



Provider Communication Bulletin #57

May 26, 2016

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Provider Council to Host Council Planning Session

Partners' Provider Council welcomes all providers to the Council Planning Session on Friday, June 10, 2016 from 10 a.m.-2 p.m. The session will be held in the Multipurpose Room at Partners' Hickory Office (1985 Tate Blvd. SE, Hickory NC 28602.). Lunch will be provided, and registration is required. To register for the Provider Council Planning Session, [please click here](#). If you have questions, please contact Margaret Mason, Provider Council Chair, at mason@homecaremgmt.org.

Please note that the Provider Council will not meet on Friday, May 27, 2016.

Medicaid Eligibility in AlphaMCS

Partners has received many calls in reference to Medicaid eligibility not loading in AlphaMCS when NC Tracks reflects otherwise. We are actively working with the State, each of our eight county's Department of Social Services and Alpha MCS to resolve these issues as best possible.

Many of the issues are due to *voided segments* in NC Tracks. Partners' Claims and/or Enrollment staff are not allowed to correct the voided segments in the AlphaMCS system. Changes in consumer eligibility in AlphaMCS must come from the state Global Eligibility file. In addition, county Department of Social Services will not allow Partners staff to discuss specific consumer eligibility due to HIPAA privacy concerns. Providers who experience this issue need to contact the Department of Social Services handling the consumer's Medicaid eligibility to correct the information in NCTracks.

If you have further questions about this matter, please contact Rhonda Colvard, Claims Manager at claims_department@partnersbhm.org or call 704-842-6486.

Partners Behavioral Health Management communicates Provider Information through Provider Communication Bulletins and its website, www.partnersbhm.org. If you have any questions regarding this Bulletin, please reference the subject contact, contact your provider specialist, or email questions@partnersbhm.org. All Provider Bulletins and training event information are posted at www.partnersbhm.org/For Providers.

Child and Adolescent Needs and Strengths Assessment (CANS)

Updates

We have answered some of the most frequently asked questions regarding the CANS assessment below. If you have further questions regarding the CANS assessment, or the CALOCUS, please contact Lynne Grey, Utilization Management Manager, at lgrey@partnersbhm.org or call 704-884-2542.

- **Designated CANS training module is CANS 0-4:** The title of the designated training module on the CANS training website has been changed from SF CANS 0-5 to CANS 0-4. This is still the correct training module. Only the title was changed, not the content.
- **Clarification of the age requirement:** A CANS assessment is required for children up until their 6th birthday. Upon their 6th birthday, the required screening tool switches to the CALOCUS (Child and Adolescent Level of Care Utilization System.)
- **Child with Medicaid coverage receiving basic benefit services only:** The CANS assessment should be administered prior to the seventh outpatient visit. A copy should be kept in the consumer's record and updated annually.
- **Child receiving enhanced Medicaid services that require authorization:** The initial CANS assessment should be administered within the first authorization period, and should be included in the first concurrent authorization request. An updated CANS assessment should be completed if the consumer will be receiving the enhanced service for longer than six months, and with each concurrent request thereafter.
- **Child receiving enhanced Medicaid services that do not require prior authorization:** The initial CANS assessment should be administered within the first month of service and a copy should be maintained in the consumer's record. An updated CANS assessment should be completed at the time the consumer's annual Person Centered Plan update occurs.

Critical Time Intervention Training

Is your organization interested in learning more about Critical Time Intervention (CTI)? If so, make sure to register for an upcoming CTI Training presented by the UNC Chapel Hill School of Social Work. The two-day training will be held on June 16 and 17, from 8:30 a.m.-4 p.m. each day, at Alliance Behavioral Health's Corporate Office, 4600 Emperor Blvd., Suite 200, Durham NC 27703. To register, [click here](#).

2016 Perception of Care Survey

Providers participating in this year's Perception of Care Survey are reminded that the survey period ends June 6, 2016. All surveys need to be returned to Partners by June 10, 2016.

Providers can return the surveys by:

- sending/delivering to your provider specialist;
- sending/delivering to Jackie Copeland at the Elkin office; or
- sending/delivering to April Corder at the Gastonia office.

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Please direct all questions regarding this year’s survey implementation to Jackie Copeland, at 336-527-8015, or email jcopeland@partnersbhm.org. Additionally, if you need forms in Spanish, please email April Corder, acorder@partnersbhm.org for assistance.

