

# Known system issues tracker

UnitedHealthcare Community Plan of North Carolina

Updated March 14, 2024

The UnitedHealthcare Community Plan of North Carolina is making this information available to health care professionals to help you better understand when we identify system issues and make adjustments or corrections to fix those issues.

If you have any questions about these issues, please contact the Provider Call Center at **800-638-3302**.

Health care services type	Number of impacted providers	Category	Issue	Date issue found	Days outstanding	Estimated fix date	Status	Resolution	Interest or penalties owed	Date resolved	Tech Ops incident problem number
Various	TBD	Provider	The North Carolina Department of Health and Human Services (DHHS) identified that the language and NPIs in our electronic and printed provider directories don't match what's displayed in the Enrollment Broker and NC Tracks.	Oct. 5, 2023	161	TBD	Open	UnitedHealthcare is working through the Provider Directory issues, using 2 simultaneous phases to bring them into alignment. We're targeting a mid-March deployment.	No	TBD	COM0046462, COM0046159, COM0046905

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DME	3	Claims	<b>HCPC code E0202</b> HCPC code E0202 is allowing 1 unit per member versus 1 unit per day.	Jan. 5, 2024	69	TBD	Open	UnitedHealthcare previously implemented a permanent fix for E0202 as a result of a known issue. Because of new state complaint, we were notified that some providers have received recoupments in error. An updated configuration is in process, as the configuration previously allowed 1 unit per member. The update aligns with NC Medicaid CCP 5A-3 to allow 1 unit per member daily, with a maximum of 7 days.	Yes	TBD	COM0059166

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DME	TBD	Claims	<b>Durable medical equipment</b> The state's Encounter Processing System (EPS) was rejecting encounters submitted by Prepaid Health Plans (PHP). This caused claims for durable medical equipment (DME) to be denied.	Oct. 16, 2023	150	TBD	Open	The state of North Carolina notified PHPs on Dec. 13, 2023, that it updated its EPS to bypass National Drug Code business rules on DME encounters. Providers may resubmit DME claims from the billing or rendering provider that were previously denied and included National Drug Codes and the following taxonomy codes: <ul style="list-style-type: none"> <li>• 332B00000X</li> <li>• 332BC3200X</li> <li>• 332BD1200X</li> <li>• 332BN1400X</li> <li>• 332BP3500X</li> <li>• 332BX2000X</li> <li>• 332S00000X</li> </ul>	No	TBD	COM00042442

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Other	TBD	Other	<b>CMARC overpayments</b> Incorrect eligibility criteria for members of Care Management of At-Risk Children (CMARC) triggered overpayments to local health department providers.	Feb. 7 2024	36	TBD	Open	The state of North Carolina issued a Command Center ticket notifying us that local health departments were being overpaid. We confirmed that our system was using incorrect logic for CMARC program criteria for capitation payments. We're working to remediate the issue and develop a plan to support providers in the administrative process.	No	TBD	COM00054313

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DME	TBD	Other	<b>Non-covered code list</b> The state of North Carolina notified us through a command center ticket that health plans are required to comply with the Medical Assistance federal regulations for Medicaid durable medical equipment (DME)/point of sale (POS) programs, per section 42 CFR 440.70. The section also applies to managed care, except for paragraphs (f) and (g) regarding conditions of payment.	Feb. 13, 2024	30	TBD	Open	We're working to align our policies and procedures with the Medical Assistance Program, as directed by the North Carolina Department of Health and Human Services and its legal team.	No	TBD	COM00052407