

Questions & Answers Provider Session Dated July 24, 2024

- 1. With the extension to 8/31 for 1951i the communication cited the “presumed approval” for 1915i, does that mean if a client is currently B3(who would be eligible for both PSR and a 1915i service) we would need to follow 1915i rules making them ineligible for both even if 1915i is not yet approved?**

If a member is 1915i eligible then member would be enrolled in those service and exclusions would apply

- 2. How do we find out if someone has already been found eligible for 1915i?**

Check the insurance tab in Provider Direct

- 3. For members enrolled in the TP that means they have a CM who submits the TAR correct?**

No, an authorization is not needed for TCM.

- 4. If a TP member is admitted to a long term facility in a different (participating plan) county how long will patient be covered by their home plan?**

The member will be covered for 30 days.

- 5. where do I find out about benefits for members including phone and transportation?**

Benefits regarding a phone can be found on our website on the [Trillium Advantage](#) webpage; however, the funds will not be available until October 1, 2024. For transportation information regarding benefits and scheduling, contact Modivcare at 877-685-2415.

- 6. I bill for occupational and speech therapy would I bill through CCH or Trillium? Is there a specific modifier to use? Do authorizations still go through CCH?**

OT/ST can be billed using the Trillium physical health submission methods. These claims would be processed by Carolina Complete. Authorizations can be submitted via phone (855-250-1539) fax (833-875-0930) or portal. Fax for outpatient authorizations is: 833-875-0930 and the form to use is located here:<https://network.carolinacompletehealth.com/resources/prior-authorization.html>

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- 7. How do I get services reinstated for an individual that expired on 6/1 and the CM has not submitted a TAR? And the TAR I submitted was denied?**

The Member must be eligible for 1915i.

- 8. Is there a document that has specific duties for a TCM provider and a provider that provides the 1915i services to members?**

Yes, the TCM manual

- 9. As a TCM provider is there a different TAR to continue TCM services?**

A Provider does not need to complete TAR.

- 10. I read that all B3 services will end on 12/2024 is that true? What happens if a member has not been approved for 1915i services but are still eligible for B3?**

B3 services end 12/31/24. If member is receiving B3, an assessment needs to be completed as soon as possible.

- 11. When will my PPP review occur? I was with Sandhills and was supposed to have a PPP review in October 2024 for the period of 5/1/24-7/31/24. When will I know when this will be?**

PPP will occur, more information forthcoming