



***Operating Under Medicaid
Managed Care in North Carolina***

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Managed Care Regulations

- Any Willing Provider
- Rate Floor-100% of Medicaid Rates
 - Miscellaneous codes must also follow Medicaid pricing philosophy
- PHPs must follow 180 day timely filing
- PHPs must acknowledge clean claims in 18 days and make payment in 30 days
- Eligibility through NC Tracks
- Patients can change health plans in the first 90 days without cause and after first 90 days with cause
- Currently no Same/Similar Check
- Medical Policy cannot be more restrictive than states policy
 - 18 Policies must follow Medicaid exactly (No DME)
- Coverage for items will be handled through current programs (I.e. CGM through Pharmacy, woundcare through home health).
- PHPs can develop their own authorization/documentation requirements
 - Healthy Blue has stated NC Medicaid-372-131 CMN/PA form is required.
 - Will utilize medical records for authorizations
- Authorizations follow patient
 - “If a member transitions between health plans after July 1, 2021, a prior authorization authorized by their original health plan will be honored for the life of the authorization by their new health plan.”
- PHPs can make own rules for appeals
- All provider enrollment/change should be handled in NC Tracks

AmeriHealth Caritas

<https://www.amerihealthcaritasnc.com/provider/getting-started.aspx>

1-855-375-8811

TTY: 1-866-209-6421

24 hours a day, 7 days a week

PO Box 7380

London, Kentucky 40742-7380

EDI Payer ID: 81671

Mailing Address for Claims

AmeriHealth Caritas North Carolina

Attn: Claims Processing Department

P.O. Box 7380 London, KY 40742-7380

Provider Portal- Claim Status, etc

NaviNet—(Link on website doesn't work)

<https://navinet.navimedix.com>

1-888-738-0004

EFT Enrollment: ECHO Healthcare Portal

1-888-834-3511

<https://enrollments.echohealthinc.com/EFTERAInvitation.aspx?tp=MDAxOTQ=>

AmeriHealth Caritas-Account Executives by Region

<https://www.amerihealthcaritasnc.com/provider/resources/account-executives.aspx>

