

Provider HotSheet – January 21, 2014

HOT TOPICS

➤ **MeckLINK Transition Update**

Click [HERE](#) to review the January 7th Mecklenburg BOCC meeting where Assistant County Manager, Michelle Lancaster presented a brief update regarding the transfer of Mecklenburg County Medicaid Waiver services to Cardinal Innovations.

NEW TOPICS

➤ **Credentialing Applications**

Please be advised that effective January 22, 2014 MeckLINK will no longer accept new applications for credentialing. Specifically, MeckLINK will no longer accept applications for new provider agencies, existing provider agencies, new licensed practitioners, and existing licensed practitioners. If you are currently credentialed and wish to change your agency affiliation, please contact your Provider Relations Specialist.

If you have questions regarding the status of your credentialing application, please contact one of our Credentialing Specialists at (704) 432-0146.

➤ **IRIS unavailable Friday, 1/24/14**

IRIS will be unavailable on Friday, January 24th for maintenance. If a provider needs to submit a report before IRIS is available, a copy of the IRIS report is available [HERE](#). All paper reports must be entered into IRIS when IRIS becomes available.

➤ **Unmanaged Visits**

Unmanaged Outpatient visits for Basic State and Medicaid Outpatient Services became effective January 1, 2014. Unmanaged visits do not require SARs for the first 8 adult outpatient therapy services or the first 16 child or adolescent outpatient therapy visits. Under MeckLINK State and Medicaid Plans the following are counted separately above and beyond the first 8 adult or 16 child visits:

- Assessments = up to 2 unmanaged units per year
- Psychological Evaluations = up to 5 unmanaged units per year
- Physicians Visits = up to 144 unmanaged units per year

If you have any questions please contact the MeckLINK 24 Hour Customer Service at 704-336-6404.

➤ **2014 MeckLINK Check Write Schedule - online [HERE](#) under Complete Provider Resource Documents and the subtitle CLAIMS**

Snapshot of upcoming dates:

2014 Month	Check Write Cycle	Check Write Date	EFT Effective Date/RA Available Date
	Cutoff Date		
January	1/21/2014	1/28/2014	1/29/2014
February	1/28/2014	2/4/2014	2/5/2014
	2/4/2014	2/11/2014	2/12/2014

➤ **Upcoming Event**

Please encourage parents, educators, caretakers and self advocates to join the **Mecklenburg County System of Care Community Collaborative** when they host the upcoming free event, “Work Your Story – Advocacy N Action” on Saturday, March 15th from 10 AM – 2 PM at Providence Baptist Church. Please RSVP and [REGISTER HERE](#). A PDF Flyer for printing at your office is available by contacting [Melissa Marshburn](#).

This event will be filled with community speakers sharing personal stories around the topics of: mental health, intellectual and/or developmental disability, substance abuse, homelessness, education, transportation, child welfare, jobs and emergency housing. We will also teach why advocacy is important, define the types, discuss our representatives at a County, City and State level and learn how to prepare a personal advocacy message to make a difference in the community. Each participant will also leave with a source guide and additional information for future reference.

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➤ Top 5 Claims Denial Reasons for January 8-14, 2014

Reason Code	Denial Reason Description
100	<p>Invalid Date Range / Invalid date for discharge claim: For discharges (bill type ending in 1 or 4), if the day of discharge on the claim line matches the claim’s date of service, the claim is denied. This is because the last date of discharge, the bed will be vacant. So the total billed units should be days minus 1. If total days in the date range are the same as the total units, the last date will be denied for the reason.</p> <p>RECOMMENDED ACTION: Do not include the date of discharge when submitting discharge claims with bill type ending in 1 or 4.</p>
4	<p>Basic Units: The total number of basic units has been exceeded. For certain services, usually Evaluations and Outpatient Therapy. Adults get 8 units covered without an authorization and children get 16. Basic units are renewed at the beginning of every fiscal year. They follow the patient across providers.</p> <p>RECOMMENDED ACTION: Providers will need to enter a SAR for the service they are trying to get approved. Please contact the call center at 704-336-6404 for assistance.</p>
3	<p>AUTHED UNITS EXCEEDED: The service on the claim was authorized. However the provider has gone over the amount of units on the authorization.</p> <p>RECOMMENDED ACTION: Verify units authorized and provided. The provider will need to enter a new SAR for the service. Contact MCO if possible. Do not re-file if authorized units are truly exceeded.</p>
1	<p>Adjusted- Above Contract Rate: The rate charged in the claim is higher than the rate that is in the provider’s contract</p> <p>RECOMMENDED ACTION: If the MCO or Provider determines that the higher rate is correct, the MCO can adjust the rate in the Maintain Provider Information Module. The Provider should not resubmit the claim. If the higher rate is incorrect, the claim will be paid at the Provider’s contracted rate.</p>
40	<p>Weekly limit exceeded: The service has a limit on the amount of units that can be billed per week. Either the claim has exceeded that limit or that the claim in addition to other claims (for that same week and services) has exceeded the limit</p> <p>RECOMMENDED ACTION: Limit to occurrence of service billable per week. If necessary, submit a SAR for service authorization. Adjust off charges and do not re-file. Only if service is billed in error, file adjusted claim.</p>

PREVIOUS TOPICS

➤ **REMINDER - Person-Centered Comprehensive Prevention and Intervention Crisis Plan**

The new PCP Comprehensive Crisis Plan is required for any individual who is receiving Enhanced Services and who meets the criteria defined as being at higher risk for a crisis incident (NOTE: Refer to table in [Communication Bulletin #139](#)). An individual can receive “basic services” and still meet the requirements to have the PCP Comprehensive Crisis Plan developed. *For example: An individual receiving Medication Management who does not appear for scheduled appointments and is at risk for inpatient or emergency treatment.*

Additionally, it applies to individuals:

- who do not appear for scheduled appointments and are at risk for inpatient or emergency treatment
- for whom a crisis service has been provided as the first service in order to facilitate engagement with ongoing care
- discharged from an inpatient psychiatric unit or hospital, a Psychiatric Residential Treatment Facility, or Facility-Based Crisis

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This additional crisis plan is required for any individual who entered services as of **January 1, 2014** when those services met the usual standards for which a Person Centered Plan is required and when he or she also met the criteria as defined in [Communication Bulletin #139](#).

