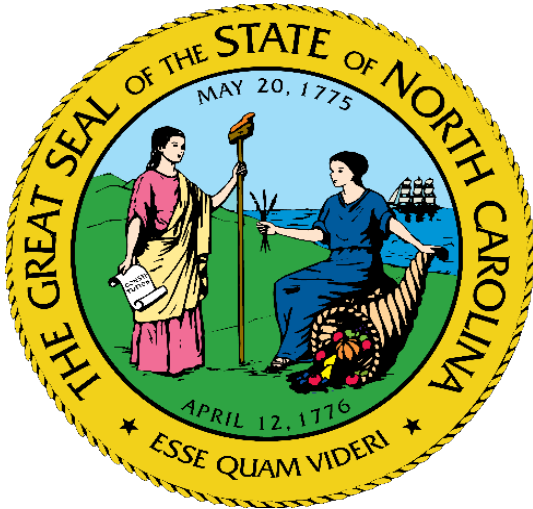


Virtual Office Hour: Provider Enrollment Hot Topics & Reminders

June 23, 2022

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Alicia Chapman, Provider Engagement Specialist
Chandra Lockley, Provider Operations Consultant



RCC (Relay Conference Captioning)

Participants can access real-time captioning for this webinar here:

<https://www.captionedtext.com/client/event.aspx?EventID=5150041&CustomerID=290>

AGENDA

- **Provider Ombudsman**
- **Provider Reverification Requirements to be Reinstated**
- **Full Legal Name Required to Match on NCTracks Record and Licensure for Individual Providers**
- **Update to Enrollment Requirements for Primary Care and Public Health Taxonomies**
- **Issue Updating DEA Certifications in NCTracks**
- **Enhanced Screening of Owners & Managing Employees For Organization Enrollment**
- **Key Dates for Transitioning to Tailored Plans**

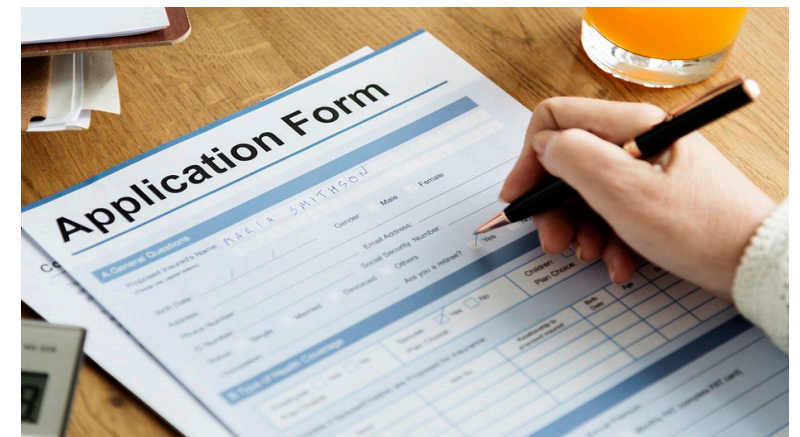
NC Medicaid Provider Ombudsman

- 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, CMS has allowed for the suspension of reverification due to Covid-19
- With the end of the federal public health emergency, NCTracks will resume the provider reverification process
- Beginning in October 2022, providers will begin receiving reverification notices. Providers who do not comply will be suspended. 30 days following suspension will result in termination
- For help with the reverification process, providers can refer to:
<https://www.nctracks.nc.gov/content/public/providers/provider-recredentialing>.



Check Your Provider Enrollment Record Periodically

- Ensure your provider enrollment record is correct
- Medicaid and NC Health Choice participating providers are contractually required to update their record within 30 days of any change

6. Disclosure

- a. At any time during the course of this Agreement, the Provider agrees to notify the Department through the North Carolina Department of Health and Human Services Fiscal Agent of any material and/or substantial change in information contained in the enrollment application given to the Department by the Provider. This notification must be made in writing within thirty (30) calendar days of the event triggering the reporting obligation. Material and/or substantial change includes, but is not limited to, a change in:
 - i. ownership;
 - ii. licensure;
 - iii. federal tax identification number;
 - iv. bankruptcy;
 - v. additions, deletions, or replacements in group membership; and
 - vi. any change in address, telephone number, or email.



