Carolina Access/NPI Related Denials

Carolina Access Denials

Medicaid Denial 270:

EOB Description: Billing provider is not the recipient's Carolina Access PCP Provider. Authorization is missing or unresolved. Contact PCP for authorization or EDS Provider Services if authorization is correct.

Resolution: This denial usually means that there is no NPI number on the claim for your Carolina Access provider. Verify that the Carolina Access number is listed in the **Referral**>**Dr. Pharmacy** tab. NOTE: The CA number often refers to a physician group rather than an individual, and they are reported separately. If the CA is a group, then that can't be reported as the ordering physician.

Also, IF you have multiple Carolina Access periods, verify under **Referral**>**Payer**>**Extra Billing** Tab that the correct dates are listed for the Carolina Access period you are billing for.

* If the primary physician is different from the Carolina Access provider, follow instructions to [Cross-Reference Carolina Access Number to NPI](#). Correct and resubmit the claim.

Medicaid Denial 268:

EOB Description: Incorrect authorization number on claim form. Verify number and refile.

Resolution: This denial usually means that the wrong Carolina Access/NPI number is listed on your claim. Verify under **Referral**>**Dr. Pharmacy** tab that the correct Carolina Access number has been recorded. NOTE: The CA number often refers to a physician group rather than an individual, and they are reported separately. If the CA is a group, then that can't be reported as the ordering physician.

  Also, IF you have multiple Carolina Access periods, verify under **Referral**>**Payer**>**Extra Billing** Tab that the correct dates are listed for the Carolina Access period you are billing for.

*If the primary physician is different from the Carolina Access provider, follow instructions to [Cross-Reference Carolina Access Number to NPI](#).

The Carolina Access Number should cross-reference to that provider's NPI number. The Carolina Access Providers NPI number should appear at the bottom of your HH claim, under the primary physicians NPI number.

(If the Carolina Access provider is the same as the primary physician, there will only be one NPI number on bottom of HH claim)

Other Common Carolina Access errors:

·   If there are several from and thru dates (of 00/00/0000 - 12/31/2075) under **Referra**l>**Payer**>**Extra Billing** tab, it will cause issues with the incorrect NPI number to appear on the claim. To resolve this, simply click on each entry with from date of 00/00/0000 – 12/31/2075, and hit delete. Recreate your claim.

·   If the wrong Carolina Access Number appears on your claim, follow instructions in Claim Shows Old Carolina Access Number, then recreate your claim. Make sure that the correct NPI number appears on claim.

·   A Medicaid recipient has the right to change their Carolina Access Provider yearly, quarterly or even monthly. It is pertinent that you verify eligibility for your clients on the 1st of every month. Please follow the procedure to verify Medicaid through the following link:
 http://kb.barnestorm.us/KnowledgebaseArticle50211.aspx?Keywords=eligibility

Other TIPS:

If you have an NPI number, but do not know the Carolina Access Number, here is a link that can provide the missing information: NPI Registry Search.

Knowledgebase
http://kb.barnestorm.biz/KnowledgebaseArticle50824.aspx