

Partners Health Management and Carolina Complete Health

Frequently Asked Questions

Provider Training June 17, 2024: [Slides](#) | [Recording](#)

Electronic Visit Verification

- **Question:** Will the information for the beneficiaries who are transferred over to the Tailored Plan for Partners be inputted into the HHAeXchange system?
 - **Answer:** Yes. Beneficiary information will transfer over to the HHAeXchange portal.
- **Question:** Will all Personal Care Services (PCS) NC Medicaid Direct patients move to Partners Tailored Plan?
 - **Answer:** Most PCS NC Medicaid Direct patients will move to Partners Tailored Plan. To ensure the member serving is a Partners Tailored Plan member, please review NCTracks to verify eligibility. The member's service code can also be reviewed using the Prior Authorization look-up found here: <https://providers.partnersbhm.org/benefits/#lookuptool>
- **Question:** What external payer ID would be submitted on our visits if we are an alternate EVV user? Would we use the Carolina Complete or Partners external payer ID?
 - **Answer:** For EVV, the services will go through HHAeXchange and providers should use the HHAeXchange payer ID. We will add the payer IDs to our typed Q&A. Thank you!
- **Question:** What external payer ID would be submitted on our visits if we are an alternate EVV user? Would we use the Carolina Complete Health or the Partners external payer ID?
 - **Answer:** If using EDI, use payer ID 28223 for PCS/BH members and payer ID 57539 for HHCS members.
- **Question:** How are the claims processed?
 - **Answer:** EVV claims are sent to HHA and transferred to Partners/CCH for processing.
- **Question:** Does EVV apply to adult care home providers?
 - **Answer:** Please refer to the Home Health Care Services Code Crosswalk for descriptions of programs and service codes subject to EVV requirements.
<https://providers.partnersbhm.org/home-health-care-service-code-crosswalk>
- **Question:** So, the files in HHAeXchange will not look any different than they do now for the LME/MCOs when sending Habilitation EVV data?
 - **Answer:** The files will look very similar to how they look now.

- **Question:** Will we have to wait 30 days from the claim date to get the first payment?
 - **Answer:** We have 30 days to pay an approved claim, but they are typically paid within 8 to 9 days of approval.

- **Question:** If we already use HHAExchange, do we have to do anything extra?
 - **Answer:** Your contract will be automatically linked with Partners by the 7/1 go-live. Behavioral Health (BH) and PCS will be managed on the same contract, so if you are already linked with Partners for BH, no additional steps are needed to prepare for PCS. HHAExchange will be loading the new 99509 codes.
NOTE: If you use a third party EVV vendor and have previously integrated with HHAExchange, you will need to open an EDI Support ticket to request the Partners contract be configured for third party billing.

 - **PCS:** Partners will begin sending members and authorizations to your HHAExchange portal on or around the 7/1 go-live.
 - **HHCS:** Beginning 7/1, you will be able to add your members/placements following the Auto-Placement Workflow (the process is automated for EDI providers if sending Payer ID + Medicaid ID + NPI on file).

- **Question:** What if we use the free version?
 - **Answer:** Your contract will be automatically linked with Partners by the 7/1 go-live. BH and PCS will be managed on the same contract, so if you are already linked with Partners for BH, no additional steps are needed to prepare for PCS. HHAExchange will be loading the new 99509 codes.
 - **PCS:** Partners will begin sending members and authorizations to your HHAExchange portal on or around the 7/1 go-live.
 - **HHCS:** Beginning 7/1, you will be able to add your members/placements following the Auto-Placement Workflow (the process is automated for EDI providers if sending Payer ID + Medicaid ID + NPI on file).