

Core Administrative System Implementation Updates Frequently Asked Questions (FAQs)

As [previously communicated](#), CarePartners of Connecticut continues to make progress on the migration to a new core administrative system to support claims processing. The migration's implementation is targeted for Q2 2021. The below FAQs are intended to supply providers contracting with CarePartners of Connecticut with detailed information regarding the changes on the new core administrative system.

Will I be able to view all products on one EOP and one 835?

Current state, providers receive separate EOPs and 835s for the CarePartners of Connecticut HMO and PPO products. This will continue for claims that have dates of service (DOS) prior to the implementation date. For claims with a DOS after the implementation date, the EOPs and 835s will be combined for the HMO and PPO products. For example, in each check run, a provider has claims with both pre- and post-implementation DOS and sees members for both HMO and PPO products. The provider could expect to receive three sets of EOPs and three sets of 835s:

- Separate files for the pre-implementation DOS claims where one file would be HMO products and the other would be PPO products.
- Separate file for post-implementation claims that contained both HMO and PPO products.

Will I still see pending claims (in process and held) on my EOPs?

Current state, providers see pending claims (in process and held) on their EOPs. This will continue for claims with DOS prior to the implementation date. For claims with DOS post-implementation, pending claims will no longer appear on providers' EOPs.

How can I see if a claim is pending after the implementation?

Post-implementation, providers can log in to the secure Provider [portal](#) and use the Claims Status Inquiry tool to see if a claim is pending.

I am not registered for the secure Provider portal. How do I register?

Providers can register for the secure Provider portal [here](#).

Will claim adjustment reason pay codes change?

Currently on accounting adjustment lines (reversal and void), the "Pay Code" column on the EOP displays the CarePartners of Connecticut pay code (e.g., FEESC). For claims with DOS on or after the implementation date, the adjustment reason in the "Pay Code" column will always be populated with "ADJST."

Will credit balance applied and refunds/recoupments change?

For claims with DOS on or after the implementation date, the following changes will be seen:

- **EOP:** An adjustment line will be provided on the EOP when an outstanding credit balance amount has been applied to a payable claim in order to account for the reduction in the overall check amount. In addition, an adjustment line will be provided on the EOP when a refund has already been received from a provider on a previously paid claim that is being retracted. These adjustment lines will allow providers to balance claim totals against the actual check amount in the EOP.
- **835:** The refund and credit balance applied amounts will be reflected in the 835 in the 'Provider Adjustment Segment' (PLB). The refund will be sent as a 'WO' adjustment, and the credit balance applied amount will be accounted in the 'Forward Balance' (FB) as a credit balance applied amount accounting against any remaining FB, if any. Providers will be able to establish their outstanding balance by tracking and totaling the FB amount in the PLB as it will reflect credits and debits applied to their balance.

What if I have additional questions?

For any other questions regarding the system implementation, call Provider Services at 888.341.1508.

Why am I seeing a negative value in the Payment Amount field of my EOP?

The new claims processing system has increased functionality. If a provider is in deficit for a weekly check run period for claims processed on the new system the Payment Amount field on the Check Page of the EOP will show as a negative value. Possible reasons for going into deficit could include claims reversal or voids.

The provider may return to a positive balance as soon as new claims are processed on the new system. For questions or if you want to reimburse CarePartners of Connecticut, call Provider Services at 888.341.1508.