



NCTracks Presentation



North Carolina
Department of
Health and Human Services



Agenda

- Overview and Status of the Project
- Benefits of NCTracks
- System Features and Functionality
- Provider Activities Leading to Go-Live
- Provider Training Approach
- System Cutover Plan
- Questions



Overview and Status of the Project



What is NCTracks?

- **NCTracks is a multi-payer system that will consolidate several claims processing platforms into a single solution for multiple DHHS divisions:**
 - Division of Medical Assistance
 - Division of Mental Health, Developmental Disabilities and Substance Abuse Services
 - Division of Public Health
 - Office of Rural Health and Community Care
- **NCTracks will coordinate processing among payers to ensure the proper assignment of the payer, health plan, benefit plan and pricing methodology for each service line on a claim.**

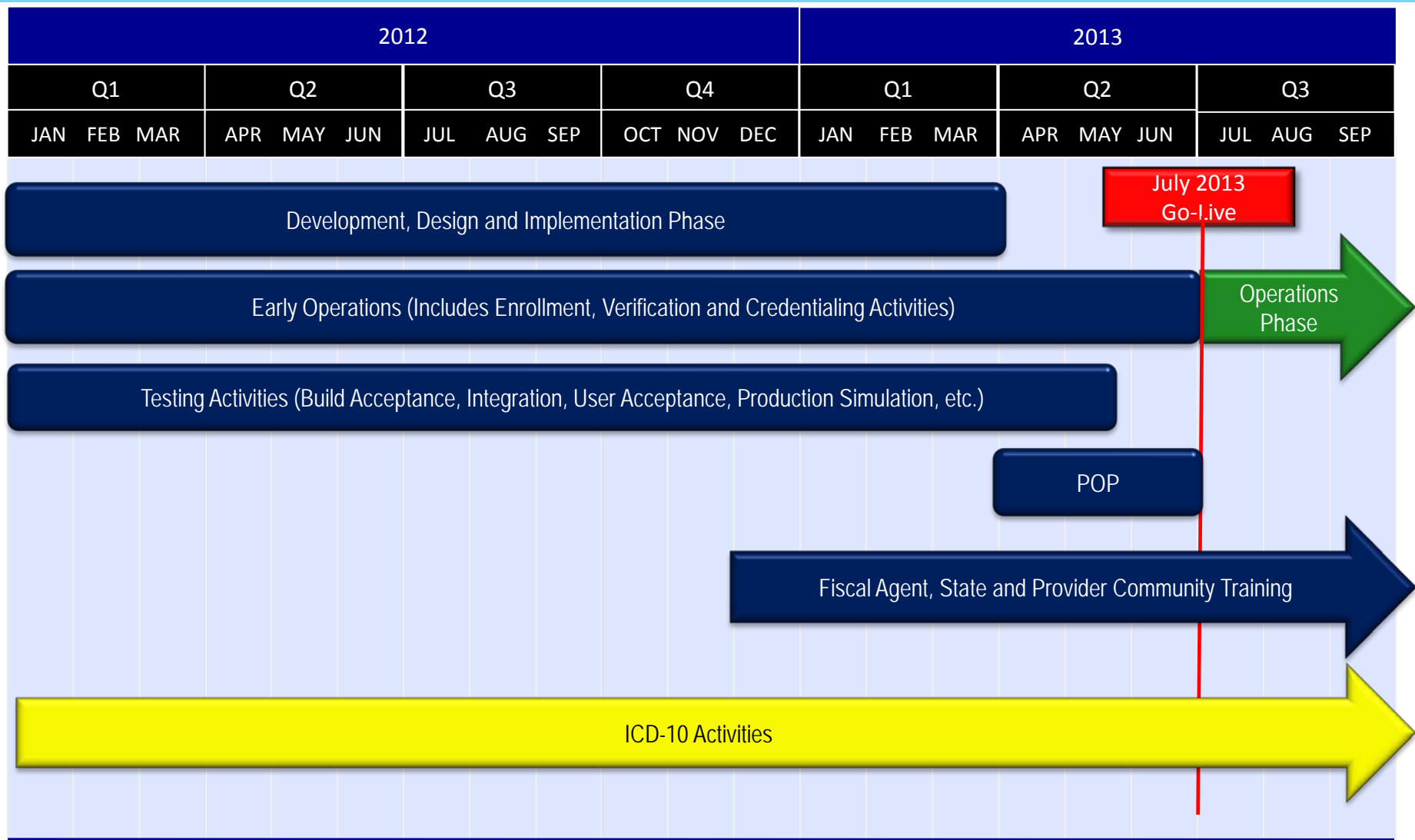


Multi-Payer System

- **NCTracks = Claims processing system that replaces:**
 - The Legacy Medicaid Management Information System (MMIS+) for the Division of Medical Assistance and the Integrated Payment and Reporting System (IPRS) for the Division of Mental Health, Developmental Disabilities and Substance Abuse Services
 - The Purchase of Medical Care Services (POMCS) for the Division of Public Health and the Office of Rural Health and Community Care.
- **The system features access to provider data and claims status through the NCTracks provider web portal.**



