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Customer Services

Attention AlphaMCS Slot Scheduler Users: Providers who use the AlphaMCS Slot Scheduler are asked to please add new available referral slots to their scheduler **no later than the 20th of each month for the following month.** Proactively adding referral slots to the AlphaMCS Scheduler will significantly improve the ability of the Customer Service Department to schedule routine consumers within 10 working days as mandated by the Department of Medical Assistance and the Department of Health and Human Services.

Information Technology

Google Chrome and Silverlight Changes Affect AlphaMCS: As of April 14, 2015, Google Chrome has by default turned off the Silverlight (and Java) plug-ins in their Internet Browser. Since AlphaMCS runs on the Silverlight platform, this change prevents users from using Google to access AlphaMCS. At this time, we highly recommend our providers change to a different browser, like Explorer or Firefox. AlphaMCS states they support the most current version of both. The article link with further details is below.

<http://arstechnica.com/information-technology/2015/04/chrome-starts-pushing-java-off-the-web-by-disabling-plugins/>

Per the article, there is a workaround that can be implemented from the user's workstation. This workaround will function ONLY until Google's final cutoff date of September 2015, so it may be more efficient to go ahead and change internet browsers at this time.

Please contact Partners' Helpdesk at 704-842-6431 or email us at helpdesk@partnersbhm.org with any further questions.

Claims Updates

Medicaid Top 5 Claim Denials For March 2015:

Medicaid Top 5 Claim Denials March 2015	Provider Recommended Action Steps
Service is not authorized	Verify Service Authorization for consumer. Contact Utilization Management.
Claim received after billing period	Write off charges as non-billable. Do not rebill.
Duplicate Claim	Claim has previously been submitted and adjudicated. Do not refile.
No coverage available for Patient/Service/Provider combo	Go to Provider > Provider Details > Contract tab. Select the appropriate contract then go to Contract Details. Check site.

Important Contract and Certificate of Insurance Information

All Providers are required to submit the following information, as soon as possible, for renewal of contracts.

In Provider Communication Bulletin #42 (issued March 26, 2015), Partners requested that all provider agencies inform us of the name and email of the current authorized contract signer for the agency. Partners uses electronic signature software, **therefore contracts, renewals, amendments, and/or extensions will be emailed directly to the staff who is responsible for signing.**

All provider organization must complete a form that identifies the authorized contract signer's name and email address for your organization. [Click here to access the form.](#) Complete the form and email it to contracts@partnersbhm.org by 5 p.m., Friday, April 17.

In addition, all Providers, or their insurance agent must ensure that a current **Certificate of Insurance (COI) has been forwarded to Partners. The COI should be addressed to Partners BHM, 901 S. New Hope Rd., Gastonia NC 28054.**

Insurance Certificates may be:

- Emailed to: contracts@partnersbhm.org
- Faxed to: 336-527-3265
- Mailed to Partners BHM, 901 S. New Hope Rd., Gastonia NC 28054

Please note that:

- Partners BHM should be listed as additional Insured
- Insurance limits must meet or exceed contract requirements
- Contracts will not be renewed if insurance on file has expired

If you have any questions regarding the contact form or certificates of insurance, please email contracts@partnersbhm.org or call 336-527-3295.

REMINDER - Joint Communication Bulletin #133: Updated Billing Codes for Residential Treatment Services

The North Carolina Division of Medical Assistance issued Joint Communication Bulletin #133 (<http://www.ncdhhs.gov/MHDDSAS/communicationbulletins/index.htm>) referencing that as of May 3, 2015, codes that have been used for child residential services will be replaced by National HCPC codes. In reviewing the National HCPC codes, it is noted that some modifiers currently in use for the HCPC codes need to be updated. These changes will only impact Medicaid Child Residential Levels III and IV. There are no changes to the modifiers at this time for State/IPRS-funded services.

This change is effective May 3, 2015. The change in modifiers will have an impact on submission of service authorization requests (SARs), authorizations and claims for Medicaid. Starting May 3, 2015 and forward, all Medicaid authorizations and claims will need to reflect the new modifiers.

Partners Utilization Management (UM) Department will make the following corrections for Medicaid authorizations currently in AlphaMCS with an end date beyond May 2, 2015:

- UM will end date all current authorizations for May 2, 2015 and enter a new SAR with the beginning date of May 3, 2015. The end date for those SARs will be the last date of any current authorization in the system. (For example: Provider has an existing authorization with an end date of May 15, 2015. UM will end date the current authorization as of May 2, 2015 and the new SAR will start on May 3, 2015 with an end date of May 15, 2015.)
- For any authorizations requests providers submit between now and May 3, 2015, please reflect the end date as May 2, 2015. Providers will then need to submit the next Medicaid SAR prior to May 3, 2105 for ongoing authorization.
- Medicaid SARs or claims submitted with old modifiers will not be processed for dates of service May 3, 2015 forward.

The changes are as follows for Medicaid only. There are no changes to IPRS.

