February 17, 2014

General Updates

Reminder re: Checkwrite for the Week of Presidents Day

This is a reminder that in keeping with the published approved checkwrite schedule, on weeks with a holiday, the checkwrite date is one day later than usual. Because of the Presidents Day holiday on Monday, February 17, the next checkwrite date will be Wednesday, February 19. The posting and availability of funds to provider bank accounts will depend on the provider's financial institution. Wells Fargo customers should see their payments in their accounts on the day that the EFT is processed, which will be Thursday (2/20/2014). Providers who bank at other financial institutions should see payments the business day following the date that the EFT is processed, which will be Friday (2/21/2014) afternoon. (Some may post sooner.)

Reminder re: Reprocessing of Crossover Claims

On October 7, 2013, the NCTracks payment calculation was modified to more precisely pay Medicare crossover claims in accordance with State law and the North Carolina State Plan approved by the Centers for Medicare and Medicaid Services (CMS) on a claim specific basis. As noted in the Provider Portal announcement, Medicare crossover claims previously processed by NCTracks with dates of service on and after July 1, 2013 will be reviewed and re-processed, if necessary. Most of that reprocessing of crossover claims was reflected in the Remittance Advice and EFT for the checkwrite on February 11, 2014 and the remainder will be in the February 19 checkwrite. No action is required by providers.

Reimbursement for hospital outpatient services has changed

Pursuant to SL 2013-360, Section 12.H.13.(e); reimbursement for all hospital outpatient services, except laboratory, has been reduced from 80% of costs to 70% of costs. This change was implemented on the weekend of February 8-9, 2014. Any claim that is adjudicated to a paid status on or after that change date will reflect this reduction in payment. Since most of the hospital outpatient claims paid on the February 11 checkwrite were adjudicated prior to the change date, this reduction in reimbursement may not yet be as evident.
Since SL 2013-360 requires an effective date of January 1, 2014, DMA will be requiring CSC to recoup and repay all outpatient claims with dates of service on or after January 1, 2014. Providers will be notified prior to the reprocessing of the previously paid claims.

**Stakeholder Input Requested on Draft Clinical Policy for Annual Medical Visit Limits**

In December 2013, providers shared input on session law 2013-360.10.12H.13(d), which changed chronic condition visit limits for N.C. Medicaid beneficiaries. Based on this feedback, "Clinical Policy 1A-29 Annual Medical Visit Limitation" was drafted and is open for stakeholder comments through March 5, 2014. To submit comments, click on the link next to the draft policy.


The recordings of the webinars and the PowerPoint Presentations are available at the following Websites:

- 12/12/2013 Webinar and PowerPoint Presentation: [https://dhhs.ncgovconnect.com/p59165602](https://dhhs.ncgovconnect.com/p59165602)
- 12/16/2013 Webinar and PowerPoint Presentation: [https://dhhs.ncgovconnect.com/p67149196/](https://dhhs.ncgovconnect.com/p67149196/)

**Revised Medicaid Resolution Inquiry Form**

The Medicaid Resolution Inquiry Form, which is used to submit requests for time limit overrides, has been updated to clarify the circumstances in which it can be used and what supporting documentation is required. The updated form can be found under the heading "Provider Forms" on the Provider Policies, Manuals and Guidelines page of the NCTracks Provider Portal.

**Include NPI With Fax and Email**

When sending documents to NCTracks, it is strongly advised that you use a turnaround cover sheet whenever possible, as it is the most effective way of enabling your supporting documentation to be linked to your submitted request. Turnaround cover sheets are presented at the end of prior approval requests and enrollment applications submitted through the NCTracks provider portal. Please print the turnaround cover sheet and include it when you email, fax or mail your documents to NCTracks.

However, if a turnaround cover sheet is not available, please remember to include all provider NPI(s) on the fax coversheet or on the first page of the documentation being faxed. Also, please include NPI in the subject line of emails sent to NCTracks (or in the body of the email) and on any attachment. If there are multiple attachments, it is helpful to have the NPI on each of the attachments. One example would be supporting...
documentation related to enrollment or manage change request applications. The NPI is needed to link the documents to the correct provider record. Failure to include the NPI can result in the document being misrouted and cause delays in processing your request. If you have recently sent documents to NCTracks without including the NPI, it is recommended that you resend the documents and include the NPI.