High-Level Project Activity Timeline



Provider Operational Preparedness

- **Provider Operational Preparedness (POP) is a period of time for a select group of providers to receive some training and orientation on Remittance Advice statements and 835 transactions from NCTracks.**
- **POP includes an opportunity to compare the claims adjudication results of NCTracks with the legacy systems.**
- **1000 providers have been selected by the State, across various provider types, to participate in POP, including the participants from the “Early Look” during State UAT.**

Benefits of NCTracks



NCTracks - Reduced Paper Use



- **Claims**
- **Prior Approvals**
- **Attachments**
- **Provider Enrollment**
- **Provider Change Forms**

NCTracks - Faster Processing

- Real Time via portal submission
- Real Time via batch submission
- Portal submission for Prior Approval
- Portal submission for attachments
- X12 Certification



NCTracks - Access to Information



- **Procedure Code, Modifier, and Drug Information**
- **Fee Schedules/Rates**
- **Remittance Advice**
- **Message Center**
- **Prior Approvals**
- **Recipient Service Limits**

NCTracks - Managing Your Information

- **Office Administrator**
- **Provider Record Maintenance**
- **Pay to and Correspondence Addresses**
- **Provider Training**
- **RSS feeds**



Informational Items



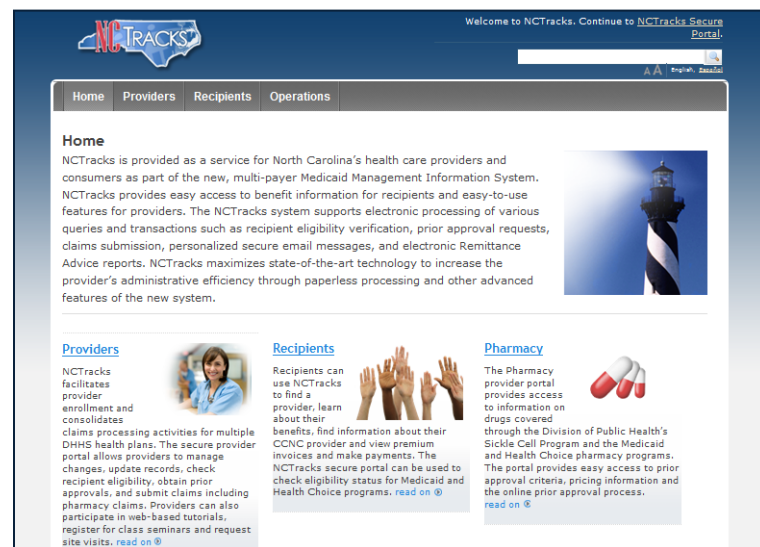
- 50 checkwrites per year
- Individual providers will affiliate with groups
- Recipient ID
- X12 835 are split by payers
- Up to 4 modifiers per detail
- Third party money (TPL) is expected at the detail

System Features and Functionality



NCTracks Access

- **Portal-Based Environment**
- **Supported Browser Versions**
 - Internet Explorer 8 and 9
 - ✓ IE 8 is supported on MS Windows XP, Vista and 7
 - ✓ IE 9 is supported on MS Windows Vista and 7
 - Firefox 4+



Note: For the best portal experience, it is recommend that portal users access the system using a high-speed internet connection and computers that are less than 6 years old. These computers typically have a minimum of a Pentium 4+ processor or AMD equivalent.

NCTracks Portal

- **The NCTracks portal features both public and secure, password protected areas.**
- **The secure, password protected areas of the site are unique to each visitor.**
 - When providers log into the password protected area of the portal, they can update records, check recipient eligibility, obtain prior approvals, view remittance advices, and submit claims, including pharmacy claims. Providers can also participate in web-based tutorials, register for class seminars and request site visits.

NCTracks Portal General Features

- **Single Sign-On** will provide access to all integrated applications and enables ease of use for the system
- **Standards Compliance**
 - HIPAA ANSI X12
 - Federal Accessibility Standards
- **Authentication**
 - Integrated with North Carolina's statewide identity management system (NCID)



NCTracks Portal Home



Static content search

Welcome to NCTracks. Continue to [NCTracks Secure Portal](#).

