

Carolina ACCESS Primary Care Provider Information Screens in EIS (MP)

The MP screen allows the user to view information on practices participating in the Carolina ACCESS (CA) program. Screen 1 provides basic demographic information about the Carolina ACCESS practice. Screen 2 lists participating individual CA providers in the practice. The Notepad contains all other CA practice information, including enrollment restrictions, satellite office information, etc.

To Access Provider Information:

From the inquiry menu, enter MP in the SELECTION field and the provider's seven-digit provider number in the KEY field. Press enter.

From the MP screen, enter the CA practice's seven-digit provider number in the PROV # field and then press enter.

The MP screens include the following information:

Screen 1:

```
EJA939S1          NC DEPT OF HEALTH AND HUMAN SERVICES
EJA939           MANAGED CARE PROVIDER DATABASE

PROV #: 8902242    OLD PROV #:          MANAGED CARE CATEGORY: CACC
CAROLINA ACCESS IND: Y    NATIONAL PROVIDER IDENTIFIER: 1134467780
HOSPITAL PRIVILEGES: Y    OFFICE HOURS:
PVDR ADMN #:          AFTER HOURS CODE:

GROUP/INDIVIDUAL PROVIDER:
  LAST:          FIRST:          MI:          SPECIALTY
CODE: 16
SITE NAME/LOCATION:
  CLINIC: MT. AIRY OB-GYN CENTER, INC
  LINE-1: 510 S. SOUTH STREET          LINE-2:
  CITY: MOUNT AIRY          STATE: NC  ZIP CODE: 27030-0000
COUNTY: 86
  OFFICE PHONE: 336-786-4522  AFTER HOURS: 336-786-4522

COUNTIES BEING SERVED: 86 03 97 99 85
RESTRICTIONS: 15
PATIENT ASSIGNMENT: MAXIMUM: 00300    CURRENT: 00192
CA CONTACT PERSON: FIRST: GERALDINE    LAST: DRAUGHN    MI:
PARTICIPATION DTES: (MMDDCCYY) FROM: 04231997 THRU: 00000000 LAST CHG:
05262006

PF2/14=MENU  PF3/15=ADD PVDR  PF4/16=NOTEPAD  PF5/17=XREF
PF6/18=SCREEN2
```

Function Keys:

- **PF4-** Notepad
- **PF6-** Screen 2
- **PF2-** Return to Inquiry Menu

- **PROV #:** Practice's seven-digit CA provider number
- **OLD PROV #:** Practice's previous CA provider number, if any
- **MANAGED CARE CATEGORY:** **CACC** for Carolina ACCESS, **CCNC** for ACCESS II or ACCESS III

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November 2009

MA-3435 Figure 2a

- **CAROLINA ACCESS IND:** Indicator. Y for active CA practice, N for inactive/terminated practice.
- **NATIONAL PROVIDER IDENTIFIER:** Practice's ten-digit National Provider ID.
- **HOSPITAL PRIVILEGES:** Y for yes. All CA practices must either admit patients to the hospital or must have a formal arrangement for admission of their enrollees.
- **OFFICE HOURS:** This field is not currently used. All CA practices must be able to see patients a minimum of 30 office hours per week or be granted an exception to this requirement for participation.
- **PVDR ADMN #:** All ACCESS II and ACCESS III practices are linked to an administrative entity and that entity's Medicaid provider number is located in this field for all ACCESS II/III practices.
- **AFTER HOURS CODE:** This field is not used at this time. All CA practices must have after hours coverage in order to provide medical advice 24 hours per day.
- **GROUP/INDIVIDUAL PROVIDER:**
LAST: Individual CA provider's last name **FIRST:** Individual provider's first name **MI:** Individual provider's middle initial.
- **SPECIALTY CODE:** State code used for provider type.
- **SITE NAME/LOCATION:**
CLINIC: CA Practice Name
- **LINE-1, LINE-2, CITY, STATE ZIP:** Address where CA practice (or main site) is physically located.
- **COUNTY:** County in which practice is located. If practice is located out of state, then closest NC county.
- **OFFICE PHONE:** Daytime telephone number of CA practice.
- **AFTER HOURS:** After-hours telephone number of CA practice.
- **COUNTIES BEING SERVED:** CA practice has agreed to accept enrollees from these counties.
- **RESTRICTIONS:** CA practice enrollment is restricted per these codes. The following is the list of enrollment restrictions.
 - 01 No restriction
 - 02 Established patients only
 - 06 MPW only
 - 07 Nephrology patients only (in same or contiguous counties)
 - 08 Chronic infectious disease patients only (in same or contiguous counties)
 - 09 Oncology patients only (in same or contiguous counties)
 - 10 Established patients and siblings
 - 11 Newborn only
 - 14 Two track clinics; facilities serving two distinct populations
 - 15 Age restrictions—Refer to Notepad (PF4/16) on MP Screen in EIS
- **PATIENT ASSIGNMENT:**
MAXIMUM: Maximum number of enrollees CA practice will accept
CURRENT: Actual number of CA enrollees assigned to practice
- **CA CONTACT PERSON:** Person designated by the CA practice to answer questions regarding CA
- **PARTICIPATION DTES:**
FROM: Date CA practice began enrolling recipients
THRU: Date this CA provider number terminated

