MAY 2017

Attention

Ambulatory Surgical Providers

NCTtracks Updates

Reprocessing of Claims
For Non-Covered Services

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ATTENTION: AMBULATORY SURGICAL CENTERS:

REPROCESSING OF AMBULATORY SURGICAL CLAIMS FOR NON-COVERED SERVICES

As announced in the September 2016 NC Medicaid Bulletin, the Division of Medical Assistance (DMA) will initiate the claims reprocessing for procedure codes that were no longer billable by Ambulatory Surgical Centers (ASC) per the Centers for Medicare and Medicaid Services (CMS). This reprocessing notice applies to ASC’ claims that were processed and paid in NCTracks on July 2, 2013, through August 9, 2016.

Issue: In accordance with previously released Palmetto, GBA North Carolina Ambulatory Surgical Centers’ Fee Schedules, DMA determined that several Ambulatory Surgical procedure codes under SG, 73 and 74 modifiers were no longer separately reimbursable and end dated their rates in NCTracks for the respective end-dates. This change in NCTracks was made on August 16, 2016. (Please refer to the September 2016 NC Medicaid Bulletin for the list of impacted procedures codes and their respective end-dates).

Action: The impacted Ambulatory Surgical claims, originally adjudicated on July 2, 2013, through August 9, 2016, are being reprocessed to recoup the overpayment.

Timing: Applicable Ambulatory Surgical claims will be reprocessed in the June 6, 2017, checkwrite.

Remittance Advice: Reprocessed claims will be displayed in a separate section of the paper Remittance Advice with the unique Explanation of Benefits (EOB) 10210 AMBULATORY SURGICAL CLAIMS RECOUPMENT OF PAYMENT FOR NON-COVERED SERVICES. The 835 electronic transactions will include the reprocessed claims along with other claims submitted for the checkwrite. (There is no separate 835.)

Important Reprocessing Information: Reprocessing does not guarantee payment for the claims. Overpayments from Ambulatory Surgical claims that were incorrectly paid will be recouped. Also, 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 the reprocessed claims. Therefore, the reprocessed claims could deny.

If there are not sufficient funds from claims paid in the June 6, 2017 checkwrite to satisfy the recoupment of an overpayment, an Accounts Receivable (AR) will be created. Recoupment of the AR will begin with the subsequent NCTracks checkwrite and the recoupment process will continue on each checkwrite until the full amount due is recouped.

If funds are insufficient to collect the full amount due from the NPI for which the AR was generated, NCTracks will automatically seek to recoup the AR from other NPIs with the same Internal Revenue Service Taxpayer Identification Number. For more information about the AR process, see the February 29, 2016 announcement.

Provider Reimbursement

DMA, 919-814-0060