

To: All Providers

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

Date: June 5, 2024

Subject: Authorizations and Claims Submission for Tailored Plan Launch on July 1, 2024, Submission of Paper Claims, Setting the Foundation: LGBTQ+ Inclusion for Child Welfare Professionals, Tailored Plan Provider Informational Sessions, Trillium In-Person Town Hall Opportunities, Behavioral Health Screening Programs, IDD Providers: National Core Indicators™ State of the Workforce Survey Available, Take Pride in Your Health Trillium Health Summit, Request for Proposal Announcements, Attention State Funded Providers, Providers Using Third-Party Billing Agencies, Tailored Plan/Medicaid Direct Split Claims, Attention Providers Using Provider Direct, Health Plan Billing Guide, Change of Email Address for Provider Invoices, New Functionality –EDI 277, Update to NCTracks: Re-verification Terminations, Updated Provider Fact Sheets, Tobacco-Related Policy Requirements, Unlicensed Alternative Family Living and Overnight Respite Requests, Roadmap2Ready Disaster Planning, Need to Report Fraud, Waste, and Abuse?

AUTHORIZATIONS AND CLAIMS SUBMISSION FOR TAILORED PLAN LAUNCH ON JULY 1, 2024

Trillium's Authorization and Claims Submission Protocol for Tailored Plan (July 1, 2024 forward) mirrors the current Authorization and Claims submission for Medicaid Direct claims submission process for our providers.

For all members that transition to Tailored Plan July 1, 2024, providers will

- 🌱 Submit physical health authorizations (if required) and the claims to our partner, Carolina Complete Health.
- 🌱 Submit the behavioral health, I/DD, and TBI authorizations (if required) and the claim to Trillium.

For all members that remain in or transition to Medicaid Direct July 1, 2024, providers will

- 🌱 Continue to submit the physical health authorizations (if required) and claims to NCTracks via NC Medicaid.
- 🌱 Continue to submit the behavioral health, I/DD, and TBI authorizations (if required) and claims to Trillium.

Please see us this link or visit our website for the full [Claims Submission Protocol](#) for Tailored Plans.

SUBMISSION OF PAPER CLAIMS

Contracted Providers are contractually required to submit their claims electronically via HIPAA Transaction Files or can be entered via direct data entry into the appropriate provider portal.

Non-contracted providers who wish to submit a paper claim can mail their claims to the address below:

Trillium Health Resources
PO Box 240909
Apple Valley, MN 55124

If you have any questions regarding claims submissions, please submit a ticket to ClaimsSupport@TrilliumNC.org.

SETTING THE FOUNDATION: LGBTQ INCLUSION FOR CHILD WELFARE PROFESSIONALS

Trillium Health Resources offers a day-long deep-dive for child welfare professionals with our "Setting the Foundation" Training. This 6-hour course equips child welfare professionals with a comprehensive foundation of knowledge on LGBTQ+ youth and families and their experiences within the system and can be provided virtually.

[Click here for more information](#)

TAILORED PLAN PROVIDER SESSIONS

Trillium will host Tailored Plan Provider Sessions through the month of June. Providers may attend one session or may elect to attend all sessions.

June sessions will dive deeper into provider's questions, provide scenario-based applications, and more.

Please review the information below and click on the session or sessions you plan to attend.

[See Dates and Register](#)

TRILLIUM IN-PERSON TOWN HALL OPPORTUNITIES

Welcome to Trillium! Trillium Health Resources is hosting in-person town halls to hear about your communities, introduce our staff, and answer your questions. We look forward to meeting you.

[See Information and Register](#)

BEHAVIORAL HEALTH SCREENING PROGRAMS

Trillium Health Resources has established behavioral health screening programs to assist providers and practitioners in determining the likelihood that a member has coexisting substance use and mental health disorder. These screening tools are based on evidence from research studies that have been shown to be effective in the detection of positive screening for behavioral health symptoms and can be used as part of the general assessment of a member to determine if further evaluation is needed for formal diagnostic identification and treatment planning.

[See Details Here](#)

IDD PROVIDERS: NATIONAL CORE INDICATORS™ STATE OF THE WORKFORCE SURVEY AVAILABLE

We are encouraging you to complete the National Core Indicators™ (NCI) State of the Workforce Survey for IDD Providers (who serve adult Medicaid beneficiaries). It is vitally important that we hear from you about issues affecting the IDD workforce. Your agency should have already received an email with the survey; the email subject is "NC NCI State of the Workforce Survey 2023."

