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Network Communication Bulletin #290

To: All Providers

From: Kristine Brewington, MS, LCMHCS, LCAS, CCS, CCJP
VP of Network Management

Date: March 15, 2023

Subject: NC Health Choice Integrating into NC Medicaid, EVV Soft Launch Schedule/Updates, Provider Reverification Process Update, Upcoming Assistive Technology Pop Up Events, Parents as Collaborative Leaders (PACL) Training, Recruitment Opportunity Announcements: Open Enrollment for Child Treatment Providers, RFI: Trillium Juvenile Justice Psychological Assessment and Evaluation Network, Open Enrollment Announcement: Respite, Victory Junction Spring Dates!, Disaster Planning, Need to Report Fraud, Waste, and Abuse?

NC HEALTH CHOICE INTEGRATING INTO NC MEDICAID

 [NC Health Choice Integrating into NC Medicaid](#)

North Carolina Session Law 2022-74 directs the NC Department of Health and Human Services to combine the NC Health Choice Program with the NC Medicaid benefit plan. As of April 1, 2023, all NC Health Choice beneficiaries with active eligibility will be moved to Medicaid, providing them access to Medicaid services that are not currently covered under NC Health Choice. Additional benefits include enhanced behavioral health services, Early Periodic Screening, Diagnosis and Treatment (EPSDT) services, and non-emergency medical transportation (NEMT). Once children in NC Health Choice are enrolled in Medicaid, they will no longer be subject to cost sharing

EVV SOFT LAUNCH SCHEDULE/UPDATES

 [Electronic Visit Verification Updates March-13-2023](#)

HOME HEALTH CARE SERVICES SOFT LAUNCH APRIL 1, 2023, THROUGH JUNE 30, 2023

Starting April 1, 2023, the North Carolina Department of Health and Human Services (NCDHHS) will implement a **soft launch** of the Electronic Visit Verification (EVV) system for Home Health Care Services (HHCS) rendered under both the Standard Plans and NC Medicaid Direct. **EVV will verify:**

Member & Recipient Services - 877.685.2415

Business & Administrative Matters - 866.998.2597

TrilliumHealthResources.org



- 🌱 Date of service
- 🌱 Beneficiary receiving services
- 🌱 Location of service
- 🌱 Individual providing service
- 🌱 Type of service rendered
- 🌱 Time the service begins and ends

Services covered through the State Plan and the 3-A Home Health Clinical Coverage Policy that will be subject to the EVV requirement:

- 🌱 Aide Services
- 🌱 Physical Therapy
- 🌱 Speech Therapy
- 🌱 Occupational Therapy
- 🌱 Skilled Nursing Visits

During this soft launch period beginning April 1, 2023:

- 🌱 Home Health Care providers will submit EVV information
- 🌱 The EVV program will operate as “Pay and Report”
- 🌱 Claims will not pend based on failed validation. If a claim fails validation, a report will be generated noting the validation issue and the provider will be allowed to receive payment.

A hard launch will begin July 1, 2023. On this date:

- 🌱 All Home Health Care providers are expected to be fully compliant with EVV requirements
- 🌱 EVV data must be validated prior to claims adjudication
- 🌱 Claims without the required EVV criteria will deny

Revenue Codes and Services for Claims Subject to EVV:

REVENUE CODE	SERVICE
THERAPIES	
420	Physical therapy
424	Physical therapy evaluation
430	Occupational therapy
434	Occupational therapy evaluation
440	Speech-language pathology services
444	Speech-language pathology services evaluation
SKILLED NURSING VISITS	
550	Skilled nursing: Initial assessment/re-assessment (Initial assessment of a new patient or 60-calendar-day re-assessment)
551	Skilled nursing: Treatment, teaching/training, observation/evaluation

559	Skilled nursing: For a dually eligible beneficiary when the visit does not meet Medicare criteria (for example, the beneficiary is not homebound)
580	Skilled nursing: venipuncture
581	Skilled nursing: Pre-filling insulin syringes/Medi-Planners
HOME HEALTH AIDE	
570	Home Health Aide

HOME HEALTH CARE SERVICES PROVIDER SELECTION OF ELECTRONIC VISIT VERIFICATION VENDOR

Home Health Care Service providers rendering Home Health Care Services (HHCS) subject to electronic visit verification (EVV) are required to utilize an EVV to capture HHCS visits.

