Transforming Lives. Building Community Well-Being.



### **Tailored Plan Provider Session**

**Network Management Department** 







Tailored Plan Provider (recorded & accessible)

#### **June Sessions**



Claims - Provider Session (3:30pm-4:30pm)



Network Management - Provider Session (5:30pm-6:30pm)



Utilization Management - Provider Session (3:30pm-4:30pm)



Tailored Care Management - Provider Session (2:00pm-3:00pm)







Q&A via the chat box throughout the meeting and allotted time for Q&A at the end of the presentation.

# Question & Answer Chat

and

Live Discussion



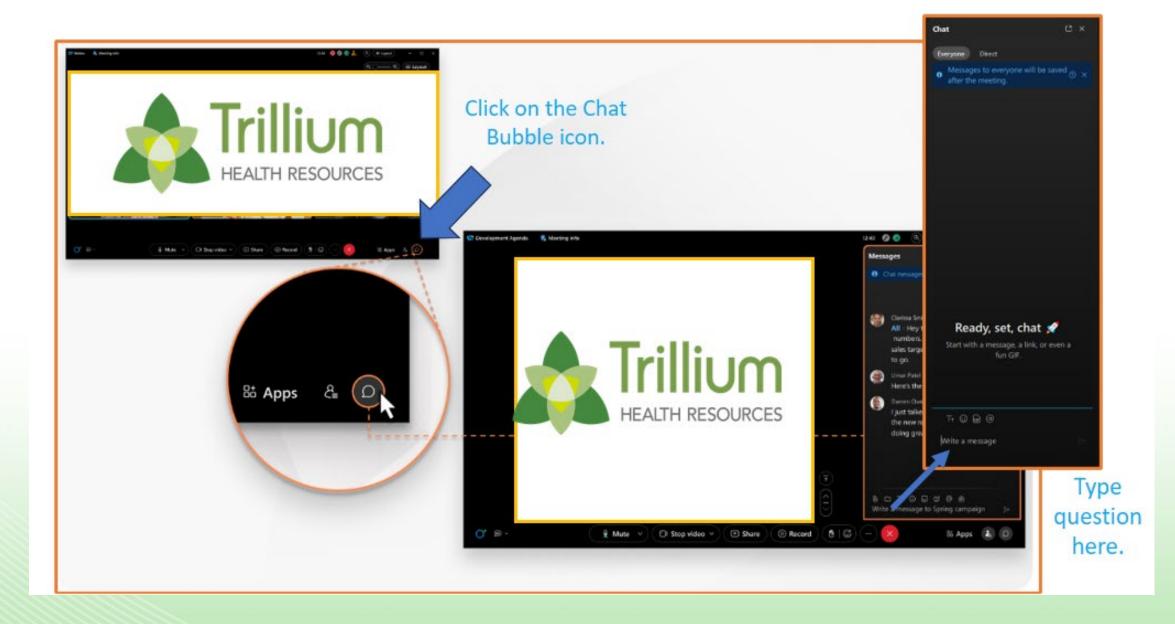
Submit your questions using the Chat feature during the meeting. We will have Subject Matter Experts responding in the chat to questions throughout the meeting.



If there are questions that require more research, we will review them and provide the answer in the Frequently Asked Questions Document (FAQ) that is posted on our website.



# Accessing the Chat feature in WebEx.



# Today's Agenda

Overview of Trillium's Tailored Plan Partners

Dehavioral Health Contracting

Resources for Providers

Physical Health Contracting

Overview of Trillium's Provider Information Page

07 Questions

BH I/DD Tailored Plan Provider Network



# Overview of Tailored Plan Partnerships and Provider Resources

Linda Hawley Isbell, MA, Cl Network Director Transforming Lives. Building Community Well-Being.



