

JOB AID

Provider Permission Matrix Instruction Sheet

OVERVIEW

The Provider Permission Matrix (PPM) dictates enrollment requirements for individual, organizational, and atypical providers based on Centers for Medicare & Medicaid Services (CMS) Medicaid Provider Enrollment Compendium (MPEC) criteria. The PPM communicates provider enrollment requirements including fingerprinting, site visits, federal fees, licensures, accreditations, and certifications for enrollment participation.

This Job Aid explains how to use the PPM spreadsheet to identify requirements for provider enrollment.

ACCESS THE NCTRACKS PUBLIC HOME PAGE

The NCTracks public home page displays before the user logs in to the system.

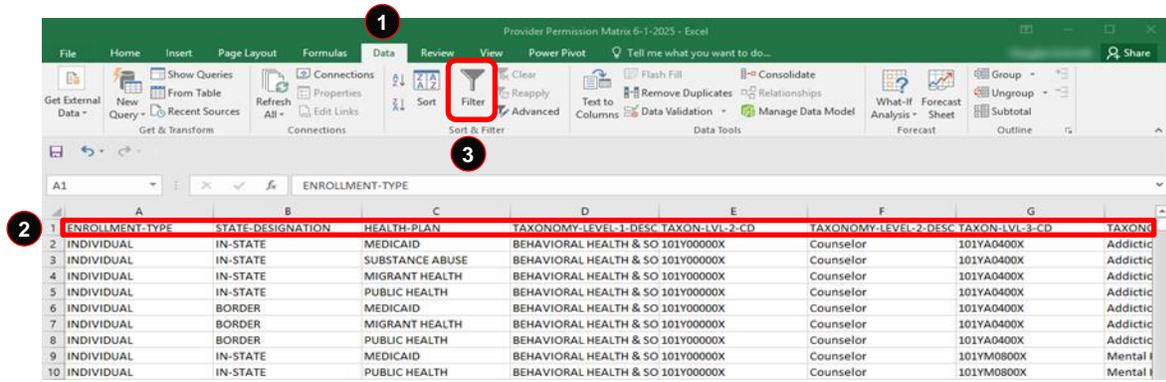


Step	Action
1	Select Providers .

Step	Action
2	Select Provider Enrollment .
3	Select the Provider Permission Matrix hyperlink.

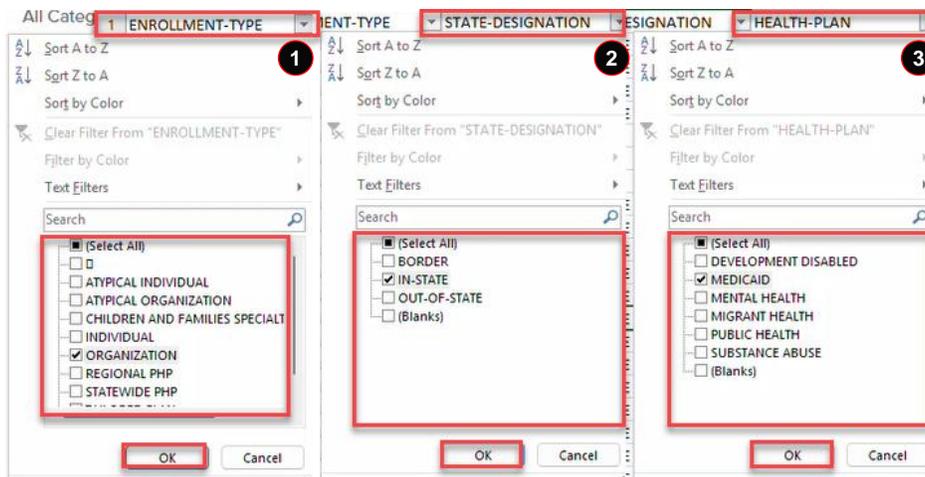
PROVIDER PERMISSION MATRIX

The PPM will open in an Excel spreadsheet consisting of rows and columns with information that can be filtered. By applying filters to the spreadsheet, you will be able to identify required enrollment criteria. For example, when the Individual provider’s address intended for the NCTracks application is in North Carolina, begin by sorting the spreadsheet to identify enrollment criteria for an In-State Individual.



Step	Action
1	Select the Data tab.
2	Highlight the column header row.
3	Select the Filter icon.