AA English 

Home

NCTracks is provided as a service for North Carolina's health care providers and consumers as part of the new, multi-payer Medicaid Management Information System. NCTracks provides easy access to beneficiary information for recipients and easy-to-use tools for electronic processing of various transactions, including eligibility verification, prior approval requests, claims processing, and electronic Remittance Advice (ERA). The system uses the latest technology to increase the administrative efficiency through paperless processing and other advanced features of the new system.

Providers

NCTracks facilitates provider enrollment and consolidates claims processing activities for multiple DHHS health plans. The secure provider portal allows providers to manage changes, update records, check recipient eligibility, obtain prior approvals, and submit claims including pharmacy claims. Providers can also participate in web-based tutorials, register for class seminars and request site visits. [read on](#)

Recipients

Recipients can use NCTracks to find a provider, learn about their benefits, find information about their CCNC provider and view premium invoices and make payments. The NCTracks secure portal can be used to check eligibility status for Medicaid and Health Choice programs. [read on](#)

Pharmacy

The Pharmacy provider portal provides access to information on drugs covered through the Division of Public Health's Sickle Cell Program and the Medicaid and Health Choice pharmacy programs. The portal provides easy access to prior approval criteria, pricing information and the online prior approval process. [read on](#)

Multi-lingual support

Web areas designed for specific visitor groups

Provider Portal Access

Provider Public Home Page

Welcome to NCTracks. Continue to [NCTracks Secure Portal](#).

Secure Portal Access

[Home](#)
[Providers](#)
[Recipients](#)
[Operations](#)

[Home](#) > [Providers](#)

Provider Announcements

Provider Manuals

Provider Enrollment

Enhanced Pharmacy Program

Frequently Asked Questions



Provider Enrollment
 Enroll now to provide Medicaid services in North Carolina!



Enhanced Pharmacy Program
 Learn more about Prior Approval for North Carolina prescriptions



Providers



NCTracks facilitates provider enrollment and consolidates claims processing activities for multiple DHHS health plans. The secure provider portal allows providers to manage changes, update records, check recipient eligibility, obtain prior approvals, and submit claims including pharmacy claims. Providers can also participate in web-based tutorials, register for class seminars and request site visits.



NCTracks Secure Portal
 Access the secure NCTracks Portal

Quick Links

- [Provider Manuals](#)
- [Department of Health and Human Services](#)
- [Division of Health Service Regulation](#)
- [DMH/DD/SAS](#)
- [Division of Public Health](#)
- [Division of Medical Assistance](#)
- [Office of Rural Health and Community Care](#)
- [DMA Health Check](#)
- [CCNC/CA \(Managed Care\)](#)

Provider Announcements

[North Carolina Medicaid Preferred Drug List](#)
May 7, 2010 DMA established a N.C. Medicaid Preferred Drug List (PDL) on March 15, 2010. [read on](#) ⓘ

[Prior Authorization for Brand Name Statins and Zetia](#)

Provider Bulletins

- [Medicaid Bulletin Master](#)

Single Sign On



Single sign-on integrated with
NC Statewide ID System



The screenshot shows the NCTracks Secure Login page. At the top left is the NC TRACKS logo. A blue callout bubble points to the login area with the text 'Single sign-on integrated with NC Statewide ID System'. The page title is 'NCTracks Secure Login'. On the top right, there are links for 'English, Spanish', 'AA', and 'Help'. A disclaimer states that the portal contains private and confidential information and that users must be authorized. Below this, a section titled 'YOUR ACCOUNT' lists two requirements: having an NCID and using case-sensitive passwords. The login form includes fields for 'User ID (NCID):' and 'Password:', each with a 'Forgot' link. At the bottom of the form are 'Log In', 'Clear', and 'Cancel' buttons. The footer contains links for 'About', 'Legal', 'Privacy', 'Accessibility', 'Contact Us', and 'Browser Support', along with logos for the Office of MMIS Services, the North Carolina Department of Health and Human Services, and CSC Transcend.

NCTracks Secure Login

English, Spanish | AA | [Help](#)

The NCTracks Web Portal contains information that is private and confidential. If you are not an authorized individual, this private and confidential information is not intended for you. If you are not authorized to access this content, please click 'Cancel'.


By continuing, you are agreeing that you are authorized to access confidential eligibility, enrollment and other health insurance coverage information. Please read more in our [Legal](#) and [Privacy Policy](#) pages.

YOUR ACCOUNT




- All users are required to have an [NCID](#) to log in to secure areas.
- Passwords are case-sensitive. Please ensure your Caps Lock key is off.

