

Questions & Answers

1. Any news on Duke hospital joining Trillium?

We continue to work to secure a contract with the Duke health system. We understand many of our members receive services and while we would prefer to have a simpler process, we encourage members to share with their providers at Duke the importance of having a contract with Trillium.

2. We changed PCPs and need a new card. Who is sending new cards and when can we expect a corrected card?

Trillium will send a new card when a new PCP is selected.

3. How can I get assistance with housing?

Please reach out to our call center at 1-877-685-2415 or email Info@TrilliumNC.org as this is a location-specific request and will depend on county of residence.

4. I was notified on July 2 that my family member's vision provider is now out of network and that they were not going to add any Medicaid providers at this time. This is the only vision provider who has been able to assess and treat my complex needs as a member. How can you direct me?

A: Work with your care manager on access to a vision provider. We will work with resources internally to ensure you are lined up with services.

5. The provider site is very inconsistent. One day my PCP is part of the Trillium plan and they next day they are not.

All information that displays in our provider directory is based on information loaded in NC Tracks. There are very specific criteria that a provider has to keep up with (credentials, etc.) to remain in the system. If for some reason they don't, they can be kicked out of the system and have to reenroll. The directory is updated on a daily basis.

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- 6. I stayed with care coordination simply because I did not want all the extra hands in the cookie jar. This will allow me to maintain focus and not forget who does what job. But I heard yesterday that it is coming down from “leadership” that extenders will start being utilized. Do I have the right to refuse an extender if I don’t need one? I handle everything that my brother needs and if I need assistance (which is few and far between), I reach out to my brother’s care manager.**

You absolutely have the right to coordinate care for your brother at your discretion. If you elect to not have Tailored Care Management, you can access care coordination. There is never a mandate to force you to have someone involved in your care.

- 7. Can out-of-network agencies still bill for supplies, specialists, or PCPs until January 31? What is a good way for members to handle this?**

There are flexibilities for continuity of care for out of network providers until January 31, 2025. We have shared a flier on our website for members to use during this time:

[What if your provider is out of network?](#)

- 8. I am wondering how people can get benefits such as help with phone and other benefits.**

Please visit our [Trillium Advantage webpage](#)

- 9. Will Trillium provide the reimbursement mileage sheet on their site? I had to hunt it down on the ModivCare site.**

We will look into adding this.

- 10. Until Duke Hospital has been added to the network for Trillium, how will doctors’ appointments for Duke clinics and their affiliates be covered? My son has appointments coming up at Duke Hospital and we need to know how to handle these.**

Trillium will continue to support members accessing care at Duke. We will develop an out-of-network agreement so services can continue. Will provide a [link to the Member Tip Sheet](#).

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11. When will new primary care providers be added to the Trillium website? It is very difficult to navigate the website, and my primary care appointment is almost three months out.

Under flexibilities you should be able to continue to see your PCPs. If you want to provide your email (please contact Info@TrilliumNC.org) we can make sure your particular provider is in Network. If not, we can pursue a contract.

12. If my member has been put in Medicaid Dual who do I need to contact for him to be also in Trillium Medicaid?

Trillium does not assign members to certain types of Medicaid. This happens with the Enrollment Broker. If you want to be in the Tailored Plan and were in the Standard Plan, you can [contact the Enrollment Broker](#).

13. Can you discuss benefits for members of an ACT Team who do not have care managers?

ACT is a duplicative service according to the state's definition. Members assigned to that service receive their Care Management from their ACT team. If a member transitions into ACT the TCM primary care manager will ensure a proper hand off within 30 days.

14. Can you discuss provider sessions?

We have offered previous provider sessions and have recordings and slides on our website here: <https://www.trilliumhealthresources.org/tailored-plan-trillium-training>

15. Can you address the lack of community support workers?

Trillium has been very involved in advocating for higher rates. This can be extremely difficult to maintain especially in rural counties

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16. My son is in an ICF home. How can he get more speech therapy? Will there be more choices for caregivers with more ICFs?

The ICF is a comprehensive service. There is a moratorium on additional ICFs. Speech, like OT/PT and BH supports is part of the package of these services. Typically, members do not receive external services. If you are having problems accessing services, let us know.

17. I have two questions: (1) The new PCP listed on my son's Medicaid card refuses to see him because they say they are not contracted with Trillium. How could this happen? (2) Why did the letter that came with my son's new Medicaid card not tell me that we don't have to use the new PCP until January? Know that would have saved me a lot of stress and anxiety.

In short, it couldn't happen. Only contracted PCPs are available for assignment. NC Medicaid would reject any assignments for non-contracted providers. Trillium will look into this situation for you.

18. Can you please describe in detail what the role of the care manager is and where are they getting accurate information regarding the medical, pharmacy and vision needs of people? The criteria for contact is quite minimal.

