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Date: January 9, 2015

To: LME-MCOs

From: Mabel McGlothlen, LME System Performance Team Leader, DMH/DD/SAS, and Kathy Nichols, Lead Waiver Program Manager, Contracts Section, DMA

Subject: Taxonomy

The purpose of this bulletin is to outline the process for how to use the updated taxonomy list.

During our recent Core Team calls, we discussed issues with taxonomies and their impact on denied claims (this applies to Medicaid Encounter claims, not claims where DMH/DD/SAS would be the payer). To address this issue, your agency was asked to submit a list of the current taxonomies. Staff at DMA then reviewed those taxonomies and provided a list of taxonomies cross-walked with those in the NCTracks system that should not deny claims. The compiled list is not expected to be a comprehensive list of taxonomies that would not be accepted but a stepping stone toward getting a greater proportion of encounter claims to process to acceptance. This clarification comes as a result of the Core Team discussions and is intended to help inform LME-MCO staff how they should use the taxonomy crosswalk list.

Once LME-MCOs modify their systems to stop submitting codes not accepted by NCTracks, DMA will reprocess these claims that were previously denied. When the claims are reprocessed, NCTracks will replace the disallowed taxonomy with the cross-walked taxonomy. Where the old taxonomy cross-walks to "exclude," the claim would be denied.

In order to streamline this process, LME-MCOs shall:

- 1) **Change your claims processing systems to disallow all the taxonomies for Medicaid reimbursement that were on the list and provide DMA a date when the change will be implemented into your system.**
 - This is an important step that will help ensure that the system is in line with that of NCTracks when it comes to provider taxonomies.
 - Presumably, the provider would receive an Explanation of Benefits (EOB) outlining the reason for the denial.

- 2) **Work with any providers using the disallowed taxonomies to identify an NCTracks accepted taxonomy that providers can bill.**
- The LME-MCO should instruct their providers to log on to the NCTracks Provider Portal to verify their information including their taxonomy code(s).
 - If any of their information in NCTracks needs to be updated, they need to fill out a Managed Change Request (MCR) while in the NCTracks Provider Portal, then notify the LME-MCO of the changes.
 - The LME-MCOs should reinforce to their contract providers that the providers are now responsible for maintaining and updating their information in NCTracks, as well as reporting changes to the LMC-MCO.
- 3) **Educate and work with providers to ensure that what is submitted is both legitimate and accepted by NCTracks.**

LME-MCOs are not being asked to alter any claims information that is sent to them, but might need to assist the provider to ensure that they have entered legitimate claims that NCTracks will accept. For example, 103TA0400X is not accepted but 103T00000X is sufficient. Both are taxonomies for Psychologists, but the one that NCTracks does not accept is more specific. As another example, 101YP1600X is Pastoral Counselor and there could possibly be no other taxonomies that would fit that provider. If that is the case, then DMA will not pay for service for such a provider. For one last example, 208M00000X is a Hospitalist. In the crosswalk, DMA listed 208000000X, which is Pediatrics. This does not mean that all Hospitalists should be enrolled under the Pediatrics taxonomy. Rather, the provider should see if there is an appropriate taxonomy that is in the list that NCTracks approves.

If you have questions regarding this request, please send them via electronic mail to:
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