

North Carolina Medicaid Special Bulletin

An Information Service of the
Division of Medical Assistance

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June 2016

**Attention:
All Providers**

Federal Regulations:

42 CFR 455.410

**Attending, Rendering, Ordering, Prescribing
or Referring Providers - Update**

and

42 CFR 455.440 National Provider Identifier

*Providers are responsible for informing their billing agency of information in this bulletin.
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Note: This supersedes all Medicaid bulletin articles before June 2016, with the exception of the May 2016 Special Bulletin referenced below.

Beginning with date of service Feb. 1, 2016, DHHS implemented an interim action for any claim from a provider who has an NPI but is not enrolled in N.C. Medicaid or N.C. Health Choice (NCHC). This action resulted in a “pay and report edit” appearing on the Remittance Advice (RA). The Explanation of Benefits (EOB) language identifies which NPI (attending, rendering, ordering, prescribing or referring provider) is not currently enrolled in N.C. Medicaid and/or NCHC. Providers are presently receiving an EOB warning message on their RA when the attending, rendering, ordering, prescribing or referring provider’s NPI submitted on the billing provider’s claim is not enrolled in the N.C. Medicaid or NCHC program.

Effective **Nov. 1, 2016**, the following changes will be in effect:

1. When the claim is billed with non-enrolled providers, the edit disposition will change from a “pay and report” status to “**suspend**” status. This change will have the following claim impact:
 - a. The claim will suspend for **90 days** to allow the attending, rendering, ordering, prescribing, or referring provider(s) to enroll in the NC Medicaid or NCHC program.
 - b. The EOB language reported on the RA when the claim suspends will remain the same for this edit.
 - c. If, after 90 days from the date of suspension, the attending, rendering, ordering, prescribing, or referring provider **is not enrolled**, the claim **will deny** with the EOB: “the attending, rendering, ordering, prescribing or referring provider is not enrolled.”

Providers are encouraged to begin submitting enrollment applications now to NCTracks for all attending, rendering, ordering, prescribing or referring providers in Medicaid or NCHC. This will ensure that claims are not suspended on Nov. 1, 2016 when the provider is not enrolled in Medicaid or NCHC.

2. The provider’s NPI will be required as a data element on the claim for programs listed in this [*May 2016 Special Bulletin*](#). All providers should note that any NPI entered on a claim will be validated, even if it is not required for that service/claim type. DMA will accept the Supervising Physician’s NPI on the claim for any Resident or Intern in a Graduate Dental and Medical Education program.

***Note:** DMA will bypass the ordering provider edit when a radiologist is billing for professional services only (billed with modifier 26). For example, a radiology practice may contract with a hospital to “read” procedures done in the hospital outpatient setting.

Claims for these services will be submitted to DMA with the procedure code and modifier 26.

The Frequently Asked Questions posted on the NCTracks Provider Portal will be updated within the next five (5) business days. Providers with questions about the NCTracks [online enrollment application](#) can contact the CSRA (formerly CSC) Call Center at 1-800-688-6696 (phone); 1-855-710-1965 (fax) or NCTracksprovider@nctracks.com (email).

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

Paul Guthery
Executive Account Director
CSRA