

Known system issues tracker

UnitedHealthcare Community Plan of North Carolina

Updated April 10, 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	March 14, 2024	Closed	Updates to the UnitedHealthcare Provider Directory were completed on March 14, 2024.	Noa	March 14, 2024	COM0046462, COM0046159, COM0046905
DME	3	Claims	HCPC code E0202 HCPC code E0202 is allowing 1 unit per member versus 1 unit per day.	Jan. 5, 2024	18	Jan. 23, 2024	Closed	UnitedHealthcare has completed configuration of our claims system to align with North Carolina Medicaid CCP 5A-3.	Yes	Jan. 23, 2024	COM0059166

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DME	TBD	Claims	Durable medical equipment 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	177	March 19, 2024	Open	UnitedHealthcare completed the update and will pull a final report to identify provider impact.	No	TBD	COM00042442
Other	TBD	Other	CMARC overpayments Incorrect eligibility criteria for members of Care Management of At-Risk Children (CMARC) triggered overpayments to local health department providers.	Feb. 7 2024	47	March 25, 2024	Closed	We posted on our state news site communication to local health department providers regarding the CMARC overpayments.	No	March 25, 2024	COM00054313
DME	TBD	Other	Non-covered code list 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	Feb. 13, 2024	57	April 29, 2024	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. We continue to identify impacted providers.	No	TBD	COM00052407

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			(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.								
Other	TBD	Other	Provider flexibilities On Feb. 21, 2024, Change Healthcare experienced a cybersecurity issue. Once UnitedHealthcare became aware of the outside threat, and in the interest of protecting our partners and patients, immediate action was taken to disconnect Change Healthcare's systems to prevent further impact. UnitedHealth Group is making substantial progress in restoring service and providing health care professionals workarounds for claims submissions and payments.	Feb. 21, 2024	49	March 8, 2024	Open	UnitedHealthcare supports our provider network with the following flexibilities: 1. Waiving timely claims For all claims submitted on or after Feb. 21, 2024, UnitedHealthcare will waive timely filing for 60 calendar days. During that time, North Carolina Medicaid will monitor the situation and provide guidance on potentially extending the timely filing waiver. 2. Prescription prior authorization and payments Pharmacies that provided 30-day supplies or less of medicines to members of standard plans on a good faith basis can receive payments without risk of denial	No	March 8, 2024	INC0825885 PRB0045652

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								<p>due to prior authorization or point of sale requirements.</p> <p>3. Electronic claim submissions</p> <p>The Intelligent Electronic Data Interchange (iEDI) solution created by Optum enables providers to submit claims easily and securely. iEDI is separate from Change Healthcare and was not impacted by the cyberattack.</p> <p>4. Hardship funding advances for providers</p> <p>Optum launched a Temporary Funding Assistance Program on March 1, 2024, to help bridge the gap in short-term cash flow needs for eligible medical, dental and vision providers. There are no fees, interest or other costs associated with the advances and providers will have 30 days to return the funds after the claims process is fully resumed.</p>			