This requirement includes providers who render HHCS under both NC Medicaid Managed Care and NC Medicaid Direct.

Each Medicaid payer type has a free EVV solution a provider can use. For providers rendering services to beneficiaries under:

- 🌱 **NC Medicaid Direct**, Sandata is the free solution.
- 🌱 Standard Plans (except for Healthy Blue) HHAeXchange is the free solution.
- 🌱 Healthy Blue, CareBridge is the free solution.

Home Health EVV soft launch is scheduled for April 1, 2023, for both Standard Plans and NC Medicaid Direct.

- 🌱 Providers rendering HHCS subject to EVV under NC Medicaid Direct must be registered with Sandata to use their free EVV solution or select an alternate EVV solution.
- 🌱 The selected alternate EVV solution vendor must be registered with Sandata and complete the required Sandata EVV training and testing.

NC Medicaid requested that all providers select an alternate EVV vendor by Nov. 1, 2022; however, there are providers who have yet to make a selection. **It is imperative that provider agencies delivering HHCS subject to EVV under NC Medicaid Direct and planning to use Sandata, the State's free EVV solution, register with Sandata immediately.**

NC Medicaid Direct

Those provider agencies delivering HHCS subject to EVV under NC Medicaid Direct that will not be using the State's EVV solution should contact their alternate EVV solution vendor

as soon as possible to ensure the vendor is registered and has completed all required Sandata EVV training and testing no later than March 20, 2023.

- 🌱 Any provider agency planning to deliver HHCS subject to EVV under NC Medicaid Direct that has not registered with Sandata or that has not selected an alternate EVV solution by March 20, 2023, will be required to enroll with Sandata for the initial April 1, 2023, Home Health EVV soft launch.
- 🌱 After the April 1, 2023, launch, a change to an Alternate EVV solution can be made.
- 🌱 HHCS providers are to ensure there is no disruption in visit capture during the transition to an alternative EVV solution.

Standard Plans

Home Health Care Service providers rendering HHCS under a Standard Plan should contact either HHAeXchange or CareBridge as applicable to obtain information about registering to use their free EVV solution or for registration and testing information for their selected alternate EVV solution vendor. Contact information is below.

Sandata

- | | |
|---|---|
| 🌱 Sandata Customer Support Team
NCCustomerCare@Sandata.com
855-940-4915 | 🌱 Alternate EVV Support
NCAltEVV@Sandata.com
844-289-4246 |
|---|---|

HHAeXchange

- 🌱 CustomerSupport:
www.hhaexchange.com/contact
855-400-4429

CareBridge

- | | |
|--|--|
| 🌱 Customer Support
ncevv@carebridgehealth.com
855-782-5976 | 🌱 Third-Party EVV Solutions Integrated with CareBridge
evvintegrationsupport@carebridgehealth.com
844-920-0989 |
|--|--|

NC Medicaid

- 🌱 Medicaid.evv@dhhs.nc.gov

PROVIDER REVERIFICATION PROCESS UPDATE

- 🌱 [Provider Reverification Process Update March-9-2023](#)

Providers for whom reverification was delayed are being organized into groups to ensure reverification is completed by Nov. 11, 2023.

The federal Public Health Emergency (PHE) is expected to end on May 11, 2023. The Centers for Medicare and Medicaid Services (CMS) allows all providers whose reverification was delayed due to the federal PHE six months, until Nov. 11, 2023, to complete reverification.

Once the federal PHE ends on May 11, 2023, reverification is not optional. Providers for whom reverification was delayed are being organized into groups to ensure the reverification process is completed by Nov. 11, 2023.

To avoid a potential increased administrative burden, and to benefit from the \$100 NC Application Fee Waiver which expires June 30, 2023, providers in receipt of the Voluntary Reverification Program notification are encouraged to take advantage of this unique time-limited opportunity.

