

## NC Medicaid Update Requirements for Providers Enrolled in Medicaid

Excerpt from January 2016 Medicaid Bulletin

Update on Enrollment Criteria for Ordering, Prescribing and Referring Providers

[https://ncdma.s3.amazonaws.com/s3fs-public/documents/files/Medicaid\\_Bulletin\\_2016\\_01\\_0.pdf](https://ncdma.s3.amazonaws.com/s3fs-public/documents/files/Medicaid_Bulletin_2016_01_0.pdf)

**Notice to Providers:** *This article updates the August 2014 Medicaid Bulletin article Providers Not Enrolled in Medicaid. This update also appeared in the November 2015 Medicaid Bulletin.*

*All providers who render services to beneficiaries must be enrolled in N.C. Medicaid or N.C. Health Choice (NCHC). In addition, 42 CFR 455.410 requires that all Ordering, Prescribing and Referring (OPR) physicians – as well as other professionals providing services under the N.C. Medicaid, NCHC or their respective waiver programs – be enrolled as participating providers. This includes anyone who orders, refers, or prescribes services or items (such as pharmaceuticals) to N.C. Medicaid and NCHC beneficiaries, and seeks reimbursement.*

*Any physician or non-physician practitioners who render services, or write orders, prescriptions or referrals, must be enrolled in N.C. Medicaid or NCHC and their individual NPI (not organizational NPI) must be included on the claim.*

No changes in Barnestorm are necessary at this time. However, we can suggest a report to run that will help track physicians that have an organization NPI. From Barnestorm Office go to **Reports > Doctor > 08.28** and run option 11

This is a list of physicians that have an organization NPI.

To correct the NPI

- o Go to **Codes > Other Basic Codes > Doctors**
- o Pull up the doctor
- o Remove the NPI number and any extra text from the last name (like MD, etc)
- o Click the **Validate Using NPPES** button
- o Select the doctor from the list provided
- o Click on **Import Information**
- o Click on **Save**

\*Note: The Barnestorm billing software picks up the NPI number for the claim from the physician that is assigned to the patient's 485 plan of care. If a 485 does not exist it will pick up the patient's primary physician from the Referral.

Knowledgebase

<http://kb.barnestorm.biz/KnowledgebaseArticle51265.aspx>