

North Carolina Medicaid Special Bulletin

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March 2016

Attention All Skilled Nursing Home and Hospice Providers

NCTracks Updates

Claims Reprocessing Due to Rate Change

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Session Law 2014-100, Senate Bill 744, enacted a freeze on the Case Mix Index (CMI) for skilled nursing facilities with an effective date of January 1, 2015. **Claims impacted by the CMI freeze with dates of service from January 1, 2015 to May 31, 2015 will be systematically reprocessed.** The reprocessing includes nursing home claims and Hospice claims that pay as a percentage of the nursing home rate. (Hospice revenue codes 658 and 659.)

In most cases, the claims will be processed as adjustments. However, claims containing Patient Monthly Liability (PML) may be voided on March 20-21, 2016 and reprocessed as original claims. In both cases, the reprocessed claims will appear in the March 29, 2016 checkwrite. No action is required on the part of providers.

The reprocessed claims will appear in a separate section of the paper Remittance Advice (RA) with a unique Explanation of Benefits (EOB) code: EOB 06046 - CLAIM REPROCESSED FOR RATE ADJUSTMENT PAYMENT.

The 835 electronic transactions will include the reprocessed claims along with other claims submitted for the checkwrite. (There is no separate 835.)

Note: Reprocessing does not guarantee payment for the claim. While some edits may be bypassed as part of the claim reprocessing, changes made to the system since the claims were originally adjudicated may apply to reprocessed claims. Therefore, the reprocessed claim could deny.

If the reprocessed claim denies and there are not sufficient funds to satisfy the full recoupment amount from claims paid in the current checkwrite, the recoupment process will continue on each checkwrite until the full amount due is recouped.

Sandra Terrell, MS, RN
Director of Clinical
Division of Medical Assistance
Department of Health and Human Services

Paul Guthery
Executive Account Director
CSC