- 🌱 Notifications to impacted providers will be distributed through March 31, 2023.
- 🌱 Providers will have 30 days to respond.
- 🌱 No adverse action will occur if a provider chooses to not submit the voluntary reverification application. However, if the application is submitted, the provider must follow through to completion to avoid any delays or adverse action.
- 🌱 Providers who participated in the Voluntary Reverification Program will not need to repeat the process after the Federal PHE ends.

Providers should monitor their secure NCTracks Message Inbox for notifications and the Re-verification section of their NCTracks Status and Management page for the option to reverify.

For help with the reverification process, providers can refer to the [Provider Re-credentialing/Re-verification webpage](#) in the NCTracks public facing portal. Providers are also encouraged to review Provider Announcements, User Guides and Frequently Asked Questions.

HOME HEALTH CARE SERVICES RATE INCREASE

🌱 [Home Health Care Services Rate Increase](#)

The rates for HHCS shall be increased by 10% above the current fee schedule rate.

NC Medicaid will implement Electronic Visit Verification (EVV) for Home Health Care Services (HHCS) as required by the 21st Century Cures Act on April 1, 2023, for HHCS delivered under the Standard Plans and NC Medicaid Direct. The implementation date of HHCS delivered under the Behavioral Health and Intellectual/Developmental Disabilities Tailored Plans will occur on a later date due to the delay of the Tailored Plan launch.

To ensure full compliance with this mandate and to compensate for the administrative oversight of capturing the six required EVV data points for HHCS subject to EVV, the rates for HHCS shall be increased by 10% above the current fee schedule rate.

The new rates will be retroactive to Feb. 1, 2023. Impacted providers do not need to make any changes to their previously submitted claims - affected claims will be systematically reprocessed.

The 10% increased unit rate applies to the HHCS noted below.

REVENUE CODE	SERVICE
THERAPIES	
420	Physical therapy
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HOME HEALTH AIDE	
570	Home Health Aide

BILLING REQUIREMENT MODIFICATIONS

[Billing Requirement Modifications Effective May-12-2023](#)

Beginning with date of service May 12, 2023, NC Medicaid will end temporary emergency flexibilities implemented for three claims processing edits.

The federal Public Health Emergency (PHE) is expected to end on May 11, 2023. At that time, NC Medicaid will return to pre-pandemic policies related to the claim edits referenced below.

Providers were notified in March 2020 that the claims edit disposition of pay and report was a temporary change due to the COVID-19 pandemic. **Beginning with date of service May 12, 2023, NC Medicaid will end the temporary emergency flexibilities implemented for the disposition of three claims processing edits.** The affected edits include:

- 🌱 Edits **02437** and **02425** – “Service Facility Provider Invalid or Not Active on Dates of Service” and “Service Facility Provider Invalid or Not Active on Dates of Service. QMB Recipient” was changed to “pay and report,” effective with date of processing March 13, 2020.
 - These edits were relaxed during the pandemic to permit any individual practitioner to deliver services at locations not enrolled in NC Medicaid.
 - Service Facility NPI validation will be required with the expiration of the federal PHE.
 - The “pay and report” will be set to “deny.”
- 🌱 Edit **07025** – “Rendering Provider Not Affiliated with Billing Provider” was changed to “pay and report,” effective with date of processing March 13, 2020.
 - This edit was relaxed during the pandemic to permit any group to bill on behalf of an individual provider delivering services at another location/group.
 - The requirement for an individual provider to affiliate with a billing organization will be required upon expiration of the federal PHE.
 - The “pay and report” will be set to “deny.”

Providers are reminded to visit the [NC Medicaid COVID-19 Guidance and Resources webpage](#) for the latest updates to ensure services may continue to be delivered without interruption.

2022 MEDICAID PROVIDER EXPERIENCE SURVEY REPORT RELEASED

🌱 [2022 Medicaid Provider Experience Survey Report Released](#)

This report describes findings from the second assessment of provider experience and satisfaction with the NC Medicaid program.

To evaluate the influence of NC Medicaid Managed Care on primary care and obstetrics/gynecology (Ob/Gyn) practices that contract with NC Medicaid, the North Carolina Provider Experience Survey was developed and administered across all North Carolina primary care practices or their corporate parent.