Surveys are due June 30, 2024. If you are an I/DD provider and you have not received the survey link, or if you have any questions, please contact NCISurvey@dhhs.nc.gov.

TAKE PRIDE IN YOUR HEALTH TRILLIUM HEALTH SUMMIT

A healthy, fulfilled life means feeling good inside and OUT. Building an inclusive, accepting world lays the path for full happiness and health for LGBTQ+ people. Join Trillium as we work towards that world and strengthen health for all. Topics include Youth, Mental Health and HIV/AIDS. Celebrate and boost LGBTQ+ health at the Take PRIDE in Your Health Summit event!

For more information visit TrilliumHealthResources.org.

[Take PRIDE Trillium Summit](#)

REQUEST FOR PROPOSAL ANNOUNCEMENT: OPIOID TREATMENT PROGRAM (OTP) - ANSON AND LEE COUNTIES

Trillium is seeking providers experienced in the treatment of Opioid use addiction to expand Medicaid Opioid Treatment Program (OTP) in both Anson and Lee counties. Only one provider can be selected for each county, but the applicant can apply for one or both counties.

These Requests for Proposal (RFP) is open to both in-network and out-of-network providers enrolled in NC Tracks and NC Medicaid who are free of contract sanctions, fraud investigations, and/or current IRS liens.

The RFPs are being used as a means to obtain information about providers who are capable of providing these services to adults. It 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.

Please visit the [Provider Network Participation Opportunities](#) webpage for information on these recruitment opportunities as well as others.

REQUEST FOR PROPOSAL ANNOUNCEMENT: PSYCHOSOCIAL REHABILITATION (SPR) - NEW HANOVER/BRUNSWICK COUNTY

Trillium is seeking providers experienced in the treatment of Psychosocial Rehabilitation to expand Medicaid Psychosocial Rehabilitation (PSR) – New Hanover/Brunswick counties. Only one provider can be selected for each county, but the applicant can apply for one or both counties.

These Requests for Proposal (RFP) is open to both in-network and out-of-network providers enrolled in NC Tracks and NC Medicaid who are free of contract sanctions, fraud investigations, and/or current IRS liens.

The RFPs are being used as a means to obtain information about providers who are capable of providing these services to adults. It 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.

Please visit the [Provider Network Participation Opportunities webpage](#) for information on these recruitment opportunities as well as others.

ATTENTION STATE FUNDED PROVIDERS

ATTENTION STATE FUNDED PROVIDERS:

Effective 7/1/2024, the Division of Mental Health will begin using new IDs for LME/MCOs. For this reason, providers submitting state funded claims, including 3 Way inpatient facility claims, will need to split their claims by date of service. Claims with dates of service prior to 7/1/2024 will need to be submitted separately from dates of service 7/1/2024 and after. Failure to split these claims will result in the denial and/or recoupment of the claims.

If you have any questions, please contact the Provider Support Service Line at 1-855-1539 or submit an email to ClaimsSupport@TrilliumNC.org.

PROVIDERS USING THIRD-PARTY BILLING AGENCIES

ATTENTION PROVIDERS:

In an effort to ensure compliance with Health Insurance Portability and Accountability Act (HIPAA), Trillium Health Resources will not release any Protected Health Information (PHI) to a third party billing agency without an approved, signed Business Associate Agreement (BAA) or Qualified Service Organization Agreement (QSO) on file. No information can be shared with the third party biller until this documentation is received and reviewed. The BAA and/or QSO can be

1. Emailed to Claims2@TrilliumNC.org or
2. Faxed to 252-215-6877

If you have any questions, please contact the Provider Support Service Line at 1-855-1539 or submit an email to ClaimsSupport@TrilliumNC.org.

