# Virtual Office Hour: Provider Enrollment Hot Topics & Reminders

September 1, 2022

Susan Sartain, Provider Relations Representative
Michael Herrera, Provider Relations Team Lead

**RCC (Relay Conference Captioning)**
Participants can access real-time captioning for this webinar here: https://www.captionedtext.com/client/event.aspx?EventID=5223123&Customer...

# AGENDA

01 Medicaid Provider Ombudsman

02 Provider Reverification Requirements to be Reinstated

03 Character Limitations for Fields on Provider Applications

04 Designation Form for Current DEA Certifications

05 Tailored Plan Important Reminders

# NC Medicaid Provider Ombudsman

- Medicaid.ProviderOmbudsman@dhhs.nc.gov
- 1-866-304-7062
- Created for Provider inquiries, concerns, complaints regarding the Medicaid Managed Care; Also responsive to Medicaid Direct concerns

# Provider Reverification Requirements to be Reinstated

- Since March 2020, Centers for Medicare and Medicaid Services has allowed for the suspension of reverification due to Covid-19
- The CMS public health emergency (PHE) is extended through October 12, 2022, which allows us to continue our pause on reverification activities through that date. Please note this date is subject to change at any time as we continue to follow PHE guidance.
- Providers who do not comply will be suspended, after which termination will result.

For more information, please reference NCDHHS Bulletin "Provider Reverification Requirements to be Reinstated at End of Federal Health Emergency" – July 26, 2022

# Check Your Provider Enrollment Record Periodically

- Participating providers are contractually obligated to maintain and update their NCTracks record, which serves as the “source of truth” for managed care entities.

- Outdated information on a provider’s NCTracks record may cause disruption or delays in claims processing.

- Providers should pay particular attention to the following sections of the Manage Change Request which commonly contain outdated information:

  - Health Benefit Plan Selection
  - Service Location Address and Taxonomy Classification
  - Accreditation
  - Hours of Operation and Services
  - Affiliated Provider Information

For more information, please reference NCDHHS Bulletin “Keep NCTracks Records Current to Avoid Claims Processing Issues” – September 21, 2021

# Character Limitation for Fields on Provider Applications

- Providers may notice that entries in some fields on the applications have character limits.
- Information such as an organization/individual legal name, street address or doing business as (DBA) name may not fit completely into the applicable field.
- **For legal names, providers should not abbreviate or use a shortened name.** Instead, they should enter the name exactly as it appears on their government-issued documentation until they run out of space.
- As always, providers are encouraged to review their entries before submitting to avoid any typos or errors that may cause processing delays.

For more information, please reference NCTracks Bulletin 'Character Limitation for Fields on Provider Applications ' March 30, 2022

# Provider Records Without the Required Individual Provider Affiliation Will Risk Suspension/Termination

- As of 11/21/2021, organizational providers with taxonomies ***Single Specialty (193400000X)*** and ***Primary Care (261QP23000X)*** must have at least **one** active individual provider with at least one active taxonomy related to their credentialed status as a taxonomy Level 1 provider.

- Organizational providers with taxonomy ***Multispecialty (193200000X)*** must have at least **one** active affiliated individual provider with at least **two** taxonomies related to their credentialed status as a taxonomy Level 1 description.

For more information, please reference NCDHHS Bulletin "Organizational Provider Records Without the Required Individual Provider Affiliation Risk Suspension/Termination" – October 5, 2021

# Designation Form No Longer Required for Current DEA Certifications

- NCTracks now allows DEA certifications to be automatically verified.
- This change allows providers to enter their DEA certification number on the NCTracks application for verification
- For existing providers, NCTracks will automatically update their DEA certification expiration date
- In the event of a change in DEA number, an MCR still must be completed to ensure the credential update will occur
- Providers who are designated as prescribers on the Provider Permission Matrix (PPM) and don't have DEA certification must complete the DEA Designation Form in NCTracks
- We are currently receiving the DEA file monthly, but we are working to have it delivered on a weekly basis. Thank you for your patience and understanding. More updates will be posted as they become available.

For more information, please reference NCTracks Bulletin, Designation Form No Longer Required for Current DEA Certifications June 30, 2022

# Enhanced Screening of Owners For Organization Enrollment

- NCTracks has implemented enhanced safeguards for providers related to organization enrollment applications.
- All owners must match the owners disclosed in the Medicare Provider Enrollment, Chain and Ownership System (PECOS) on provider enrollment applications .
- All owners that are listed in PECOS must be listed on the provider enrollment application.

For more information, please reference NCTracks Bulletin "Enhanced Screening of Owners and Managing Employees for Organization Enrollment" - April 11, 2022

# Key Dates for Transitioning to Tailored Plans


- **Aug. 15, 2022** – Beneficiary Choice Period begins; Beneficiaries can choose a Primary Care Provider (PCP) by contacting their Tailored Plan (*in progress*). Tailored Plan Auto-Enrollment begins. Enrollment Broker begins mailing Enrollment Packets to beneficiaries (*in progress*)
- **Oct. 14, 2022** – Last day for beneficiaries to choose a PCP before PCP auto-assignment
- **Oct. 15, 2022** – PCP Auto-Assignment for beneficiaries who have not chosen a PCP
- **Dec. 1, 2022** – Tailored Plan launch

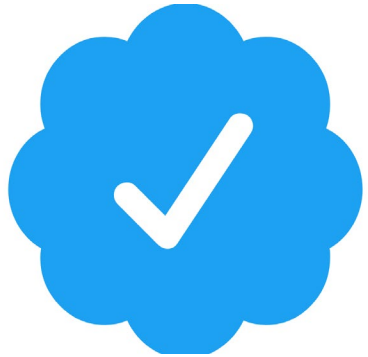
For more information, please reference NC Medicaid Playbook 2022 Bulletin "NC Medicaid Managed Care: Contracting with Tailored Plans"

# Tailored Plan Important Reminders

- **September 15, 2022** – Last day for PCPs to have **fully executed** contracts with PHPs for inclusion in PCP Auto-Assignment.
- **September 30, 2022 -** Last day for Tailored Care Management providers to have fully executed contracts with PHPs for inclusion in Tailored Care Management Auto Assignment.
- *Despite the **September 15** deadline for contracting with health plans in order to be included in PCP auto assignment, it should be noted that providers may still contract with health plans at any time.*

For more information, please reference NC Medicaid Playbook 2022 Bulletin "NC Medicaid Managed Care: Contracting with Tailored Plans"

# Confirming Medicaid Coverage for Beneficiaries



- Providers and pharmacies should always use NCTracks Recipient Eligibility Verification/Response and not rely solely on the information shown on a Member ID Card.
- Providers should confirm that their office participates with member's assigned health plan and obtain the appropriate health plan member ID as needed.
- If provider is not the assigned Primary Care Practice for the member but is in network for the health plan, they may render and be reimbursed for primary care services.
- Please note members should not be turned away due to the lack of a Member ID card in their possession.

For more information, please reference NCDHHS Bulletin "Confirming Medicaid Coverage for Beneficiaries" August 5, 2021


QUESTIONS?
ANSWERS!