This report describes findings from the second assessment of provider experience and satisfaction with the NC Medicaid program, which was conducted April to June 2022. This

year's report represents providers' experiences with the Prepaid Health Plans (PHPs) in the first year of NC Medicaid Managed Care and allows for comparisons against last year's pre-managed care, fee-for-service baseline.

Providers were asked about contracting with PHPs, the overall perceived effect of PHPs on care delivery, and their experience with PHPs on clinical and administrative factors. The survey also asked providers about their approach to integrating behavioral health care and their plans regarding contracting with Tailored Plans.

Stratified analyses were conducted to draw comparisons between rural and non-rural provider groups; small, medium and large provider groups; and groups delivering obstetrics and gynecology versus those who only provide primary care.

The survey was implemented by the Sheps Center for Health Services Research. [The full report](#) and [two-page summary](#) are available on the [NC Medicaid Quality Management and Improvement webpage](#).

Key Findings

- 🌱 All five PHPs had high rates of contracting with providers. Rates of contracting with each of the PHPs ranged from 73.3% to 94.5%, and provider organizations contracted with an average of 4.3 plans.
- 🌱 There were small but meaningful differences in provider experience with PHPs compared with provider experience with NC Medicaid Direct prior to the transition:
 - PHPs performed better than NC Medicaid Direct on access to behavioral health prescribers and therapists. Despite this, for a second year in a row, access to behavioral health providers was rated substantially lower than all other domains.
 - PHPs performed worse than NC Medicaid Direct on timely claims processing and overall provider relations.
- 🌱 There were not meaningful differences between PHPs on performance domains. Providers rated their experience with PHPs on administrative factors (e.g., claims processing) slightly better than clinical factors (e.g., network adequacy).
- 🌱 Large provider organizations rated their experience with PHPs worse than smaller provider organizations. There was no difference in experience between rural and non-rural providers.

Summary

Overall, PHPs performed similarly to NC Medicaid Direct when comparing provider experiences to the baseline survey performed prior to the launch of Standard Plans. PHPs

have established an Administrative Simplification Workgroup that aims to improve providers' experience with managed care.

Additional investigation of issues and opportunities for improvement will be carried out with other data collection methods under the waiver evaluation and will include focus groups, interviews, claims and other clinical and administrative data analyses. For more information about quality improvement, please see the [NC Medicaid Quality Management and Improvement webpage](#).

UPCOMING ASSISTIVE TECHNOLOGY POP UP EVENTS

Upcoming Assistive Technology (AT) Pop Up events (open to the public) on Accessible Recreation and Gaming.

🌱 March 25 in Winston-Salem

🌱 May 19 in Sanford

🌱 April 21 in Wilmington

[Registration info HERE](#)

Check out the [NCATP Events page](#) for more info.

PARENTS AS COLLABORATIVE LEADERS (PACL) TRAINING

Trillium will be hosting the Parents as Collaborative Leaders (PACL) Training on February 16, 2023 and March 16, 2023. The time for both trainings is 10:00am-11:30am. This is in collaboration with the State. We are having Module 3 and Module 4 again because of low attendance when we first offered these trainings. These trainings are for parents/caregivers and advocates of our members. Below is a link to the flyer. The flyer includes the registration links and those links are listed below as well for your convenience.

Module 4: Stages of Group Development will be held on March 16, 2023

🌱 [Register for this Module](#)

DESCRIPTION OF THE TRAINING: The Whole Child Health Section of the N.C. Child Division of Child & Family Well-Being has assembled a group of parent leaders and trained them to facilitate the nationally recognized, research-based curriculum, Parents as Collaborative Leaders.

These parents are passionate about teaching others who have children with a variety of special healthcare needs and/or developmental concerns to become effective leaders in their communities, at the state level, and at the national level.

These trainings have been used to support parents and caregivers being more active and confident at the table in a variety of educational, medical, and community settings. These trainings are offered at no cost.

 [More information and registration links](#)

RECRUITMENT OPPORTUNITY ANNOUNCEMENTS

OPEN ENROLLMENT FOR CHILD TREATMENT PROVIDERS

Trillium, as a partner in the *NC Child and Family Improvement Initiative*, is developing a statewide network of child treatment providers to ensure that children and families engaged with DSS have continuity of care without delay or interruption when moving from one area of North Carolina to another. Trillium currently has providers located throughout NC to best meet the needs of its members, especially members who are children engaged with DSS for foster care programs, kinship placement, or adoption.