Code	New Modifier	Description
H0019	HQ	Level III, four beds or less
H0019	TJ	Level III, five or more beds
H0019	HK	Level IV, four beds or less
H0019	UR	Level IV, five or more beds

As always, please direct questions to Partners Utilization Management Department at 704-842-6346.

Partners Training Academy

Being Prepared for ICD-10: Partners BHM is hosting North Carolina Council of Community Programs to deliver training in preparation for the transition from the ICD-9 to ICD-10 codes. The ICD-10 codes are four times longer and have a more complicated format than the ICD-9 code set. This training will teach you the format changes between ICD-9 and ICD-10, how to recognize the challenges of cross walking DSM-5 and ICD-9 to ICD-10, and the software system changes required to accommodate ICD-10. The event is live from Partners BHM-Gastonia, 901 South New Hope Road, Gastonia, and will be available through video conferencing at Partners BHM-Hickory and Elkin. For more information, see [the event flyer](#), or contact Laura Ring at laura@nc-council.org or 919-327-1500.

All Partners-sponsored provider trainings are listed on our [web calendar](#).

Provider Reminders

May Provider Forum: Partners will host its Provider Forum on **Tuesday, May 12, 2015** beginning at 1 p.m. The May meeting will focus on the findings of Partners' latest Needs and Gaps Assessment.

Providers are asked to RSVP below for the site where you will attend:

[Partners-Elkin](#), 200 Elkin Business Park Dr., Elkin, NC

[Partners-Gastonia](#), 901 S. New Hope Rd., Gastonia, NC

[Partners-Hickory](#), 1985 Tate Blvd. SE (First Plaza), Hickory, NC

Handouts from all Provider Forums are available on the Partners website (For Providers > Information & Documents > Provider Forum Information).

Provider Alerts are emailed to all providers subscribed through Constant Contact for "Information for Providers" and "All Partners Communications," and are posted at the bottom of the "For Providers" page at www.partnersbhm.org.

Provider Alerts issued in April:

April 1, 2015 - Upgrade to Alpha Build 1.13 scheduled for April 1 at 8p.m.

April 2, 2015 - Changes to Quarterly Incident Reporting

April 10, 2015 - AlphaMCS Provider Portal Update Patch

April 15, 2015 - Contract and Insurance Information Submissions to Partners

April 20, 2015 - Joint Communication Bulletin #133: Updated Billing Codes for Residential Treatment Services

Partners Behavioral Health Management
Provider Communication Bulletin #43
April 30, 2015

LME-MCO Joint Communication Bulletins: All LME-MCO Joint Communication Bulletins can be found at <http://itcommunicationbulletins.ncdhhs.gov/>. (Partners does not post the LME-MCO Joint Bulletins on its website.)

Bulletins issued since the last Provider Bulletin:

J128—Physician Assistant Direct Enrollment for State-Funded Services

J129—Psychiatric Residential Treatment Facilities: New Medicaid and NC Health Choice Billing Requirements

J130--

J131—Revisions to Consumer Data Warehouse Reporting Requirements

J132—Waiver from Provider Choice and Access Requirements

J133—Updated Billing Codes for Residential Treatment Services

J134—Medicaid Payment for Services Provided without Charge (Free Care)

J135—Nurse Practitioners Providing Behavioral Health Outpatient Services

DMA Medicaid Bulletin: Providers are encouraged to review the monthly NC Division of Medical Assistance Medicaid Bulletin. Bulletins are posted at <http://www.ncdhhs.gov/dma/provider/>.

NCTracks News

No Delay - October 1 Deadline Stays: October 1 remains the deadline for the implementation of ICD-10. Congress passed the Medicare sustainable growth rate bill, and this time, there was no language added to delay ICD-10 as had happened in the past two years.

If you have not started preparing for ICD-10, you must start now. To delay any longer puts your business at risk. All payers, public and private, will be using ICD-10 codes starting October 1.

The news was slightly better in NCTracks' second ICD-10 provider readiness survey conducted in March, compared with the first survey in January. To the question, "Will you be ready for ICD-10 on October 1?" 61% said yes, up one percentage point in two months. And 3.5% answered no. The rest were unsure.

NCTracks will conduct another readiness survey in May, and hope to see all indicators moving to readiness. The second survey had only half the respondents as the first. From this group, NCTracks learned that 30% haven't begun to prepare for ICD-10 and another 29% had just gotten started.

If you're a small practice or solo provider and would like a comprehensive overview of how to prepare for ICD-10, check out the "Road to 10" on the web site of the Centers for Medicare and Medicaid Services (CMS) <http://www.cms.gov/Medicare/Coding/ICD10/index.html>.

Other organizations providing guidance are:

- North Carolina Healthcare Information & Communications Alliance, Inc. (NCHICA) www.nchica.org
- Workgroup for Electronic Data Interchange (WEDI) www.wedi.org

**Partners Behavioral Health Management
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- American Health Information Management Association (AHIMA)
<http://www.ahima.org/topics/icd10>
- Healthcare Information and Management Systems Society (HIMSS)
<http://www.himss.org/library/icd-10-transition>.