User ID (NCID): Password:


[Forgot Login](#) [Forgot Password](#)

 **Log In** **Clear** **Cancel**

[About](#) | [Legal](#) | [Privacy](#) | [Accessibility](#) | [Contact Us](#) | [Browser Support](#)

   Powered By... 

Provider-Specific Information



The screenshot shows the NC TRACKS Provider Portal interface. At the top, there is a navigation bar with the NC TRACKS logo, a welcome message for Vijay Saxena, and a log out link. Below the navigation bar, the main content area is divided into several sections. On the left, there is a 'Provider Portal' section with a 'Home' link. In the center, there is a 'Message Center for Vijay Saxena' section featuring a profile picture of Vijay Saxena and an 'Announcements' section. To the right of the announcements, there is a 'Quick Links' section with various links. Below the announcements, there is a 'System Inbox' section with a table of messages. At the bottom right, there is an 'RSS News Feeds' section. Callouts are placed over the 'Announcements', 'Quick Links', 'System Inbox', and 'RSS News Feeds' sections to highlight them.

Provider Announcements

Quick Links

System Inbox

RSS News Feeds

Announcements

Date: Jun 22, 2011 12:00:00 AM Attention: **Some Providers**

Information related to the implementation of prior authorization of high-tech radiology and ultrasound procedures is available through the MedSolutions website, the Radiology Services web page, and the Medicaid Bulletin. Click the link below to access MedSolutions.

WELCOME **OFFICE ADMINISTRATORS** **ENROLLMENT**

Provider Training **User Administration** **Status and Management**








Quick Links

[Provider Training](#)
[Department of Health and Human Services](#)
[Division of Health Service Regulation](#)
[DMH/DD/SAS](#)
[Division of Public Health](#)
[Division of Medical Assistance](#)
[Office of Care](#)
[DMA \(Health\)](#)
[CCNC/C](#)
[ABOUT](#)

Inbox

Provider	Status	Message	Date

Select NCTracks Features

Features	NCTracks
Online Access to Update Provider Records	
Paperless Enrollment, Verification and Credentialing	
Online Access to Request/Confirm Prior Approval	
Online Dental, Medical and Pharmacy Claims Submission	
Electronic Signatures Accepted	
Ability to Check Claims Status in Real Time	
Online Retrieval of Remittance Advices	
Online Recipient Eligibility Verification	

Claim Billing

- **The capability exists for multi-detail, multi-payer claims submission electronically.**
- **NCTracks will be capable of processing outpatient claims at a line item detail level for all revenue codes.**
- **NCTracks is utilizing the billing and servicing address to determine appropriate claim payments. Submitters should therefore include full address and zip code for both the billing and servicing providers on their claim submissions.**

Claim Billing (continued)

- **Adjustments will be automated within NCTracks. Providers are to submit adjustments using either the provider portal or through the appropriate X12 claim transaction (837I/P/D).**
 - Adjustments to POMCS claims paid by the legacy system will not be supported by NCTracks.
 - Adjustments to MMIS+ and IPRS legacy claims will be supported.
- **Paper claim submissions will only be allowed for Purchase of Medical Care Services or when authorized by the State. All other services must be submitted through the provider portal or using an X12 transaction.**

Claim Billing (continued)

- **Non-hospital owned ambulance services will be billed on professional instead of institutional claims.**
- **NCTracks will allow detail level submission of TPL. However, if a provider submits TPL at the header only, the header TPL amount will be pro-rated across the detail lines.**
 - Line level reimbursement amounts will be reduced based on each line's pro-rated TPL amount.
 - An example: 3 claim lines, Header TPL Amount: \$10.00

✓ <u>Line</u>	<u>Status</u>	<u>Approved Amount</u>	<u>TPL Proration</u>	<u>Reimbursement Amount</u>
✓ 1	Approved	\$40.00	\$4.00	\$36.00
✓ 2	Approved	\$60.00	\$6.00	\$54.00
✓ 3	Denied	\$0.00	\$0.00	\$0.00

HIPAA Transactions Editing Levels

- **For HIPAA transactions, NCTracks will be editing at levels 1, 2 and part of 5.**
 - **Type 1: EDI Syntax Integrity Testing**
 - **Type 2: HIPAA Syntactical Requirement Testing**
 - Type 3: Balancing
 - Type 4: Situation Testing
 - **Type 5: External Code Set Testing**
 - Type 6: Product Types or Line of Services
 - Type 7: Implementation Guide-Specific Trading Partners
- **Only claims within the batch that do not pass the editing levels will reject, the others will continue through the claims submission process. The 999 transaction will be returned, providing an acceptance or reject notification.**

CCI Edits

- **Claims Edits**

- NCTracks will include support for the CMS Medically Unlikely Edit (MUE). This edit compares the submitted units on a claim to a CMS-defined MUE unit value. When the submitted unit exceeds the CMS limit, the claim will deny. An appeal process will be available to providers when they feel that the exceeded units of service are medically justified.
- MUE limits are applicable to outpatient hospital services, ambulatory surgical centers, practitioners and DME. Ambulatory surgical center services are billed under the practitioner claim type.