TAILORED PLAN/MEDICAID DIRECT SPLIT CLAIMS

ATTENTION PROVIDERS:

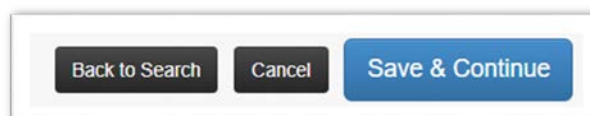
Effective 7/1/2024 with the launch of Tailored Plan implementation, providers submitting all claims, including inpatient facility claims, will need to split their claims by date of service based on the member's enrollment. Any date of service after the member's enrollment in Tailored Plan will need to be submitted separately from dates of service prior to enrollment in Tailored Plan. Failure to split these claims will result in the denial and/or recoupment of the claims. Please remember to check the member's enrollment/benefit plan monthly. Medicaid eligibility is visible in our provider portals and is updated daily based on the eligibility file received from NCDHHS.

If you have any questions, please contact the Provider Support Service Line at 1-855-1539 or submit an email to ClaimsSupport@TrilliumNC.org.

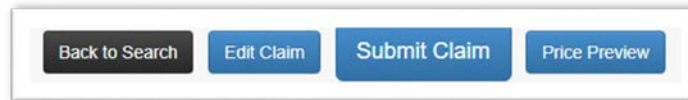
ATTENTION PROVIDERS USING PROVIDER DIRECT

DIRECT DATA ENTRY CLAIM SUBMISSIONS

When submitting claims using direct data entry through our Behavioral Health/IDD portal, Provider Direct, please remember after including the components on the claim, providers will need to click 'Save and Continue' at the bottom of the claim.



After the claim has been saved, there will be another opportunity to review the claim and reimbursement calculator prior to submission. For details on the reimbursement functionality, please reference [Network Communication Bulletin #188](#). After the final review of the claim, providers will scroll back down to the bottom of the claim and click 'Submit Claim'.



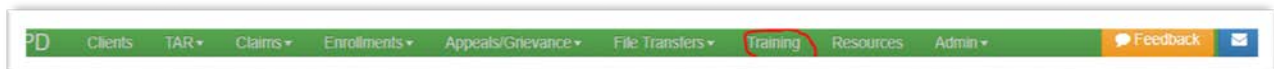
837 PROVIDER DIRECT SUBMISSIONS

When submitting claims via 837 through Provider Direct please remember:

- 🌱 File names will need to be unique
- 🌱 Payer/Receiver ID: 43071
- 🌱 Sender/Submitter ID: Trillium issued Provider ID
- 🌱 Zip code submitted will need to be 9 digits
- 🌱 3rd party billers submitting claims for multiple providers will require a separate SFTP set up

PROVIDER DIRECT TRAININGS

Provider Direct trainings are available in the Provider Direct portal through the training tab.



Provider Direct trainings are also available on our 'My Learning Campus' training platform.



For any claim-related questions regarding Provider Direct, please contact ClaimsSupport@TrilliumNC.org.

For any technical questions regarding Provider Direct, please contact PDsupport@TrilliumNC.org.

HEALTH PLAN BILLING GUIDE

Reminder to our provider community that the Department's NC Medicaid Managed Care's Health Plan Billing Guide is posted on the DHB website at the below link:

 [Health Plan Billing Guidance](#)

As a payor of Medicaid funds, Trillium Health Resources is required to process all claims as per State and Federal regulations. The billing guide is regularly updated and updates are tracked on the guide. The guide is an additional resource to our provider community on billing requirements.

For any claims related questions, please contact the Trillium Claims Team at ClaimsSupport@TrilliumNC.org.

CHANGE OF EMAIL ADDRESS FOR PROVIDER INVOICES

To receive reimbursement for invoices February 1, 2024 and forward, please submit your invoices to PayablesNoReply@TrilliumNC.org. Trillium will remit payment of your invoice within thirty (30) days of receipt of complete, accurate, and approved invoice.

NEW FUNCTIONALITY -EDI 277 REQUEST FOR ADDITIONAL INFORMATION

Beginning May 31, 2024, Trillium Health Resources began utilizing the EDI 277 Claims Response transaction to request additional information needed to process a claim.

When generated, the EDI 277 request file will be located in the provider's *Outbound* folder through their SFTP connection with Trillium or through Provider Direct in the *View File Repository from MCO* page.

The requested information can be returned to Trillium Health Resources via the EDI 275 Patient Information transaction. This file allows providers to submit attachments related to the 277 request. Providers may upload the EDI 275 transaction file to their *Inbound* SFTP connection folder or via Provider Direct.

