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LME-MCO Communication Bulletin #137 (Revised)

Date: September 25, 2015

To: LME-MCOs

From: Alfred Greco, Section Chief, Managed Care and Waiver Reimbursement, DMA and Mabel McGlothlen, IDD, TBI, and System Performance Section Chief, DMH/DD/SAS

Subject: Finance and Monthly Reporting (**Revised**)

The purpose of this bulletin is to inform LME-MCOs how to pull data for quarterly financial reporting and monthly data reporting.

Claims are processed at the header level in NCTracks. When a claim is submitted with multiple detail lines, all of the lines stay together as one claim during processing and are assigned a transaction control number (TCN) as the claim identifier. The TCN captures information based on the claim header level in order to accurately capture the entire claim and to report how the claim is adjudicated.

Individual detail lines are adjudicated on their own merit. Different detail lines submitted on the same claim could be paid, denied, or suspended. If one detail line on a claim is suspended, the entire claim remains in suspended status until that detail line is released for processing. Likewise, if some detail lines on a claim are paid and some are denied, the overall claim at the header level is assigned a paid status because payment is going out to the provider for that claim.

All LME-MCO quarterly financial reports and monthly monitoring reports should be reported using claim header level data to ensure that the entire claim is being reported on. The LME-MCO monthly monitoring report template will be updated accordingly. The seven scenarios in the attachment should help you in completing Schedule H of the Financial Reporting Template.

If you have questions, please contact Al Greco at Alfred.Greco@dhhs.nc.gov or at 919-814-0052.

Previous bulletins can be accessed at: <http://jtcommunicationbulletins.ncdhhs.gov/>

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