- **Claims Audits**

- NCTracks includes audits that will compare procedure codes billed on a claim to historical claim submissions and deny claims when inappropriate billing patterns are detected.
- These audits perform similar CCI editing as is currently performed within the legacy system.

Split Eligibility

- **NCTracks will process DRG (per discharge) claims based upon the eligibility in effect at the time of admission.**
- **NCTracks will process per diem claims by paying eligible days and denying ineligible days.**

5010 Transaction Files

- **NCTracks will only accept 5010 compliant transactions on July 1, 2013.**
 - A 999 response will be created for all inbound batch claim transmissions within 24 hours of receipt to indicate if a transmission is accepted or rejected.
- **Inbound transmissions will be rejected if Level 1 (integrity) or Level 2 (requirements) compliance errors are detected.**
 - Only those claims with compliance errors will be rejected, not the entire batch.
- **NCTracks will support “real time” CPU-to-CPU submission of X12 transmissions. This allows submitters, such as hospitals, to submit claims and other transactions directly to NCTracks so that they are processed immediately.**

Eligibility Verification

- The NCTracks Provider Portal includes a feature to verify eligibility for more than one recipient at a time. Providers can upload a list of up to 25 recipient IDs to the Verify Eligibility Batch page and view the results for each recipient online.
- NCTracks will also include a Recipient Portal that will allow recipients to inquire on their own eligibility and, if applicable, pay their premiums online.

Claims Tracking Visibility

- **Claims can be entered directly into the NCTracks system through the Provider Portal (one claim at a time) or submitted as an X12 transaction (batch submission). Regardless of submission method, providers will have the ability to check the status of their claims.**
- **For claims entered directly into the Provider Portal: Providers will receive an online response regarding the status of each claim.**
- **For X12 Transactions: Providers can submit 276 transactions and will receive a 277 response.**
- **For all claims: Providers can log into the Provider Portal to check the status of claims submitted.**

Provider Activities Leading to Go-Live



Provider Checklist for Go-Live

- ✓ Obtain an NCID for your Office Administrator
- ✓ Obtain an NCID for all other staff in your provider organization who will access the NCTracks system
- ✓ Ensure attending physicians have current affiliation information
- ✓ Verify the taxonomy codes and locations on your provider record
- ✓ Designate the Office Administrator (OA) for your provider organization
- ✓ Provide your bank account information for EFT payments
- ✓ Make sure your email address is current in the system
- ✓ Designate the Billing Agent for your provider organization (if applicable)
- ✓ Electronically sign the Trading Partner Agreement (if applicable)

Checklist #s 1 & 2 - Obtaining an NCID

- The North Carolina Identity (NCID) Management system is the standard identity management service provided to state, local, business, and individual users by the State of North Carolina
- An NCID will be required by all users accessing the NCTracks system
- Providers who already have an NCID can use their existing NCID
- Visit the State website at <https://ncid.nc.gov/> to:
 - Obtain a new NCID
 - Search for an existing NCID
 - Reset an NCID password

Checklist # 3 - Identifying Affiliations

- **Affiliations**

- Attending/rendering providers must affiliate with all groups or organizations on whose behalf they provide services in order to authorize payments to the group or organization.
 - ✓ This includes relationships to groups, hospitals, etc.
- If providers are uncertain their affiliations are correct, they can call the EVC at 1-866-844-1113
- Missing or incorrect affiliations may result in delayed payment.
- Updates can be submitted using a Medicaid Provider Change Form on the current NCTracks website at www.nctracks.nc.gov.

Checklist # 4 - Verify Taxonomy Codes

- **NCTracks will use National Provider Identifier (NPI), location, and taxonomy for processing of claims.**
- **The State has aligned its approved clinical and reimbursement policies and methodologies to taxonomy codes for use in the replacement system.**
- **There will be a taxonomy code look-up option to enable providers to verify their taxonomy codes and location information prior to go-live.**

Checklist #s 5-9 - CEP Process

The Currently Enrolled Provider (CEP) Early Registration process is designed to capture information from every enrolled provider:

- **Office Administrator**
- **Electronic Funds Transfer (EFT)**
- **Email address**
- **Billing Agent**
 - If a provider uses a Billing Agent / Clearinghouse, they will need to designate them
- **Trading Partner Agreement (TPA)**
 - Providers who will submit ASC X12 batch transactions to NCTracks are required to electronically sign a Trading Partner Agreement
- **Access from the existing EVC website *www.nctracks.nc.gov***
 - NCID is required to access the CEP Early Registration process

Trading Partner Testing

- Trading partner testing and certification is a provider self service model using Edifecs' Ramp Management tool.
- All trading partners are required to complete an NCTracks certification process and sign a trading partner agreement prior to go live.
 - This applies to both Billing Agents/Clearinghouses, as well as providers who will submit ASC X12 batch transactions to NCTracks
- Companion guides are available to trading partners through Ramp Management and posted on the OMMISS website at www.ncmmis.ncdhhs.gov.

Provider Training Approach

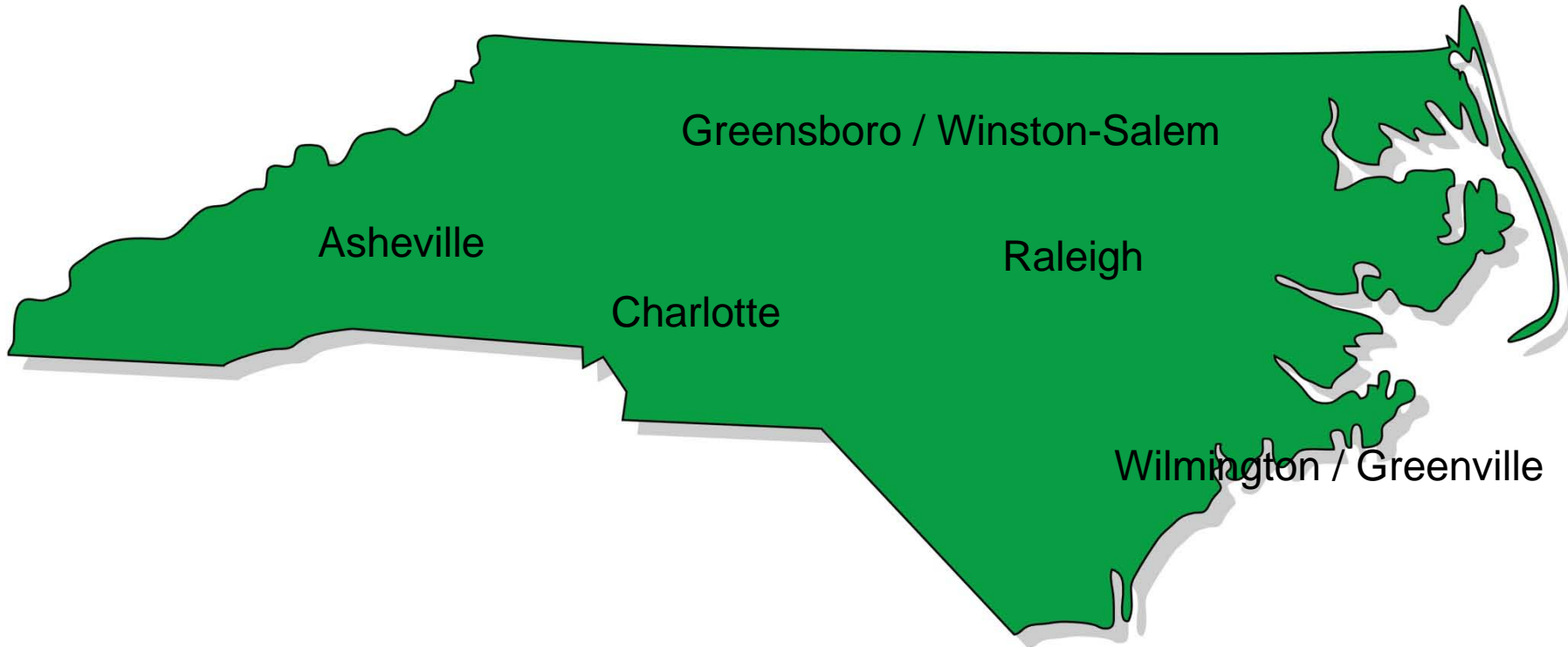


Overview of Provider Training Approach

- **NCTracks provider training will be accomplished through two complimentary delivery methods:**
 - Instructor Led Training (ILT)
 - E-Learning (Computer Based Training)
 - Supports various learning styles and accommodates work schedules
- **Skillport is the Learning Management System for NCTracks**
 - View ILT course schedules and register for courses
 - Download training materials
 - Participate in CBTs
 - View and print reports and transcripts