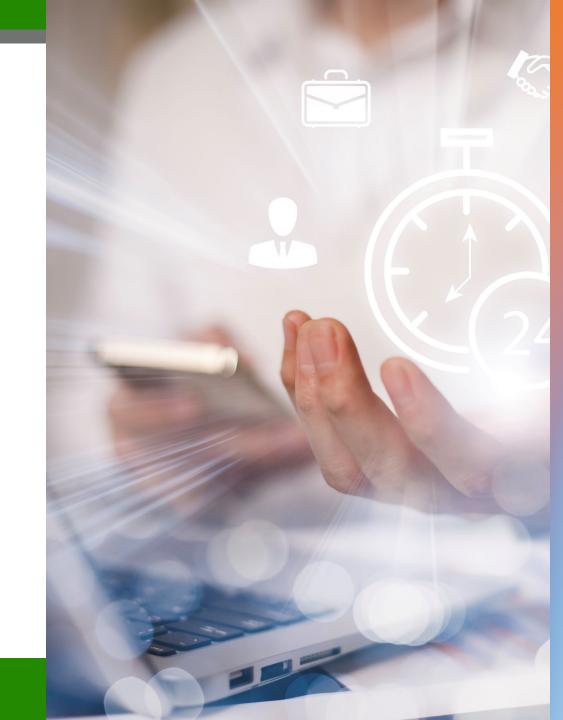
# Tailored Plan Partnerships





#### Resources for Providers

- All Behavioral Health contracted providers are assigned a Provider Relations and Engagement Coordinator as your first point of contact for any questions.
- Call the Provider Support Service Line (PSSL) at (855) 250-1539
  - PSSL is available Monday through Saturday from 7 a.m. to 6 p.m. including federal holidays.
- Email Provider Relations and Engagement at NetworkServicesSupport@TrilliumNC.org
- Review the Trillium Health Resources website www.TrilliumHealthResources.org



#### Overview of Trillium's Provider Page - Demonstration

Kim Wagner, MBA and Chauncey Dameron, MBA

Provider Relations and Engagement Managers

#### BH I/DD Tailored Plan Provider Network and Contracting

Rebbecca Basden, MBA

Contracts Manager

#### BH I/DD Tailored Plan Provider Network

A BH/IDD Tailored Plan is an NC Medicaid Managed Care health plan that offers behavioral health, physical health, pharmacy, and care management services for members who may have:

Mental health or severe substance use disorders

Intellectual/developmental disabilities (I/DD)

Traumatic brain injuries (TBIs)



Child and Adolescent Day Treatment

Community Support Team (CST)

Intensive In-home

Multi-systemic Therapy (MST)

Psychiatric Residential Treatment Facilities (PRTFs)

Psychosocial Rehabilitation (PSR)

Residential Treatment

Substance Abuse Medically Monitored Residential Treatment

Substance Abuse Non-Medical Community Residential Treatment

**Innovations Waiver services** 

Intermediate Care Facility for individuals with Intellectual Disabilities (ICF-IID) services

State-Funded (non-Medicaid) services

TBI Waiver services

Transitions to Community Living (TCL) program services



- Routine Doctor Visits
- Medical Supplies
- Lab tests & X-rays

- Prescriptions
- Hospice
- Vision







Benefits & Services

Get Answers



## Contracting Requirements

- Trillium maintains a closed network for behavioral health and I/DD services.
  - Want to join the Behavioral Health Network?
    - \* Review the <u>Provider Network Participation</u> <u>Opportunities</u> on Trillium's website, or
    - Email <u>NetworkServicesSupport@TrilliumNC.org</u>
- Trillium maintains an open network for all physical health providers.
  - Want to join the Physical Health Network?
    - Contact Carolina Complete Health
      - Email: networkrelations@cch-network.com
      - Call: (833) 552-3876
- All providers must:
  - Be a participating provider in the NC Medicaid program.
  - Be enrolled and set up correctly in NCTracks, the multipayer Medicaid Management Information System for the NCDHHS.
    - Billing and rendering affiliations are correct
    - Taxonomies cover the services requested
    - Service location addresses are active and listed as 003 or higher
    - Medicaid Health Plan is active
    - Applicable Facility Licenses are reflected
    - Applicable Accreditations are reflected

# **Behavioral Health Contracting**

- ❖On July 1, 2024, Trillium will utilize three main types of contract agreements for Tailored Plan:
  - Tailored Plan Procurement Contract (Full Contract)
  - Provider Payment Agreement (Hospital In-patient services)
  - Out-of-Network Single Case Agreement (All other services)
- ❖ Provider Payment Agreements and Out-of-Network Single Case Agreements apply to providers that <u>do not</u> have a full contract with Trillium.
- ