Currently Enrolled Providers NCTracks Step by Step Registration

Important Note: In order to have access to the NCTracks Provider portal, each provider (NPI) must complete the NCTracks Registration. This registration will also capture your Electronic Funds Transfer (EFT) information so you can receive payment from NCTracks.

CSRA mailed each active Legacy MMIS+ provider (one letter per National Provider Identifier [NPI]) an NCTracks Registration letter that contains your Authorization Code, which is required to complete the Currently Enrolled Provider NCTracks Registration Application.

Note: If you have not received your letter, please contact the NCTracks Operations Call Center at 800-688-6696 or by e-mail at NCTracksprovider@nctracks.com.

As part of the application, you will identify the Office Administrator, Electronic Funds Transfer (EFT) information (if applicable), and trading partner information (if applicable).

The following steps describe how to complete the Currently Enrolled Providers Registration:

1. Determine who will be the Office Administrator. For organizational providers, the Office Administrator must be an owner or a managing employee. For individual providers, the Office Administrator can be the individual provider or a managing employee.

2. The Office Administrator must have a North Carolina IDentity (NCID) Management identifier and password. If the Office Administrator does not have an NCID account, visit the NCID Website at https://ncid.nc.gov/login/ and establish an NCID account.

3. Submit the online Currently Enrolled Providers NCTracks Registration Application.

**NCID USERNAME AND PASSWORD**

If the Office Administrator (an owner or managing employee) already has an NCID account from the recredentialing effort, you are ready to begin the registration process for currently enrolled providers. If the Office Administrator does not have an NCID account, you must set up an account to access the Currently Enrolled Provider NCTracks Registration Application.

To set up an NCID account, go to NCID Registration. Once you register, an e-mail will be sent to the address associated with your NCID account. The e-mail will contain a link to validate your new account. You must validate your new NCID account before accessing the Currently Enrolled Provider NCTracks Registration Application.

If you have not received a validation e-mail from NCID (ncid.notifications@nc.gov) within a few minutes, check your Junk/SPAM/Bulk Mail folders. If you do not receive a validation e-mail, please contact the NCID Help Desk at 919.754.6000 or toll-free at 800.722.3946. NCTracks Operations Call Center cannot troubleshoot NCID account issues.

Currently Enrolled Provider NCTracks Registration Application

**NCTRACKS SECURE LOGIN PAGE**

The Office Administrator should be the person who is completing the Currently Enrolled Provider NCTracks Registration Application.

If you are the Office Administrator, enter your User ID (NCID) and Password. Select Log In. If you are not the Office Administrator, select Cancel.
Verify Authorization Page

Enter the required fields and select Next to continue.

Verify Authorization

- Authorization Code: Enter the Authorization Code that is printed on your NCTracks Registration Letter.
- NPI: Enter the NPI that is printed on your NCTracks Registration Letter. If your NPI is not printed on your letter, enter your Atypical ID.
- Atypical ID: Enter the Atypical ID that is printed on your NCTracks Registration Letter.
IDENTIFYING INFORMATION PAGE (INDIVIDUAL PROVIDERS)

This page is presented only to individual providers. Enter the required fields and select Next to continue.

Individual Provider Information

- **Last Name:** This is your last name as shown in our records. If the name displayed is incorrect, please contact the NCTracks Operations Call Center at 800-688-6696 or by e-mail at NCTracksprovider@nctracks.com.

- **E-mail:** This e-mail address is the e-mail address present on your provider record. You may edit the address. If there is not an e-mail address listed, please enter the provider’s e-mail address.

Rendering/Attending Only

Select Yes if you will NOT be a billing provider; you will only be a rendering/attending provider. For example, you are a physician who only works for Group A and Group A will be the billing provider.
**Authorized Individual (Office Administrator)**

The Authorized Individual is the person you designate to be the Office Administrator for your provider account and is authorized to receive information or make business decisions on behalf of the applying provider.

In NCTracks, the Authorized Individual will be able to update the provider’s information online and create other users who need access to the Provider portal within the company.

- Last Name: This field was pre-populated from NCID. You may edit the last name.
- First Name: This field was pre-populated from NCID. You may edit the first name.
- Middle Name: This field was pre-populated from NCID. You may edit the middle name. Enter full middle name.
- Suffix: This field was pre-populated from NCID. You may edit the suffix.
- Date of Birth: Enter the Office Administrator’s date of birth.
- Contact E-mail: This field was pre-populated from NCID. You may edit the email address.
- Gender: Select the Office Administrator’s gender.
- Office Phone #: Enter the office phone number.
- Office Fax #: Enter the office fax number.
- User ID (NCID): This field was pre-populated from the NCID in which you have logged in.
- SSN: Enter the Office Administrator’s Social Security Number.
- Is this Office Administrator a Managing Employee or Currently Enrolled Provider?: Select **Managing Employee** if the Office Administrator is a managing employee. Select **Currently Enrolled Provider** if the individual provider is the actual Office Administrator.
IDENTIFYING INFORMATION PAGE (ORGANIZATION PROVIDERS)

This page is presented only to organization/group providers.

Organization Provider Information

- **Organization Name**: This is your organization name as shown in our records. If the name displayed is incorrect, please complete a Manage Change request in the NCTracks Provider Portal.

- **E-mail**: This e-mail address is the e-mail address present on your provider record. You may edit the address; this will update our records. If there is not an e-mail address listed, please enter the provider’s e-mail address.

**Authorized Individual (Office Administrator)**

The Authorized Individual is the person you designate to be the Office Administrator for your provider account and is authorized to receive information or make business decisions on behalf of the applying provider.

- **Last Name**: This field was pre-populated from NCID. You may edit the last name.

- **First Name**: This field was pre-populated from NCID. You may edit the first name.

- **Middle Name**: This field was pre-populated from NCID. You may edit the middle name. Enter full middle name.

- **Suffix**: This field was pre-populated from NCID. You may edit the suffix.

- **Date of Birth**: Enter the Authorized Individual’s date of birth.

- **Contact E-mail**: This field was pre-populated from NCID. You may edit the email address.
• Gender: Select the Authorized Individual’s gender.
• Office Phone #: Enter the office phone number.
• Office Fax #: Enter the office fax number.
• User ID (NCID): This field was pre-populated from the NCID in which you have logged in.
• SSN: Enter the Social Security Number.
• Is the contact person an owner or managing employee? This question is not displayed to all organizations. If the organization is State-owned, Federally-owned, or Indian-owned, there are no owners. Thus, this question is not displayed because it is assumed the Office Administrator is a managing employee.

**METHOD/CLAIMS PAGE**

This page is presented to all organization/group providers.

This page is not presented if you are an individual provider who answered Yes to the “Are you an individual provider who is rendering/attending only?” question.

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**Method of Claim and Electronic Transactions**

Select how you will be sending and receiving transactions. You may select one or more methods.

• Select **Submit claims via the NCTracks Provider Portal** if you wish to interactively enter claims on the NCTracks Website. If you previously entered claims on HP’s NCECS Web Tool and you wish to do the same in NCTracks, select this method.
Select **Electronic Batch** if you wish to submit and/or receive HIPAA-compliant transaction sets. **This includes providers who only wish to receive 835 transactions.** After application approval, you will be contacted by CSRA with further instructions.

Select **Billing Agent** if a billing agent or clearinghouse will be submitting HIPAA-compliant transaction sets (claims) for you. You will indicate which billing agent on the **Associate Billing Agent** page of the application.

Will a billing agent receive any electronic transactions?: Select **No** if you wish to receive all outbound electronic transactions. Select **Yes** if you wish your billing agent to receive any or all of the outbound electronic transactions.

**Electronic Funds Transfer**

Enter the bank account information for the EFT payments.

- **Routing Number**: Enter your account routing number.
- **Account Number**: Enter your account number.
- **Account Type**: Select the type of account from the drop-down list.
- **Bank Name**: Enter your bank’s name.
- **Bank Address Line 1**: Enter your bank’s address line 1.
- **Bank Address Line 2**: Enter your bank’s address line 2 if applicable
- **City**: Enter your bank’s city.
- **State**: Select your bank’s state.
- **ZIP Code**: Enter the bank’s 9-digit ZIP Code.

**ASSOCIATE BILLING AGENT PAGE**

This page is presented to all providers who selected Billing Agent. Providers must indicate which billing agent(s) they intend to use.

**Search Billing Agents**

Enter the billing agent’s name and click the **Search** Button.
From the Search Results, select the billing agent and click **Add**.

Continue to add all billing agents.

**Select Transaction Type and Billing Agent**

- Receive Electronic Transactions: Select which transactions you wish the billing agent to receive.
- Billing Agent ID: Select the Billing Agent ID you wish to receive the transactions.
AEGREEMENTS PAGE

The EFT Account Agreement will not be present if you are an individual provider who answered Yes to the “Are you an individual provider who is rendering/attending only?” question. The Trading Partner Agreement will not be present if you are an individual provider who answered Yes to the “Are you an individual provider who is rendering/attending only?” question.

Select the Attestation checkbox. Once selected, the User ID (NCID) and Password fields will be displayed as required. Enter your User ID (NCID) and Password. Select Submit to submit the application.

The Trading Partner Agreement will also not be present if you did not select Submit or receive a batch claim via NCTracks on the Method of Claim and Electronic Transactions page. The EFT Account Agreement will be displayed.

Select the Attestation checkbox. Once selected, the User ID (NCID) and Password fields will be displayed as required. Enter your User ID (NCID) and Password. Select Submit to submit the application.
Both the EFT Account Agreement and Trading Partner Agreement are displayed to all other providers. After reading and agreeing to the terms and conditions, select the Attestation checkbox. Once selected, the User ID (NCID) and Password fields will be displayed as required. Enter your User ID (NCID) and Password. Select Submit to submit the application.

**ONLINE SUBMISSION COMPLETE PAGE**

This page is displayed upon successful submission of your Currently Enrolled Provider NCTracks Registration application. Please save a copy of each of the three (3) documents presented on the page for your records.

![Currently Enrolled Provider NCTracks Registration - Final Steps](image)

**Online Application**

This PDF contains data entered on your application.

**EFT Account Agreement**

This PDF is your copy of the Electronic Funds Transfer Agreement. This link will not be present if you are an individual provider who answered Yes to the “Are you an individual provider who is rendering/attending only?” question.

**Trading Partner Agreement**

This PDF is a copy of the Trading Partner Agreement. This link will not be present if you are an individual provider who answered Yes to the “Are you an individual provider who is rendering/attending only?” question. This link will also not be present if you did not select Submit or receive a batch claim via NCTracks on the Method of Claim and Electronic Transactions page.

**QUESTIONS ABOUT CURRENTLY ENROLLED PROVIDER NCTRACKS REGISTRATION APPLICATION**

If you have additional questions regarding the Currently Enrolled Provider NCTracks Registration application, please contact the NCTracks Operations Call Center at 800-688-6696 or by e-mail at NCTracksprovider@nctracks.com.