

Known Issues Tracker



Provider Type	Number of Impacted Providers	Category	Issue Description	Date Issue Discovered	Days Outstanding	Estimated Fix Date	Status	Resolution	Date Issue Resolved	Interest Owed?	Tech Opps/Incident Number
Medical	All	Claims	CCH identified issue with provider enrollment file load effecting claim received dates of 10/08/24 to 10/15/24. File error caused claims to erroneously deny for NPI/Taxonomy related EX/CARC/RARC codes.	10/31/24	98	02/06/25	Closed	Impacted claims have been reprocessed.	02/06/25	No	
Medical	338	Claims	Per NCDHHS Bulletin, cost share should be applied for COVID 19 treatments for members aged 21+ effective 10/01/2024. CCH is currently applying these co-pays for members 0-20.	11/06/24	82	02/06/25	Closed	System configuration logic is being updated. Claims impacted have been identified and will be reprocessed. No further action needed from providers at this time.	01/27/25	No	
Medical	90	Claims	Identified issue with EXCv (DENY/NDC NOT REBATABL BASED ON CMS LABELER FILE) denial. Procedure codes found in the Physician Drug Program PADP Catalog that are listed as not Requiring Rebate Labeler are denying EXCv in error.	12/10/24	65	02/12/25	Closed	System configuration logic has been updated. Claims impacted have been identified and will be reprocessed once the system fix is completed. No further action needed from providers at this time.	02/13/25	Yes	
Medical	19	Claims	CCH has identified an issue with FQHC/RHC claims which is causing claims billed with procedure code T1015 and a HI modifier to be rejected for "Please submit to Partners/Trillium for behavioral health processing"	12/19/24	33	01/24/24	Closed	System configuration logic is being updated. Impacted claims have been identified for reprocessing. No further action from providers is needed at this time.	01/22/25	TBD	
Behavioral Health	TBD	Claims	An issue was identified where Behavioral Health claims submitted to the Behavioral Health system are invalidly denying for 1377-Please submit to CCH Tailored Plan Physical Health for processing per BH v PH guidelines from the Department	12/03/24	134	04/24/25	Open	System configuration logic is being updated. Once updated, impacted claims will be reprocessed. No further action from providers is needed at this time. 1/31/2025: Update to estimated fix date 2/21/2025: Update to estimated fix date		TBD	
Behavioral Health	1	Claims	An issue identified in the Behavioral Health system where paper claims submitted with COB information are processing incorrectly	12/09/24	79	02/28/25	Closed	System issue being reviewed for correction, no further action needed from providers at this time 1/31/2025: Update to estimated fix date 2/26/2025: After further review the issue was determined not to be a processing issue, impacted provider received Technical Assistance	02/26/25	No	
Behavioral Health	TBD	Claims	An issue was identified in the Behavioral Health System where institutional claims are denying for Invalid Units	10/24/24	174	05/29/25	Open	System configuration logic is being updated, no further action needed from providers at this time		TBD	
Medical	126	Claims	DHHS issued guidance on "Behavioral Health – Physical Health Claim Definition to Health Plans" effective 10/01/24, initially stating that procedure codes 96110, 96105 (developmental screening) 96121, 96127 (behavioral screening) and 96146 (psychological screening) were exclusive to behavioral health. As a result, these codes were being denied because they were processed as behavioral health services under the Tailored Plan, rather than as standard screenings in pediatric primary care. However, after further review and inquiries to DHHS, updated guidance clarified that these procedure codes are actually shared between physical and behavioral health and can be reimbursed under either benefit.	01/22/25	43	03/24/25	Closed	The affected codes were removed from the BH-exclusive list in accordance with NCDHHS Tailored Plans BH vs PH Definition logic. System configuration is complete, and all impacted claims have been reprocessed.	03/06/25	Yes	

