

## JOB AID 2017 NCTracks System Changes

### OVERVIEW

This Job Aid provides information on the 2017 changes implemented in the NCTracks multi-payer application system.

The following table lists the 2017 NCTracks system changes. The dates the changes were implemented into the NCTracks system, NCTracks and Division of Medical Assistance (DMA) announcements, and article titles will assist you with obtaining more information on the changes.

System Enhancement	Description	Effective Date	NCTracks Announcement	Medicaid Bulletin/Section
Dental/Optical Benefit Limitation Web Inquiries	<p>NC Medicaid and North Carolina Health Choice (NCHC) providers are able to inquire on additional services/procedures that are subject to benefit limits. They include:</p> <ul style="list-style-type: none"> <li>Inquire on additional dental services, including dental prophylaxis and topical fluoride treatment, periodontal and orthodontic services.</li> <li>Receive additional information with refraction confirmation inquiry.</li> <li>Inquire on durable medical equipment (DME) and orthotic/prosthetic (O&amp;P) services.</li> <li>Inquire on eyeglasses.</li> <li>Inquire on physician fluoride varnish services.</li> </ul>	February 2017	<p>January 5, 2017</p> <p><b>“New Provider Portal Inquiries for Dental, Optical, DME/O&amp;P and Physician Fluoride Varnish Benefit Limits”</b></p>	<p>February 2017</p> <p><b>“New Provider Portal Inquiries for Dental, Optical, DME/O&amp;P and Physician Fluoride Varnish Benefit Limits”</b></p>
Delay Reason Codes	Providers are able to utilize electronic Delay Reason Codes (DRCs) to request a Time Limit Override.	February 2017	<p>February 03, 2017</p> <p><b>“Medicaid Resolution Inquiry Form No Longer Required for Time Limit Overrides”</b></p>	<p>March 2017</p> <p><b>“Medicaid Resolution Inquiry Form No Longer Required for Time Limit Overrides”</b></p>
Affiliation Effective Date Edit Capability	<p>The claim edit disposition changed from <i>Report and Pay</i> to <i>Pend</i>. This system enhancement allows providers to:</p> <ul style="list-style-type: none"> <li>Back-date the Begin Date of the affiliation in a Manage Change Request application (full and abbreviated).</li> </ul>	May 2017	<p>January 19, 2017</p> <p><b>“Claim Edit for Provider Affiliation – Implementation Change”</b></p>	<p>January 2017</p> <p><b>“Affiliation Claim Edit”</b></p>

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	<ul style="list-style-type: none"> <li>Edit the Begin Date of existing affiliations in a Manage Change Request application (full and abbreviated).</li> <li>Edit the Begin Date when adding new affiliations in Manage Change Request and Re-enrollment applications.</li> <li>Affiliate to active, suspended, and terminated organizations in Enrollment, Re-enrollment, and Manage Change Request (full and abbreviated) applications.</li> </ul>			
Claims Action Reason Code (CARC) Update	Based on the direction of the NC DMA, NCTracks will <b>resume posting</b> Explanation of Benefits (EOB) 01843 – MEDICAID DENIED BASED ON CLAIM ADJUSTMENT REASON ASSIGNED BY PRIOR PAYER <b>when</b> the claim is submitted with prior payer CARC 97 reported at the claim header or detail line. The only exception will occur when a prior payer reports CARC 97 on the claim line with an Allowed Amount greater than zero.	January 2018	December 19, 2017 <b>“Prior Payer CARC 97 EOB 01843 Update”</b>	December 2017 Special Bulletin <b>“Claims Processing Updates: Medicaid Secondary Claims Submitted with CARC Code 97”</b>
Fingerprint-Based Criminal Background Checks	In accordance with <a href="#">42 CFR 455.434(b)</a> , NC Medicaid and Children Health Insurance Program (CHIP) providers designated as “high categorical risk” under <a href="#">42 CFR 424.518(c)</a> and <a href="#">N.C.G.S. 108C-3(g)</a> , or any person with a 5 percent or more direct or indirect ownership interest in the organization — as those terms are defined in <a href="#">42 CFR 455.101</a> — will be required to submit a set of fingerprints to the NC DMA through its enrollment vendor, CSRA.	July 2017	June 15, 2017 <b>“Reminder of Upcoming Provider Fingerprint-Based Criminal Background Checks”</b>	February 2017 <b>“Medicaid and N.C. Health Choice Provider Fingerprint based Criminal Background Checks”</b>
Provider Permission Matrix	CSRA eliminated the Provider Qualifications and Requirements Checklist and replaced it with the Provider Permission Matrix (PPM). The simplified version of the PPM will be updated as changes are made to the PPM.	July 2017	July 3, 2018 <b>“Provider Permission Matrix on NCTracks Provider Portal”</b>	May 2017 <b>“Provider Qualifications and Requirements Checklist”</b>

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Maintain Eligibility	NCTracks implemented a quarterly Maintain Eligibility Process which identifies providers with no claim activity within the past 12 months. NCTracks will notify providers via the secure Provider Portal mailbox. The provider must attest electronically to remain active.	October 2017	August 18, 2017 <b>“Maintain Eligibility Process”</b>	June 2017 <b>“Maintain Eligibility Process”</b>
Change to Early Refill Threshold for Opioids and Benzodiazepines	In an ongoing effort to help the State of North Carolina combat the current opioid epidemic, the NC DMA is increasing the Early Refill Threshold from 75% to 85% for Opioids and Benzodiazepines with an effective date of May 1, 2017.	May 2017	April 26, 2017 <b>“Change to Early Refill Threshold for Opioids and Benzodiazepines”</b>	May 2017 <b>“Change to Early Refill Threshold for Opioids and Benzodiazepines”</b>
Ordering, Prescribing, and Referring (OPR) Lite Provider Enrollment	Abbreviated application process that allows practitioners to enroll in NC Medicaid and NCHC for the sole purpose of Ordering, Prescribing, and Referring (OPR) services and/or products to NC Medicaid and NCHC beneficiaries.	October 2017	October 24, 2017 <b>“NCTracks Training and upcoming Changes”</b>	July 2017 <b>“Ordering, Prescribing and Referring (OPR) Update”</b>
Out of State (OOS) Lite Provider Enrollment	Out of State (OOS) providers now have the option of enrolling in NC Medicaid and NCHC as Lite, time-limited enrolled providers.	October 2017	October 18, 2017 <b>“Out of State Provider Enrollment”</b>	June 2017 <b>“Out of State Provider Enrollment”</b>