By applying filters to the column headers, you can select the Enrollment Type, State Designation, Health Plan, etc. that apply to your specific application. For example:



Step	Action
1	Select the drop-down arrow next to Enrollment Type . Deselect all checked options by selecting the (Select All) checkbox. Select the appropriate Enrollment Type.
2	Select the filter drop-down arrow next to State Designation . Deselect all checked options by selecting the (Select All) checkbox. Select the appropriate State Designation.
3	Select the drop-down arrow next to Health Plan . Deselect all checked options by selecting the (Select All) checkbox. Select the appropriate Health Plan. <ul style="list-style-type: none"> Development Disabled, Mental Health, and Substance Abuse plans are not currently selectable in the NCTracks enrollment application. Providers must reach out to Local Management Entity/Managed Care Organizations (LME/MCOs) for enrollment with these plans. More information is available on the NC DHHS LME/MCO Directory webpage. The Medicaid Health Plan typically determines the criteria when the taxonomy is selectable for Medicaid.

After these filters have been applied, the enrolling provider can continue to add filters to the column headers as they apply to the provider’s area of specialty. Enrollment criteria will be displayed in the remaining columns. If the columns are not populated with any data, the field does not apply to the enrolling provider. However, fields may be populated with ‘Yes’ or ‘No’ responses or information that is specific to your enrollment type or documents required for your enrollment type.

COLUMN HEADER DESCRIPTIONS

Note: It is important to remember that the information in the PPM will be updated frequently and may affect the enrollment process.

Column Header	Description
ENROLLMENT TYPE	Individual, Atypical Individual, Organization, Atypical Organization, Regional PHP, Statewide PHP, Children’s Family Specialty Plan, Tailored Plan
STATE DESIGNATION	<ul style="list-style-type: none"> In-State Border – ZIP code is within 40 miles of the NC state line Out-of-State – ZIP code is more than 40 miles from the NC state line
HEALTH PLAN	Health Plan Identifier <ul style="list-style-type: none"> Development Disabled (DMH) Medicaid Mental Health (DMH) Migrant Health Public Health Substance Abuse (DMH)
TAXONOMY LEVEL 1 DESCRIPTION	Provider Type
TAXONOMY LEVEL 2 CODE	Taxonomy Code
TAXONOMY LEVEL 2 DESCRIPTION	Provider Classification
TAXONOMY LEVEL 3 CODE	Taxonomy Code
TAXONOMY LEVEL 3 DESCRIPTION	Provider Area of Specialization
OWNERSHIP	Other than State or State
CCNC/CA ELIGIBLE	If Yes, the CCNC/CA page displays in the Provider Portal application allowing the provider to elect to enroll as a Carolina ACCESS (CA) Primary Care Provider (PCP).
FEDERAL SITE VISIT REQUIRED	If Yes, the provider selecting this taxonomy is assessed for a site visit.
FEDERAL FEE REQUIRED	If Yes, the provider is assessed for payment of the Federal Fee.
FINGERPRINTING REQUIRED	If Yes, the individual provider and/or any owner listed on the application is assessed to complete fingerprinting.
RISK LEVEL INDICATOR	Categorical risk levels are HIGH, LIMITED, or MODERATE per federal or state regulations, and identify the need for additional screening.
ADDITIONAL DOCUMENTS REQUIRED	Documentation that the provider is required to submit
CERTIFICATION REQUIRED	Indicates if Certification is required
CERTIFICATION TYPE	Indicates type of Certification required

Column Header	Description
CERTIFICATION AGENCY	Indicates Certifying entity
2ND CERTIFICATION REQUIRED	Additional Certifications
2ND CERTIFICATION TYPE	Indicates type of Certification required
2ND CERTIFICATION AGENCY	Indicates Certifying entity
LICENSE REQUIRED	Indicates if a License is required
LICENSE AGENCY	Indicates Licensing entity
LICENSE TYPE	Indicates type of License
ACCREDITATION REQUIRED	Indicates if an Accreditation is required
ACCREDITATION TYPE	Indicates the Accreditation type
SERVICE TYPE	Associated with the Services and Endorsements page of the application, some taxonomies require or allow selection of a Service Type.
SERVICE	Based on the Service Type selected, providers choose the specific Service intended to render.
DOES SERVICE REQUIRE ACCREDITATION	Indicates if an added Service requires Accreditation
SERVICE ACCREDITATION TYPE	Service Accreditation Type
DOES SERVICE REQUIRE CERTIFICATION	Indicates if an added Service requires Certification
SERVICE CERTIFICATION TYPE	Service Certification Type
SERVICE CERTIFICATION AGENCY	Service Certifying agency
DOES SERVICE REQUIRE LICENSE	Indicates if an added Service requires a License
SERVICE LICENSE TYPE	License Type
SERVICE LICENSE AGENCY	Licensing entity
GENERATION DATE	Date of last update
PRIMARY SOURCE VERIFIABLE	These columns identify if required license, certification, and accreditation can be primary source verified by CSRA. The information is used by CSRA and is not applicable to providers.