Effective 7-25-22 Trillium will expand its existing statewide Network through an *Open Enrollment for Child Treatment Providers* statewide to ensure that children and adolescents have access to the services they need across NC.

Providers must be enrolled and credentialed with NC Tracks for NC Medicaid and meet service eligibility requirements, including licensure and accreditation, when applicable. To clarify, providers must have any applicable license in place prior to application in order to qualify for the recruitment opportunity.

Open enrollment will close on March 31, 2023.

Please visit the Trillium Health Resources [Recruitment Opportunities](#) webpage to learn more.

RFI ANNOUNCEMENT: TRILLIUM JUVENILE JUSTICE PSYCHOLOGICAL ASSESSMENT AND EVALUATION NETWORK

Trillium Health Resources is the LME/MCO for individuals with substance use, mental illness, and intellectual/developmental disabilities in 28 counties in eastern NC. Trillium's mission is transforming lives and building community well-being through partnership and proven solutions.

We help every community and individual we serve to reach their fullest potential. By coordinating care across multiple systems, we achieve improved health outcomes, quality of care, and efficient use of resources. Trillium remains focused on delivering the right services, in the right amount, at the right time.

Trillium Health Resources is developing a Network for the independent assessment and evaluation of justice involved youth.

We are inviting local licensed psychologist to conduct comprehensive clinical evaluations including when needed psychological testing for youth ages 6-17 years old that are referred from juvenile court services. This request seeks to address gaps in care for youth being referred. Trillium's goal is for this population to have access to a valid, reliable and comprehensive evaluation to determine the best services for these youth given appropriate diagnoses, treatment and placement recommendations. Flexibility and timely responsiveness in scheduling appointments and completion of documentation and reports are both essential. Duties include completing comprehensive clinical evaluations, consulting with juvenile court counseling staff, school staff, psychiatrists, social services, and other agencies as needed, attending required meetings and trainings, writing reports, and providing emergency risk assessments for youth who are being seen at the Division of Juvenile Justice office to determine if that youth poses a safety threat to themselves or others. Applications will be considered from NC Licensed Psychologists (LP) and Licensed Psychological Associates (LPA). Trillium intends to work with Psychologist to cover all costs associated with this work.

Priority Consideration: Overall the rate of referrals to juvenile court and suspensions from school have declined over recent years, however the disparity between minority and nonminority referrals and suspensions has largely remained unchanged, evidencing multi-systemic problems with disproportionate minority contacts, juvenile court referrals and school suspensions. To that end, Trillium Health Resources is particularly interested in providers that seek to work with the population of youth and the adults having authority over them in the home, school and community environments who are disproportionately impacted by involvement across multiple agencies. The willingness to provide services onsite or in close proximity to the county juvenile justice services office location is preferred.

Application Submission Requirements: Psychologist and Licensed Psychological Associates interested in this work please email Cindy Ehlers at Cindy.Ehlers@TrilliumNC.org for this recruitment and put RFI for Psychologist in the subject line.

OPEN ENROLLMENT ANNOUNCEMENT: RESPITE

Trillium Health Resources (Trillium) is seeking to identify mission-driven organizations that are interested in providing [Respite Services for Children/Adolescents](#).

This open recruitment applies to both in-network and out-of-network providers enrolled in NC Tracks who are free of contract sanctions, fraud investigations, and/or current or previous IRS liens. More than one provider may be selected.

This recruitment is being used as a means to expand the network of Respite Providers that are capable of providing these services to Trillium Members who are also involved with the Department of Social Services.

This recruitment should not be interpreted as a contract (implicit, explicit, or implied), nor does it imply any form of an agreement to any potential candidate. In addition, no inference should be made that Trillium will purchase and/or implement in the future any of the programs or services proposed by the respondents.



Interested Providers should submit an application to the link below:

 [Application for Respite](#)

Questions? Please submit here: [Questions Link](#)

VICTORY JUNCTION SPRING DATES!