The care manager identifies member's needs, provides behavioral health and physical health recommendations for appropriate services/supports, and outlines an action plan for service linkage in collaboration with the member's care team. The care manager receives medical, pharmacy and vision needs from the clinical coverage guidelines, regular in-services, scheduled trainings, and weekly staff meetings regarding updates on benefits or programs.

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- 19. I was at the doctor's office today. The lady at the front desk indicated that my son was not in the Trillium system. Duke did not call to let her/the doctor's office know. If the member's name was not on the card the doctor would not see them. My biggest concern is that my son is not showing up as having Trillium benefits.**

Trillium has done everything we can do to get Duke to be responsive. We know how important it is for people to stay with their doctors. Members can go anywhere to see a PCP regardless of what is on the card. Consider calling us, or having Duke call us, while you are in the doctor's office.

- 20. There are medical card issues. Once switched to the Tailored Plan, members are not getting supplies and PCPs are not letting the members to be seen. Medicaid use to require doctors' names on cards/supply companies on cards.**

Any time this happens, call our Member & Recipient Services line. Give us the member's name and we will get the supplies delivered. We need people to file complaints. We need to know when this is occurring so we can take steps to fix it.

- 21. I recently received my Medicaid card in the mail, but have not been able to find a PCP that has my appointments any sooner than 3 months out. Do I need to also pick a Tailored Plan?**

Tailored Plans are assigned based on the county where you Medicaid was assigned. Please call 1-877-685-2415 for assistance in finding PCPs who can see you sooner.

- 22. Regarding specialty care doctors who are out of network: Is this Medicaid Direct? What card do I give them?**

Take your Medicaid card and the [out-of-network tip sheet](#).

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- 23. My son was receiving services still virtually due to his health conditions that he cannot go out in public places or be around others still since COVID-19. Since this new plan, he must now have some hours in person, and this is very high-risk with his health. Why can't he just continue virtually? He has a severe autoimmune disease.**

Please reach out to Trillium or your care manager. We will work to ensure services are approved virtually under EPSDT (Early and Periodic Screening, Diagnosis and Treatment (EPSDT) is the federal law that says Medicaid must provide all medically necessary health care services to Medicaid-eligible children.)

- 24. Who is going to communicate the information that pharmacies need to contract with Trillium to families/providers? I know because I'm on these links. I share with everyone I can, but individuals as slipping through the cracks because the information is not known, public, mailed, emailed, texted, etc. The information is not getting to many folks!**

A: 99% of all Medicaid credentialed pharmacies in Trillium counties are contracted with Trillium. If a member would use a credentialed pharmacy who is NOT contracted with Trillium the pharmacy would be paid until September 30th and we would reach out to that pharmacy to become contracted with us.

- 25. I am an administrator with Randolph County Detention Center. How do I go about setting up referrals especially for mental health patients? How long does it take to get new patients in? Will you see patients without insurance?**

When patients do not have insurance, there are providers who serve State-funded members. It could take up to 30 days to get an appointment. You can call Member & Recipient Services, and we can try to help. There are limitations to paying for indigent care.

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- 26. Our PCP said they were keeping current patients but not accepting new Tailored Plan participants. Our neurology practice said they have never been asked to join. And our psychiatrist said they have asked to join but not received sufficient help. It is very frustrating to know our current physicians want to keep our daughter but Trillium has made that difficult.**

Send Trillium the names of the practices and we will look into it. We had a very long process in reaching out to providers who were seeing members served by Trillium. We contacted as many as we had information for and want all members to be able to continue seeing providers they had a relationship with.

- 27. Why are the Sandhills Center members that transitioned over not getting the Trillium rate that was effective July 1? We are being told the legacy Sandhills rate applies to us.**

The Consolidation Agreement required us to keep rates from legacy documents.

- 28. Getting back to the staffing question: DHHS has come up with the proposed DSP worker credentialing, which could cost thousands of dollars. Larger providers could potentially afford this credentialing proposal. But I am not hearing anything about how this is to be paid for when services are provided by the Employer of Record. It has also been said that there are grant opportunities out there to assist in paying for the credentialing, but again the EORs are being left out of this, as well. Can you shed some light on this topic, please?**

We agree. EOR is a critical part of this workforce. We can't leave them out!

- 29. Members are concerned that they may lose their Innovations Waiver because the Tailored Plan violates their rights? What do we tell members? How do we file a complaint?**

Call the Member & Recipient Services line and file a complaint. You can also email Info@TrilliumNC.org or complete a complaint in the member portal: <https://www.trilliumhealthresources.org/member-recipient-portal>

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30. How do we ensure care managers gain access to this training you refer to?

They have access to My Learning Campus and our website where trainings are linked.