Partners expresses its gratitude for your assistance in administering the 2016 Perception of Care survey.

Top Five Medicaid Claim Denials—April 2016

CLAIM DENIAL	PROVIDER RECOMMENDED ACTION STEPS
No contract exists or rate not set up yet.	Refer to your contract and call MCO if any questions.
Concurrent service has already been approved. Cannot bill another one.	Confirm the service previously sent is correct. If not, submit a reversal or replacement claim.
Duplicate Claim	Claim has previously been submitted and adjudicated. Do not refile.
Claim received after billing period	Write off charges as non-billable. Do not rebill.
Service is not authorized	Verify Service Authorization for consumer. Contact Utilization Management.

Provider Reminders

May Provider Council Meeting Cancelled: The Friday, May 27th Provider Council meeting is cancelled.

Provider Alerts: Provider Alerts are sent to all providers subscribed through Constant Contact for “Information for Providers” and “All Partners’ Communications,” and are posted on the main “For Providers” page at www.partnersbhm.org. You can location previous alerts in the [Provider Alert Archive](#). This month’s alerts:

- May 6, 2016 - [NC Innovations Technical Amendment; CANS Webpage Update](#)
- May 10, 2016 - [Survey; Service Gap Analysis; NCHIMBH Meeting](#)
- May 13, 2016 (10:01 am) - [Medicaid Insurance Layers in AlphaMCS](#)
- May 13, 2016 (2:04 pm) - [CANS Clarification; AlphaMCS Document Removal and More](#)
- May 13, 2016 (4:42 pm) - [Records Loaded In AlphaMCS](#)
- May 20, 2016 - [Downtime Notification for AlphaMCS](#)
- May 23, 2016 - [Alpha Available; Medicaid Eligibility; Provider Council Planning Session](#)

Benefit Grids and Service Definitions: The Medicaid/B3 Services Benefit Grid and the State Funded/IPRS Benefit Grid were updated effective April 1, 2016. Benefit Grids and Service Definitions are located in **For Providers/Clinical Resources** area of www.partnersbhm.org.

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“Who to Contact” Information: Partners maintains two “Who to Contact” lists on our website—one for the individuals and families we serve; and one for providers. You can view the information at www.partnersbhm.org by visiting the About Us page and selecting “[Who to Contact.](#)”

Provider Forum: Partners will hold its next Provider Forum on August 9, 2016 beginning at 1 p.m. The forum will be teleconferenced to Partners’ Elkin, Gastonia, and Hickory locations. If you have questions regarding the forum, please contact Jamie Sales at jsales@partnersbhm.org or call 828-323-8053. Handouts from previous forums are available on the [Provider Forums](#) page.

State News

LME-MCO Joint Communication Bulletins: All LME-MCO Joint Communication Bulletins can be found at <https://www.ncdhhs.gov/divisions/mhddsas/communication-bulletins>.

Bulletins issued since the last Provider Bulletin:

- #J197 – Notification of LME-MCO Credentialing/Recredentialing Action Form
- #J198 – Extension of Innovations Waiver Amendment Implementation
- #J199 – Eligibility for (b)(3) One-time Transitional Costs Service

DMA Medicaid Bulletin: Providers are encouraged to review the monthly NC Division of Medical Assistance Medicaid Bulletin. Bulletins are posted at <http://dma.ncdhhs.gov/document/2016-medicaid-bulletins>.

Consolidation of NCTracks Fax Numbers

In some cases, it may be appropriate or necessary to fax information to NCTracks. To simplify the process of sending a fax to NCTracks, they are consolidating the existing numbers into the following three fax numbers:

- Non-Pharmacy Prior Approval - (and Carolina ACCESS Overrides) 855-710-1964
- Pharmacy Prior Approval - 855-710-1969
- Call Center (and all other correspondence) - 855-710-1965

These fax numbers are not new - they have been in use since NCTracks went live on July 1, 2013. **As of July 1, 2016**, the only valid fax numbers for NCTracks will be the three numbers listed above. All other fax numbers will be discontinued on June 30.

Consolidation of the fax numbers will enable requests from providers to be routed more quickly to the team responsible for acting on them. Providers who are not already doing so are encouraged to begin using these fax numbers immediately. The Contact Information document under Quick Links on the [NCTracks Provider Portal](#) has been updated to reflect the three fax numbers. Note that when possible, it is always faster to submit information to NCTracks through the secure Provider Portal.