NEW DATES FOR SPRING 2023

-  March 31 – April 2, 2023 |
Application Deadline: **Friday, March 17, 2023**
-  April 21 - 23, 2023 |
Application Deadline: **Friday April 7, 2023**



Get ready—the newest session for **Trillium Family Weekend** at Victory Junction is here! We hope our members and families will all take advantage of the inclusive environment and diverse amenities that camp has to offer and join us on a family retreat this spring in Randleman, NC. Programming provides a unique experience for families to connect.

Children of every ability can feel fully **empowered** and try activities adapted for every need. Victory Junction's amazing staff and volunteers are familiar with hosting Trillium families and even special diets are accommodated. There is no cost to attend.

Open to all Trillium members and their families or natural supports, regardless of age or diagnosis.


Come experience the magic of camp with us! Spots are limited! Sign the [SPRING 2023 INTEREST FORM](#) today for a referral to receive a link to apply OR [check out the flyer](#) on our [Trillium Family Weekend Webpage](#) to learn about the application process!

Covid-19 Statement: For the safety of all individuals on-site, all Victory Junction staff & volunteers will be fully vaccinated against COVID-19 during Trillium Family Weekends. Victory Junction highly recommends proof of a COVID-19 vaccination for each person attending in your party who are ages 5 and up who will be on-site during Trillium Family Spring Retreat Weekends, but proof of the COVID-19 vaccination is optional. Self-pre-testing & reporting will be required for all (within 48 hours of check-in). Arrival day testing (performed by VJ Medical team) will be required for all participants. Masks are required for all participants during indoor activities.

Want to stay in the loop about future Family Retreat Dates?

Visit the ["Trillium Health Resources"](#) and ["Trillium Direct Connect For Enrichment"](#) Facebook pages, and the ["Victory Junction"](#) page on our website for the most up-to-date announcements!

Funding made possible by
Trillium Health Resources



DISASTER PLANNING

As we approach the prime season for hurricanes and flooding disasters, we are sending out this reminder that disaster plans need to be reviewed and updated, staff trained/re-trained, and contingency and communication plans developed.



For 2023 disaster plan submission you will go to a link to share your 2023 Disaster Plan and important contact information.

This requested information includes:

- ♻️ Contact information for your designated "Disaster Point of Contact"
- ♻️ Corporate site address and facility phone number
- ♻️ Any residential sites currently in your contract (address, phone numbers)

Please note, you will need to enter each site as a separate submission. Disaster plans must be submitted through the following link: [2023 Disaster Plan Submission](#)

Disaster Plans are due ***no later than May 1, 2023***. If no updates are needed to your 2023 Disaster Plan, you ***MUST*** still resubmit the plan with a new cover page displaying the current

year and disaster contact info. Failure to submit your Disaster Plan for 2023 by the deadline (May 1, 2023), may result in an audit and/or plan of correction.

The Federal Center for Medicare and Medicaid Services (CMS) posted guideline requirements for all entities that receive Medicaid funds and this applies to all of our Medicaid providers. For your reference, we have attached the Final Rule that will assist you in locating the requirements to the federal rules that apply to each of your situations.

Our contract with providers requires that you have an adequate disaster planning and training process in place within your organization. While it is our desire that no one has to contend with all that a hurricane or flood brings, the reality is that eastern North Carolina has dealt with its fair share of these kinds of disasters in the past.

Living in this part of North Carolina, we know that the best way to cope when a disaster strikes is preparation. Please connect with your local emergency management services, know your local resources, and stay connected with Trillium in the event of an emergency. In addition, Trillium has a list of disaster preparedness resources listed on the [Community Crisis and Disaster Response webpage](#).

 [Final Rule](#)

NEED TO REPORT FRAUD, WASTE AND ABUSE?

EthicsPoint is a secure and confidential system available 24 hours a day, 7 days a week for reporting suspected violations of fraud, abuse and confidentiality breaches. You can access EthicsPoint through website submission at [EthicsPoint - Trillium Health Resources](#) or by calling toll free 1-855-659-7660.

Any questions about this Communication Bulletin *that does not already have an email listed for questions from that specific section*, may be sent to the following email: NetworkManagement@TrilliumNC.org. These questions will be answered in a Q&A format and published on Trillium's website.