Sheron Rankins — Director, Provider Network Management

srankins@amerihealthcaritas.com

1-704-437-4101

Regions: All

Peggy O'Neal — Manager, Provider Network Management

poneal@amerihealthcaritasnc.com

1-704-614-4853

Regions: 1 and 3

Ashley Gunter-Teague — Manager, Provider Network Management

agunterteague@amerihealthcaritasnc.com

1-919-353-8886

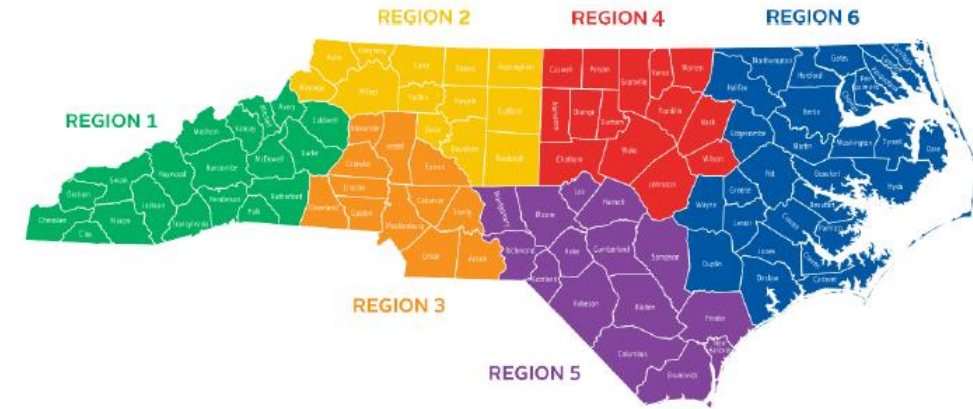
Regions: 2 and 4

Annitta Taylor — Manager, Provider Network Management

annitta.taylor@amerihealthcaritasnc.com

1-984-218-6066

Regions: 5 and 6



Carolina Complete Health

<https://www.carolinacompletehealth.com/>

1-833-552-3876

TTY: 711

7 a.m. to 6 p.m., Monday through Saturday

EDI Payer ID: 68069

Provider Portal- Claim Status, etc

<https://network.carolinacompletehealth.com/>

Mailing Address for Claims

Carolina Complete Health

Attn: Claims

PO Box 8040

Farmington MO 63640-8040

EFT Enrollment: PaySpan

<https://www.payspanhealth.com/nps>

Wellcare

<https://www.wellcare.com/NC>

1-866-799-5318

TTY: 711

7 a.m. to 6 p.m., Monday through Saturday

EDI Payer ID: 14163

Provider Portal- Claim Status, etc

<https://provider.wellcare.com/>

Mailing Address for Claims

WellCare Health Plans

Attn: Claims Department

P.O. Box 31224 Tampa, FL 33631-3224

EFT Enrollment: PaySpan

<https://www.payspanhealth.com/nps>

Healthy Blue

<https://www.healthybluenc.com/north-carolina/home.html>

1-844-594-5070

TTY: 711

7 a.m. to 6 p.m., Monday through Saturday

EDI Payer ID: 00602

Availity Portal is the Exclusive EDI Partner

Reference: HBNC_EDI Overview

<https://apps.availity.com/web/welcome/#/edi>

Mailing Address for Claims

Blue Cross NC | Healthy Blue Claims Department

P.O. Box 61010

Virginia Beach, VA 23466

Provider Portal- Claim Status, etc

Availity

<https://apps.availity.com/web/welcome/#/edi>

EFT Enrollment- CAQH Portal

<https://solutions.caqh.org/bpas/default.aspx>

United Healthcare Community Plan

<https://www.uhccommunityplan.com/nc>

1-800-349-1855

TTY: 711

7 a.m. to 6 p.m., Monday through Saturday

EDI Payer ID: 87726

Mailing Address for Claims

UnitedHealthcare Community Plan

P.O. Box 5280 Kingston, NY 12402-5240

Provider Portal- Claim Status, etc

<https://identity.onehealthcareid.com/app/index.html#/login>

EFT Enrollment: Optum Pay

<https://myservices.optumhealthpaymentservices.com/registrationSignIn.do>

Billing Guidelines

- Rental Claims
 - Healthy Blue: Following Medicaid FFS
 - Wellcare: Will accept claims like FFS or 30 day rentals
 - UHC Community: 30 day rental-See Billing Guide for nuances of rentals
 - AmeriHealth Caritas: Not confirmed
 - Carolina Complete Health: Not confirmed
- Local Codes “W” and “T” codes
 - Healthy Blue: Following Medicaid FFS
 - Wellcare: Following Medicaid FFS
 - UHC Community: Following Medicaid FFS
 - Amerihealth Caritas: Not Confirmed
 - Carolina Complete Health: Not Confirmed
- Medicaid Recipient ID Number use
 - Healthy Blue: Healthy Blue ID
 - Wellcare: Can use either recipient id or Wellcare ID
 - UHC Community: Can use either recipient id or UHC Id
 - Amerihealth Caritas: Not Confirmed
 - Carolina Complete Health: Not Confirmed

Billing Guidelines

- EPSDT Programs and exceeding quantity limitations
 - Healthy Blue: Following Medicaid FFS
 - Wellcare: EPSDT is mandated, non-EPSDT overages would be considered on case by case
 - UHC: EPSDT is mandated, non EPSDT would need to go through the denial appeal process
 - Amerihealth: Not confirmed
 - Carolina Complete Health: Not confirmed
- Retro authorizations will only be considered for extenuating circumstances such as retroactive eligibility. Plans will evaluate on case by case basis.