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55	Behavioral Health	TBD	Claims	An issue was identified in the Behavioral Health System where the billing taxonomy submitted on 837 files is not populating correctly and is leading to invalid denials	01/31/25	75	04/24/25	Open	System configuration logic is being reviewed and updated, no further action needed from providers at this time		TBD	
56	Medical	269	Claims	Tailored Plans implemented the APM-PPS Wrap payment methodology effective 12/1/2024, but the legacy FQHC-RHC fee schedules had an end date of 7/31/2024. As a result, claims from 8/1/2024 to 11/30/2024 were either denied or reimbursed incorrectly. These claims need to be reprocessed with the archived fee schedules updated to end on 11/30/2024.	02/04/25	44	03/27/25	Closed	Configuration updates completed. All impacted claims with dates of service from 8/1/2024 to 11/30/2024, have been reprocessed.	03/20/25	Yes	
57	Medical	268	Claims	Identified issue with provider enrollment file load affecting claims adjudicated on 1/27/2025. Load error caused claims to erroneously deny EXGP: SERVICE FACILITY NPI NOT ON MEDICAID.	01/30/25	42	03/20/25	Closed	Impacted claims have been reprocessed.	03/13/25	No	
58	Behavioral Health	TBD	Claims	An issue was identified in the Behavioral Health processing system due to a taxonomy to service code table needing to be updated resulting in invalid approvals and/or denials.	02/11/25	64	04/24/25	Open	The taxonomy code was not mapped to the Tailored Plan benefit adjudication logic for Tailored Plan claims. System configuration logic has been updated. Claims impacted have been identified and will be reprocessed. No further action needed from providers at this time.		TBD	
59	Behavioral Health	TBD	Claims Finance	Issue identified impacting subcapitated ICF providers where the providers profile was not marked in a checkbox field as subcapitated causing claim denials, providers paid via subcapitation agreement, however a denial will show on the Remittance Advice	02/26/25	37	06/26/25	Closed	Subcapitation issue has been resolved all impacted claims were reprocessed.	04/04/25	No	
60	Behavioral Health	TBD	Claims	An issue was identified in the processing of PMPM HOP claims resulting in an invalid unit denial. The current system edit is paying on the first date of service and denying the additional DOS.	10/31/24	167	04/24/25	Ongoing	A manual workaround was created while the issue is being fixed		TBD	
61	Behavioral Health Medical	TBD	Claims	Identified gaps within the hierarchy logic associated with Behavioral Health/Physical Health Claims routing that caused Trillium Claims to inappropriately pay lines when they should have been rejected to submit to Trillium for behavioral Health Processing.	01/27/25	79	04/17/25	Open	Corrections to rejection hierarchy logic were deployed on 03.20.25. We are in process of performing claims analysis and will send recovery notification letters to impacted providers.		TBD	
62	Medical	TBD	Claims	On January 27, 2025, Local Health Department (LHD) fee schedules rates were updated. Due to a technical issue, the fee schedule rates were misaligned with their respective procedure code. As a result, incorrect rates were paid on claims with a date of service 01/01/25 or after and processed between 01/27/25 through 02/11/2025. On 2/11/2025, the fee schedule rates were corrected in the system and all claims were reprocessed. We are in process of performing an analysis on impacted providers and will perform outreach related to any recoveries.	02/14/25	27	03/13/25	Closed	Configuration has been updated. All impacted claims have been reprocessed.	03/13/25	TBD	
63	Behavioral Health	TBD	Finance	Issue identified where fully approved claims are only partially paying on specific claims lines	03/21/25	12	04/21/25	Closed	System configuration logic has been updated. All impacted claims have been reprocessed	04/02/25	TBD	

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64	Behavioral Health	TBD	Claims	Trillium Behavioral Health Claim System is experiencing a delay in the claims adjudication process, which will result in providers not seeing the claims status report in the provider portal. This is also delaying the RA's and 835's being posted in the portal.	04/02/25	15	04/07/25	Closed	System configuration logic has been updated.	04/17/25	No	
65	Medical	TBD	Claims	An issue was identified in the processing of PMPM HOP claims resulting in an invalid unit denial. The current system edit is paying on the first date of service and denying the additional DOS.	03/21/25	26	04/24/25	Open	System Configuration updates in process. Once complete, all impacted claims will be reprocessed.		TBD	
66	Medical	6	Claims	Increase with EXBG: DENY:	03/21/25	26	05/01/25	Open	System Configuration updates		Yes	
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68												
69												