If you have questions, please contact the Provider Support Service Line at 1-855-250-1539 or send an email to ClaimsSupport@TrilliumNC.org.

UPDATE TO NCTRACKS: RE-VERIFICATION TERMINATIONS

Currently, if a provider does not complete the re-verification process, or the re-verification application is denied due to a negative background finding, failure to complete fingerprinting, bad data, or expired credentials (license/accreditation/certification per the Provider Permission Matrix), only the provider's non-Division of Mental Health, Developmental Disabilities and Substance Use Services (DMH/DD/SUS) health plans terminate.






Effective May 19, 2024, an update to NCTracks will be made to the re-verification process. If a provider's Medicaid health plan is terminated during the re-verification process, their **DMH/DD/SUS health plans will also terminate**:

Providers will be required to submit a re-enrollment application to continue to render services to NC Medicaid or State-funded beneficiaries.

More information about the re-verification process and links to training documents can be found on the [Provider Re-Credentialing/Re-verification page](#) or [NCTracks Home](#).

UPDATED PROVIDER FACT SHEETS

NCDHHS updated Fact Sheets in the NC Medicaid Managed Care Provider Playbook to reflect the July 1, 2024, launch of Tailored Plans.

-  [What Providers Need to Know: Part 1 – Before Tailored Plan Launch](#)
-  [Tailored Plan Provider Contracting Deadlines Questions and Answers](#)
-  [NC Medicaid Provider and Health Plan Lookup Tool](#)
-  [What Providers Need to Know: NC Health Choice Move to Medicaid](#)
-  [NC Medicaid Managed Care: Provider Training](#)

TOBACCO-RELATED POLICY REQUIREMENTS

Tobacco-related policy requirements will be **effective July 1, 2024**, for NC Medicaid Managed Care Standard Plans, Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plans, and Local Management Entity/Managed Care Organizations (LME/MCOs) contracted medical, behavioral health, I/DD and traumatic brain injury (TBI) service providers. These requirements apply to both Medicaid and state-funded service providers. The Department will work with health plans and LME/MCOs to include these requirements, as appropriate, in advance of July 1, 2024.

-  [Complete Detailed Information](#)

UNLICENSED ALTERNATIVE FAMILY LIVING AND OVERNIGHT RESPITE REQUESTS

Trillium conducts initial and annual site reviews for Unlicensed Alternative Family Living homes. These visits will be conducted live/virtually or conducted in person. Respite site visits will be conducted for any agency requesting overnight respite services in an unlicensed site.

To request, please complete the “Request to Add Site Form Alternate Family Living (AFL) or Respite” form located on Trillium’s website under the For Provider’s page- [AFL/Respite Additional Site Form](#).

ROADMAP2 READY DISASTER PLANNING

Emergency plans were due May 1, [please submit](#) them if you haven’t already. If you need any resources to help improve your plan, please visit [TRACIE](#) website. They have wonderful tools, templates for emergency plans, as well as exercise examples.

Roadmap
2 Ready



Part of being prepared is to have a plan for any kind of emergency. We will be providing best practices on preparedness to help your organization. First, we will cover how to provide updated contact information to 911 tele communicators.

According to 911.gov- Most counties have a 911 addressing coordinator who is responsible for updating information regarding address changes, resolving address issues, or updating a business’s contact information. If contact information for the 911 addressing coordinator cannot be found on your county’s website, you may contact the **non-emergency number** for your county to ask for the appropriate addressing authority. This is important to assist 911 know who to contact in emergencies after hours, know approximately how many people could be on site, if there any mobility issues. This information helps first responders know who and how they can better respond and help in any emergency you may have.

Please be sure that you contact the non-emergency number for your county unless there is a true emergency. Did you know some counties can receive text 911? Interested in learning more about 911? [Check out the FAQ](#).

When there is a state of emergency, please inform Trillium of any service provision or operational changes by completing the **Changes to Provider Operations form**. This form, which is only active when needed, is located on the [Community Crisis and Disaster Response webpage](#) under the “Provider” tab.

NEED TO REPORT FRAUD, WASTE AND ABUSE?

EthicsPoint is a secure and confidential system available 24 hours a day, 7 days a week for anyone to report suspected violations of potential fraud, waste and abuse or confidentiality issues. 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.