For an individual who was **already receiving services** and who already **has a Person Centered Plan**, the new Crisis Plan should be implemented during **the next meeting to revise a Person Centered Plan**.

Individuals who are receiving Enhanced Services and who **do not meet the additional criteria** as defined in [Communication Bulletin #139](#), may continue to use the current 1 page Crisis Plan developed.

➤ **NC Innovations Providers**

Update to NCDHHS Clinical Coverage Policy 8P which can be found at [LINK](#).

7.2.7 Progress Summary

Service providers, Agencies With Choice, and Employers of Record are required to complete progress summaries for habilitative services to reflect the beneficiary's progress toward the short-range goal and long-range outcomes that have been implemented in the Individual Support Plan for any of the following Innovation services: Community Networking; Day Supports, In-Home Skill Building, In-Home Intensive Supports, Residential Supports and Supported Employment.

➤ **Provider Resource Library Updates**

Confidentiality and Protection of Consumer Information – [IM-03](#)

Person-Centered Comprehensive Prevention and Intervention Crisis Plan – Found at this [LINK](#) under Complete Provider Resource Documents and the subtitle FORMS.

➤ **NC VOTER ID Cards**

North Carolina is now issuing free photo ID cards to those residents without a picture ID or drivers' license. Beginning in 2016, NC voters will be required to show photo identification at the polls. Details on the process to obtain a no-fee ID card is found on the [NC Division of Motor Vehicles website](#).

PROVIDER COUNCIL REMINDERS AND UPDATES

Provider Council Sub-Committees – Standing sub-committees have been formed by the provider Council. If you are interested or would like more information, please contact the committee chairs. The committees include:

Training and Education – The purpose of the meeting is to promote best practices and collaborative growth in the areas of training, education, understanding and support with regard to state and local processes.

- Lisa Davis (Co-Chair) – Genesis Project 1 – 704-596-0505 – ldavis@genesisproject1.org
- Sylvia Hines (Co-Chair) – LifeSpan – 704-393-5916 x 1405 – shines@lifespanservices.org
- Sonya Richardson, Consultant to Committee/UNC-C – 704-548-5298 srichardson@anotherlevservices.com

Network Development and Project Management – The purpose of this meeting is to provide recommendations and feedback to the MCO specific to ongoing development of the Provider Network within a waiver environment and to develop information and learning sessions to assist provider in managing quality outcomes.

- Angela Bunting (Co-Chair) – Connections BWB – 704-596-5553 Angela.Bunting@connectionsbw.com
- Diana Levitt (Co-Chair) – Teen Health Connection – 704-381-8374 Diana.Levitt@teenhealthconnection.org

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EDUCATION AND TRAINING OPPORTUNITIES

➤ **Mecklenburg's PROMISE Peer Support Services and Recovery/Crisis Trainings**

MeckPromise offers *free* Peer Support Services and *free* Wellness, Recovery & Crisis Education classes for all community members, including consumers, providers, family/friends (no insurance or Medicaid needed!). They are located at 1041 Hawthorne Lane, Charlotte, NC 28205.

For more information call 980-321-4021 or contact Program Manager Kim Roszelle at 980-321-4022 or Kroszelle@meckpromise.com. Visit www.meckpromise.com.

➤ **The MeckLINK Behavioral Healthcare Training Calendar is [posted online](#).**

TIP – Training in Innovation and Practice –The NC Council of Community Programs and the

Administrative Services Organization, a group of providers, continue to offer training to help providers adapt to changing circumstances. For a list of currently scheduled training events and to register, go to www.nc-council.org.

➤ **Mental Health Association (MHA)** offers various training opportunities to include [QPR](#) (Question, Persuade, and Refer) suicide prevention training, [QPR Train-the-Trainer](#) certification course, [Mental Health First Aid USA](#), and [Creating a Ripple of Hope: Telling Your Story & Inspiring Positive Change – Advocacy 101 for Consumers & Their Caregivers](#). Please visit their [website](#) or call 704-365-3454 for more information.

Web Resources

MeckLINK

[MeckLINK Homepage](#)

[MeckLINK HotSheet Archive](#)

[MeckLINK Provider Document Library](#)

NC DHHS - DMA

[NC Division of MH/IDD/SA Homepage](#)

[Glossary of Terms and Acronyms](#)

[NC Division of MH/IDD/SA Implementation Updates](#)

[The Commission for Mental Health, Intellectual Developmental Disabilities and Substance Abuse](#)

[NC Innovations and CAP-MR/IDD waivers COMPARISON](#)

[DMA – 1915 \(b\)\(c\) Waiver Updates](#)

[DMA Medicaid Bulletin](#)

[LME-MCO Medicaid Recipient Appeal Process](#) (per federal CFR 438.400)

NC Legislature

[General Assembly](#)

[Joint Legislative Oversight Committee for MH/IDD/SA](#)

Peer Support Specialist

[UNC BHRP NC Certification Information](#)

To share suggestions, input, feedback, questions and concerns regarding the Hot Sheet, please contact Chuck Hill, Director of Provider Relations and Network Development at Charles.Hill@MecklenburgCountync.gov.