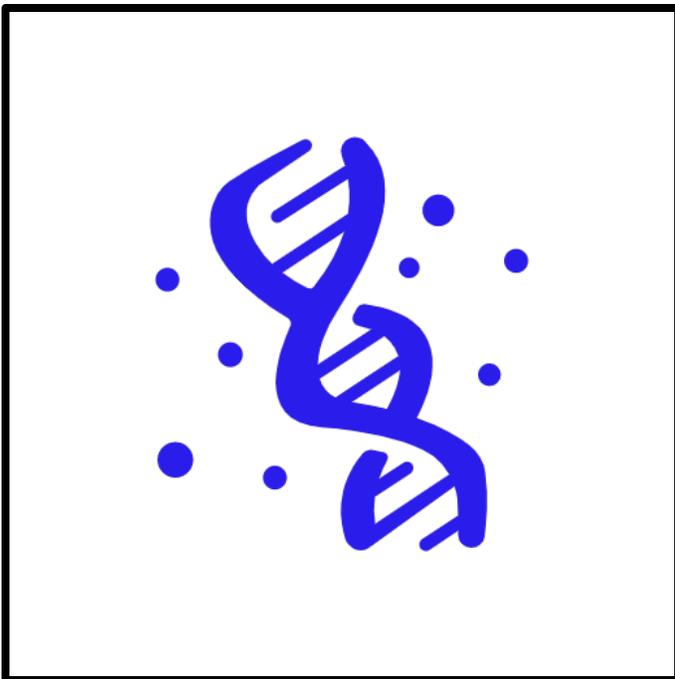
Genetic Testing Prior Authorization Requirement

Effective February 10, 2020, the following codes will require prior authorizations:

81200	81209	81220	81241
81243	81251	81255	81256
81257	81260	81283	81290
81293	81294	81295	81296
81297	81298	81299	81300
81318	81319	81323	81327
81380	81400	81401	81402
81406	81407	81420	81432

The prior authorization requirement is in response to concern from stakeholders regarding potentially inappropriate utilization of genetic tests, as noted in the [June 2019 Provider Bulletin \(B1900432\)](#) and the [January 2020 Provider Bulletin \(B1900442\)](#). The Department of Health Care Policy & Financing (the Department) intends to require prior authorization for all codes within the range 81170 through 81599 and is implementing the prior authorization requirement in phases.

Please refer to the Laboratory and X-Ray rule (10 CCR 2505-10 8.660) and the [Laboratory Billing Manual](#), available on the [Billing Manuals web page](#), for additional information about Laboratory Services, including existing requirements for BRCA and prenatal testing.



Visit the [ColoradoPAR website](#) for more information, including training opportunities for utilizing eQSuite®, the specific codes requiring a prior authorization and other provider resources. Contact the ColoradoPAR Program at co.pr@eqhs.org or 888-801-9355 with any questions regarding the prior authorization process.

Contact HCPF_UM@state.co.us with any questions regarding the Utilization Management Program and PARs.

Contact Raine Henry at Raine.Henry@state.co.us with laboratory policy questions.

Clinical Diagnostic Laboratory Upper Payment Limit Rates

The Department received approval on January 7, 2020, for a State Plan Amendment (SPA) submitted under transmittal number [\(TN\) 19-0028](#) regarding Laboratory and Radiology Services. This amendment decreases Clinical Diagnostic Laboratory (CDL) rates on a per test basis to align with Medicare rates in accordance with the [Social Security Act Section 1903\(1\)\(7\) Upper Payment Limit](#) and is retroactively effective to November 1, 2019. Impacted claims will be reprocessed according to the amended rates.

Updated rates can be found on the [Provider Rates & Fee Schedules web page](#).

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