Note that when it comes to Prior Approval in the NCTracks Provider Portal, the confirmation sheet which can be printed at the end of the submission process is NOT the same thing as a turnaround document. It does not have the barcode on it necessary to automatically link supporting documentation to the request. In Prior Approval, to get a turnaround document, you must indicate that you have attachments you will submit via mail or fax, before submitting the Prior Approval request online. Or if you receive a letter requesting additional information for your Prior Approval, it will include a bar coded turnaround document to submit with the additional information.

**Provider Help Center in Raleigh on March 7**

The NCTracks team is offering another in-person Provider Help Center on March 7 in Raleigh. NCTracks staff from provider enrollment, provider relations, claims, and prior approval will be available to assist NC providers with questions or concerns regarding NCTracks. No appointment is necessary. Providers will be assisted on a first come, first served basis.

For providers to get the most out of these sessions, please bring specific examples of issues. The more details that can be provided about the problems, such as screen shots, NPI numbers, TCNs (claim numbers), denial codes, etc., the more help the NCTracks team will be able to provide.

The Provider Help Center will be held on March 7 from 9:00 a.m. to 12:00 p.m. and 1:00 p.m. to 5:00 p.m. at CSC, 2610 Wycliff Road, Raleigh, NC, 27607.

**Important 1099 Information for 2014** *(Corrected in March 10 Newsletter)*

Note: this information pertains to the current tax year 2014. This process cannot be used to change Tax ID information for 2013 or prior years.

Providers are encouraged to verify that the Tax ID associated with their billing NPI is correct. Just because the checkwrite funds are deposited to the correct EFT account, it does not mean the payment was attributed to the correct Tax ID. In every Remittance Advice (RA) posted to the Message Center Inbox of the secure provider portal, the next to last page (immediately preceding the EOB descriptions) displays the Tax ID to which the monies have been paid for the billing NPI associated with the RA.

If the Tax ID is correct, no action is needed. If the Tax ID is not correct, two steps are required. First, the Office Administrator for the billing NPI will need to submit a Manage Change Request on the secure provider portal and attach an updated W-9 form. (W-9
forms are available from the IRS.) This will ensure that future payments from NCTracks are attributed to the correct Tax ID.

Second, any claims paid since January 1, 2014 must be corrected, once the update to the Tax ID has been completed. There are two ways this can be accomplished:

- Providers can void the original claims and resubmit them. Funds will be automatically recouped and repaid.
- Providers can submit a refund check along with a copy of the RA page reflecting the incorrect Tax ID information and CSC will void the claims. The check and documentation should be sent to CSC, P.O. Box 300009, Attention: Finance Department, Raleigh, NC, 27622.

Optical Provider Update

Denied Claims Due To Refraction Date Used For Date Of Service

The NC Division of Medical Assistance Routine Eye Examination and Visual Aids Policy (6A), Attachment B, Section E states that visual aid claims for beneficiaries whose eligibility was terminated in the month following the date of the eye exam are allowed when resubmitted with the refraction date as the date of service if the following criteria are met:

1. The beneficiary was eligible for services on the date of the refraction and the date of the initial visual aid fitting but is not eligible on the date the eyeglasses were dispensed.
2. The provider enters the refraction date as the date of service.

However, these claims are currently denying in NCTracks.

To prevent date of service conflicts and denials for claims previously denied for this reason and future claims that fall into this category, please resubmit denied claims or submit new claims in the following manner:

- If the beneficiary was eligible for services when the glasses were dispensed - resubmit/submit the claim with the dispensing date as the date of service.
- If the beneficiary was not eligible for services when the glasses were dispensed - contact the NCTracks Call Center at (800)688-6696 and inform a representative that assistance is needed with an eyeglasses prior approval and refraction date issue. The Call Center will escalate the issue to a Tier II specialist who will return the provider's call.

NOTE: To check a beneficiary's eligibility in NCTracks:

1. Click on the Eligibility tab
2. Click on Inquiry
3. Select (or enter) the NPI
4. Enter the Recipient ID
5. Enter the first and last day of the month in which service (dispense or refraction) occurred into the Date of Service From and To fields
6. Click on Check Eligibility
7. Scroll down to the Recipient Information section under the Coverage Detail heading
8. Look for the Health Plan with a + sign or an open window with health plan information displayed
9. Click on the + sign if visible. This opens the health plan information window.

Thank you,

The NCTracks Team

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