Instructor Led Training Approach

- **Provider training from April through June 2013**
 - Five locations across the State for instructor led training on NCTracks
 - Specific training sites, dates, and times at each location



Instructor Led Training

- **Instructor Led Topics for Provider Training:**
 - Provider Web Portal Applications
 - Life Cycle Of A Claim
 - Prior Approvals (Medical, Pharmacy, Dental)
 - Claims Submission (Professional, Institutional, Dental)
 - Referrals/Overrides
 - Consent Forms
 - Recipient Eligibility
 - Provider User Provisioning / Security Access
- **Topics will be scheduled by job function – take the ones you need**
- **Instructor Led Training can be attended in person or remotely via conference call and web meeting**

E-Learning

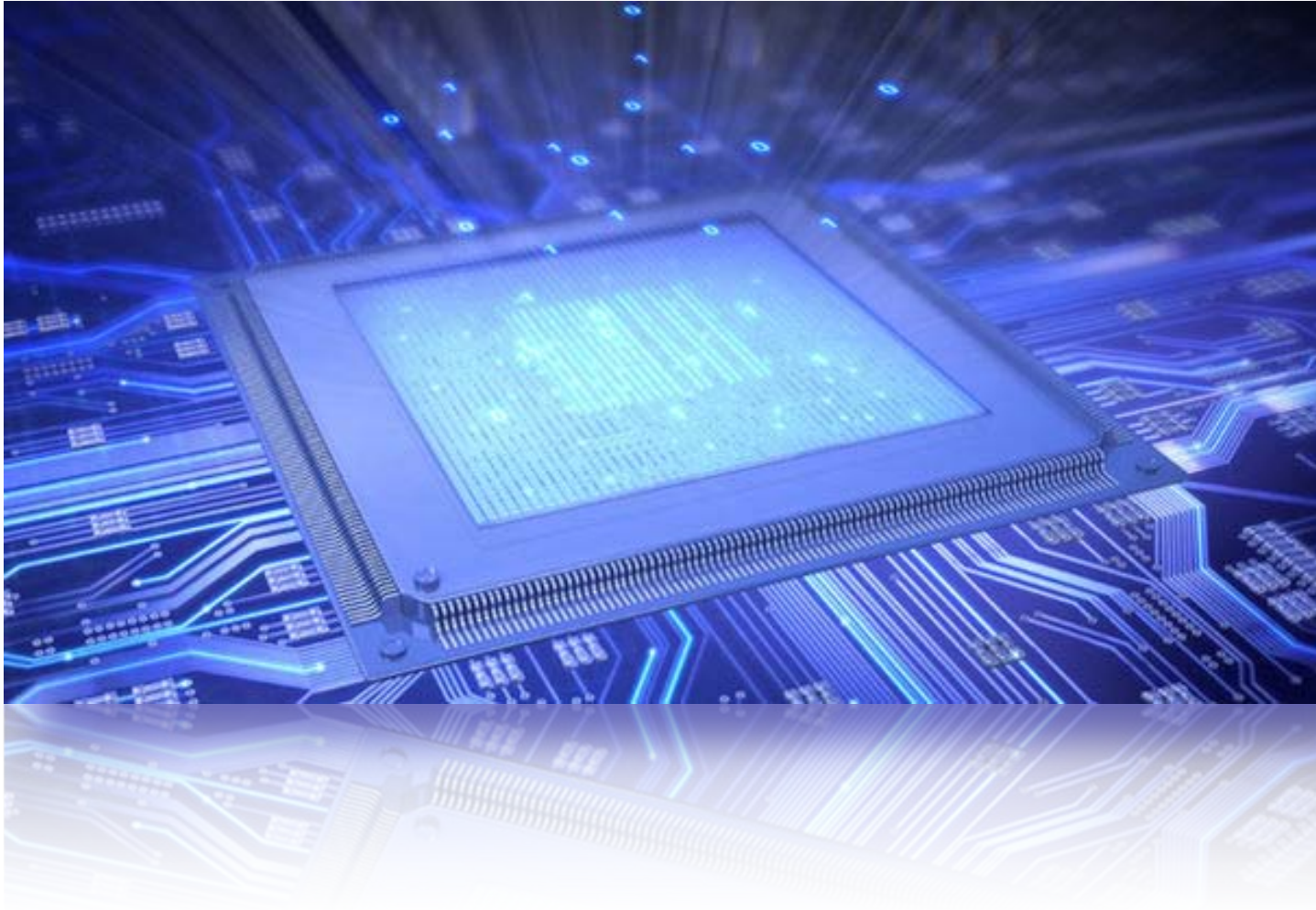
- **e-Learning courseware available through SkillPort starting April 1:**

