North Carolina Medicaid Special Bulletin

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Attention: All Providers

Verify Recipient Eligibility on NCTracks or with NCTracks Call Center

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NCTracks is offering a new service for providers to verify recipient eligibility. First, a provider can check a recipient's Medicaid eligibility on NCTracks, and if not there, can call the NCTracks Call Center.

Some providers have noted that a recipient may have a valid Medicaid or Health Choice ID card, but not be listed as eligible in NCTracks. It may take up to a week for NCTracks to receive some eligibility updates from NC FAST. This often happens with newborns as well as recipients who have recently become eligible again, after a period of ineligibility. So, the NCTracks Call Center now has the ability to check recipient eligibility directly in the NC FAST system. This will enable a provider to verify recipient eligibility before rendering services.

Please check NCTracks for recipient eligibility information prior to calling the Call Center to check NC FAST. If the recipient is eligible in NCTracks, there is no need to contact the Call Center to check NC FAST. Eligibility information can be verified in NCTracks using the provider portal, the Automated Voice Response System (AVRS), or a 270/271 X12 transaction. Consult the provider training materials in SkillPort for more guidance regarding verification of recipient eligibility in NCTracks.

This service of the Call Center is only for verifying the eligibility of recipients enrolled in Medicaid and Health Choice. The other payers and health plans served by NCTracks are not currently in NC FAST.

Bear in mind that this service is intended to enable providers to confirm eligibility before rendering health care to recipients. Providers still must confirm that the recipient's eligibility information is in NCTracks before submitting the claim or the claim may be denied.

To contact the NCTracks Call Center to inquire on recipient eligibility in NC FAST, dial 1-800-688-6696.

Electronic claims must be transmitted and completed by 5:00 p.m. on the cut-off date to be included in the next checkwrite. Any claims transmitted after 5:00 p.m. will be processed on the second checkwrite following the transmission date.

Sandra Terrell, MS, RN Acting Chief Operating Officer Division of Medical Assistance Department of Health and Human Services Paul Guthery Executive Account Director CSC