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MA-3435 Figure 2b

Screen 2:

| | | | |
|--------------------------|---------------------|--------------------------------------|--------------------|
| EJA939S2 | | NC DEPT OF HEALTH AND HUMAN SERVICES | |
| EJA939 | | MANAGED CARE PROVIDER DOCTORS | |
| PROVIDER NUMBER: 8902242 | | MANAGED CARE CATEGORY: CACC | |
| A/D/C | DOCTOR NAME | A/D/C | DOCTOR NAME |
| _ | JAMES G ARNOLD, MD | _ | KENNETH D GITT, MD |
| _ | DRUERY R DEVORE, MD | _ | MYRA C DOVE, MD |
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| PF4/16=NOTEPAD | PF5/17=SCRN1 | PF6/18=FRESH SCR2 | ENTER=UPDATE |
| ALL RECORDS DISPLAYED | | | |

Function Keys:

- **PF4-** Notepad
- **PF5-** Screen 1
- **PF6-** Fresh Screen 2
- **PROVIDER NUMBER:** Practice's seven-digit CA provider number (same as Screen 1)
- **MANAGED CARE CATEGORY:** **CACC** for Carolina ACCESS, **CCNC** for ACCESS II or ACCESS III (same as Screen 1)
- **DOCTOR NAME:** All individual CA providers participating within the CA practice are listed here, including names and abbreviated titles. These providers include physicians, doctors of osteopathy, nurse practitioners, physician assistants, and nurse midwives.

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Notepad screen:

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EJA939S3          NC DEPT OF HEALTH AND HUMAN SERVICES
EJA939           MANAGED CARE PROVIDER DATABASE

PROV #: 8902242    OLD PROV #:          MANAGED CARE CATEGORY: CACC
CAROLINA ACCESS IND: Y    NATIONAL PROVIDER IDENTIFIER:
1134467780
HOSPITAL PRIVILEGES: Y    OFFICE HOURS:

NOTES:
  NORTHERN HOSP OF SURRY CO          AGES 21 THRU 150 ONLY
                                       FEMALE ONLY

PF5/17=SCREEN1    PF6/18=SCREEN2    ENTER=UPDATE
```

Function Keys:

- **PF5-** Screen 1
 - **PF6-** Screen 2
-
- **PROV #:** Practice's seven-digit CA provider number (same as Screen 1 and Screen 2)
 - **OLD PROV #:** Practice's previous CA provider number, if any (same as Screen 1)
 - **MANAGED CARE CATEGORY:** **CACC** for Carolina ACCESS, **CCNC** for ACCESS II or ACCESS III (same as Screen 1 and Screen 2)
 - **CAROLINA ACCESS IND:** CA Indicator. Y for active CA practice, N for inactive/terminated practice (same as Screen 1)
 - **NATIONAL PROVIDER IDENTIFIER:** Practice's ten-digit National Provider ID (same as Screen 1)
 - **HOSPITAL PRIVILEGES:** Y for yes. All CA practices must either admit patients to the hospital or must have a formal arrangement for admission of their enrollees (same as Screen 1)
 - **OFFICE HOURS:** This field is not currently used. All CA practices must be able to see patients a minimum of 30 office hours per week or be granted an exception to this requirement for participation. (same as Screen 1)
 - **NOTES:** The following information may appear in this section of this screen:
 1. Detailed description of the CA practice's restrictions, including ages
 2. The hospital the CA practice uses for admitting CA enrollees
 3. If CA provider number has changed, the new number will be listed in this section.
 4. Satellite office information (other addresses and phone numbers of sites using the same CA provider number)
 5. Other practice site information (other addresses and phone numbers of sites using the same CA provider number)
 6. Other information for State use only

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