Oxygen Concerns

- PHPs cannot be more restrictive than oxygen medical policy
 - Can develop own policy on documentation required
 - Testing timeframes do not have to follow state timelines
 - Transition authorizations are good for 90 days
 - Will all oxygen patients require retesting?
 - Wellcare and Healthy Blue will establish own timeframes
 - UHC has stated they would follow state timeframes
 - Amerihealth: Not confirmed
 - Carolina Complete Health: Not confirmed
- ACMESA working with the state to evaluate concerns of requiring retest of all oxygen patients within the first 90 days. ACMESA is asking for 1 year for testing.
- We will keep you posted!

Slide of Provider Handbook

- **Amerihealth Caritas**
 - <https://www.amerihealthcaritasnc.com/assets/pdf/provider/provider-manual.pdf>
- **Carolina Complete Health**
 - <https://network.carolinacompletehealth.com/resources/manuals-and-forms.html>
- **EBCI Tribal Option**
 - https://ebcitribaloption.com/wp-content/uploads/2021/03/PRV04-T-Provider-Manual_Final.pdf
- **Healthy Blue**
 - https://provider.healthybluenc.com/docs/inline/NCNC_CAID_ProviderManual.pdf
- **United HealthCare Community Plan of North Carolina**
 - <https://www.uhcprovider.com/content/dam/provider/docs/public/admin-guides/comm-plan/NC-UHCCP-Care-Provider-Manual.pdf>
- **Wellcare**
 - <https://www.wellcare.com/North-Carolina/Providers/Medicaid>

NCCI Contacts

- Keep up to date on edits released quarterly for procedure to procedure and medically unlikely edits.
- <https://www.medicaid.gov/medicaid/program-integrity/national-correct-coding-initiative/medicaid-ncci-edit-files/index.html>

Complaint/Appeals Process for MCO

- **Submit Comments on MCO Roll Out**
- **Email to: Medicaid.Transformation@dhhs.nc.gov**

- **Complaint Process to State**
- **Email to: Medicaid.ProviderOmbudsman@dhhs.nc.gov**
- **Call 919-527-6666**

ACMESA & AAHOMECARE Fighting For You!

- Quarterly Meetings with NC Medicaid
- Advocacy Needs for MCO Plans
 - Rate Structure
 - Open Network
 - Medical Policy Consistency
 - Timeframe for Changing Payers
 - Outside Consulting Services
 - TPA/Subcontractor

ACMESA/AAH---WINNING FOR YOU!!!!

- ✓ Any Willing Provider Regulatory Language
- ✓ Beneficiaries Plan Changes in Regulatory Language
- ✓ Rate Floor-North Carolina-MCO Plans must pay no less than 100% of NC Medicaid FFS Rates.
Savings Estimated \$11 Million per year in cuts
- ✓ Sales Tax Legislation passed in NC eliminating sales tax for Incontinence
- ✓ Partnership with state Medicaid programs to save \$15 Million in state CURES paybacks for NC
- ✓ Eliminated any rate reductions for 2018, 2019, 2020, 2021.
Saving \$4 Million in cuts per year
- ✓ Passed legislation in NC exempting incontinence products covered by Medicaid from sales tax
Saving \$2 Million annually for providers.



Left to Right: Scott Dinning, Carolina's Hometown Respiratory; John Gallagher, VGM Group; Frank Trammell, Carolina's Home Medical Equipment; Chris Burgess, Med Emporium; Regina Gillespie, Best Home Medical; Kimberly Lynn, Carolina Apothecary; Jeff Powell, ResMed; Mary Hooks, Liberty Medical Specialties; Brad Heath, Family Medical Supply; Kim Brummett, American Association for Homecare; Brian Wilson, Commonwealth HHC; Laura Williard, American Association for Homecare; Craig Rae, Penrod Medical Equipment; David Chandler, American Association for Homecare; Ronnie Rankin, Culpeper Home Medical; Beth Bowen, Executive Director

Questions & Answers



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Thank YOU for all you do for the
patients you serve!



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