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.

Full Legal Name Required to Match on NCTracks Record and Licensure for Individual Providers

- NCTracks requires individual providers' full legal name (first, middle and last name, as it appears on government-issued ID) to be listed on their NCTracks provider record and any enrollment application.
- NCTracks will withdraw applications if the provider's full legal name is not listed on the application.
- If the name exceeds the character limitation, providers should spell out the name exactly as listed on the ID as far as they can until it truncates but should not abbreviate.



Update to Enrollment Requirements for Primary Care and Public Health Taxonomies

- **As of April 14, 2022, an update has been made to enrollment criteria for taxonomies 261QP0905X (Public Health; State or Local) and 261QP2300X (Primary Care).**
- **Providers enrolling with these taxonomies are now required to submit documentation of Local Health Department Accreditation or Conditional Accreditation to enroll.**
- **Providers currently enrolled with one or both taxonomies will be required to submit the required accreditation with the next full manage change request (MCR) or at re-verification.**
- **NC Medicaid Clinical Coverage Policies updates are reflected in the Provider Permission Matrix (PPM) located under Quick Links on the Provider Enrollment page.**

Issue Updating DEA Certifications in NCTracks

Providers with current DEA certifications that are enrolling in NCTracks for the first time or re-enrolling (initial enrollment or re-enrollment applications):

1. Enter **123456789** as the DEA number
2. Upload an actual copy of the DEA license upon submission of the application (under Upload Documents)
3. NCTracks will update the DEA number in the system

Note: applications submitted with the **123456789** DEA number and no attachment (copy of DEA license or DEA designation form) will be returned advising that an upload is required

Existing providers with expiring DEA certification

Providers who have an expiring DEA certification may update their DEA expiration date to maintain enrollment requirements/prevent suspension or termination. To do this, providers may submit a manage change request (MCR) to update their DEA. NCTracks will verify the new expiration date after submission.

Enhanced Screening of Owners & Managing Employees For Organization Enrollment

- NCTracks has implemented enhanced safeguards for providers related to organization enrollment applications.
- NCTracks screens and verifies organization owners, agents and managing employees listed on initial enrollment applications.
- All owners, agents and managing employees on initial enrollment applications with one or more in-state service locations must match the owners disclosed in the Medicare Provider Enrollment, Chain and Ownership System (PECOS).
- All owners that are listed in PECOS must be listed on the initial enrollment application.

AMH+/CMA Providers Shall Verify Information (NPI+Location Code) in NCTracks

- Advanced Medical Home+/Care Management Agency (AMH+/CMA) Providers:
 - Check the **Provider Directory Listing Report** (*not the NCTracks Provider Portal*) to locate the NPI, Location Code and Practice Site Address for each of the locations that you would like to have certified.
 - Located on the Enrollment Broker (EB) website in the **Medicaid and NC Health Choice Provider and Plan Lookup Tool**
- If your practice's information is outdated or not found, submit a Manage Change Request (MCR) to update the applicable NCTracks provider record.



Key Dates for Transitioning to Tailored Plans

- **June 15, 2022** – Tailored Plan Member Services lines go-live
- **Aug. 1, 2022** – Beneficiaries will be assessed to confirm qualification for Tailored Plan. Beneficiaries that no longer qualify will receive a notice from the Enrollment Broker about their choices
- **Aug. 15, 2022** – Beneficiary Choice Period begins; Beneficiaries can choose a Primary Care Provider (PCP) by contacting their Tailored Plan
- **Aug. 15, 2022** – Tailored Plan Auto-Enrollment begins. Enrollment Broker begins mailing Enrollment Packets to beneficiaries
- **Oct. 14, 2022** – Last day for beneficiaries to choose a PCP before PCP auto-assignment
- **Oct. 15, 2022** – PCP Auto-Assignment (by Tailored Plan) for beneficiaries who have not chosen a PCP
- **Dec. 1, 2022** – Tailored Plan launch