AVRS Features	Procedure Code Inquiry
Contact Guide (Who to call when)	Pharmacy Coverage Inquiry
Provider Office Administrator Functions	NCTracks Overview
Prior Approval Requests and Inquiry	How To File /Adjust a Claim
Viewing Recipient Information	Edits, Denials, and Resubmitting a Claim
Reference Data Inquiry	How to Read Your Remittance Advice
Provider Records - Functions and Impacts	Updating Provider Data
Rate Inquiry	

- **e-Learning courseware and sign-up for instructor led training will be accessible from existing EVC website (prior to go live)**

- www.nctracks.nc.gov
- NCID will be required to access the training
- Post go-live, training will be accessed through the NCTracks Provider Portal

System Cutover Plan



System Cutover Plan

- **The Deployment and Cutover Team includes CSC, the State, and HP**
 - Meetings between CSC and the State have already begun
 - The Deployment and Cutover Plan is undergoing review and revision
- **The objective is to minimize disruption of service at cutover**
 - Restriction Period vs Blackout Period
 - Will vary by system functionality (e.g. provider enrollment vs pharmacy POS)

Provider Communications

- **NCTracks Communications Website**
 - <http://ncmmis.ncdhhs.gov/communication.asp>
- **Email Listserv**
 - Distribution list for provider communications. Sign up on the NCTracks communications website
- **NCTracks *Connections* newsletter**
 - Monthly newsletter with articles on key topics for transition to NCTracks
- **Follow-up questions**
 - Send to *OMMISS.ProviderRelations@dhhs.nc.gov*

Questions



Glossary

Acronym	Glossary Term	Definition
DHHS	Department of Health and Human Services	In NC, the department responsible for administering health and human services within the State.
DMA	Division of Medical Assistance	The division responsible for the supervision of the Medicaid program in NC, including the NCMMIS+ and Fiscal Agent contract.
DMH/DD/SA	Division of Mental Health, Developmental Disabilities, and Substance Abuse Services	The Division makes policies and monitors public services and supports to people with mental illness, developmental disabilities, or substance abuse throughout North Carolina. Services and supports are provided through local programs statewide.
DPH	Division of Public Health	The Division of Public Health covers a wide range of programs and services, all aimed toward protecting and improving the health of the people who live and work in North Carolina.
EFT	Electronic Funds Transfer	Mechanism for paying providers for approved claims via electronic transfer of funds from the State directly to the provider's account; optional for Medicaid providers, required for DMH/DD/SAS providers.
FA	Fiscal Agent	A contracting organization that assumes all or part of the State Medicaid agency's responsibilities in respect to claims processing, provider enrollment and relations, utilization review, and other functions; synonymous with Fiscal Intermediary; a contractor who operates a claims processing system and pays providers on behalf of the State.

Glossary

Acronym	Glossary Term	Definition
IPRS	Integrated Payment and Reporting System	The part of MMIS+ used to process and report claims specific to Mental Health, Developmental Disability, and Substance Abuse services; DMH was the first “multi-payer” to become part of the NCMMIS+ when IPRS was implemented in 2002.
MMIS	Medicaid Management Information System	The federally required model for an automated claims processing and information retrieval system for the Medicaid program; the required six subsystems are Recipient, Provider, Claims Processing, Reference, MARS, and SURS; some states have additional subsystems, such as TPL, MQC, EPSDT, and Case Management.
MMIS+	Medicaid Management Information System +	The plus in the MMIS demonstrates additional programs or multi-payers that are using the MMIS (Medicaid) processing capability; the MMIS+ is the claims processing and information retrieval system in NC that is also used for processing and paying Medicaid claims for other programs, currently Mental Health, Developmental Disabilities, and Substance Abuse Services.
POMCS	Purchase of Medical Care Services	The DPH program that provides medical services to people who do not qualify for other public assistance.

Glossary

Acronym	Glossary Term	Definition
RA	Remittance Advice	Explanation to providers regarding paid, pending, and denied claims; HIPAA Electronic Data Interchange ANSI ASC X12N transaction 835 Remittance Advice is produced by the NCMMS+, along with provider reimbursement; RAs are sent to providers with checks or EFT.
TPL	Third-Party Liability	<p>Other insurance companies responsible for medical coverage; their claims must process and pay or deny before State processing. Medicaid is the payer of last resort.</p> <ul style="list-style-type: none"> • The system moves costs to other payers. • The TPL system provides third-party cost avoidance. • Third parties include: <ul style="list-style-type: none"> - Public or private health insurance, - Auto and general liability, - Worker's compensation, - Medicare, - CHAMPUS, - Railroad Retirement Act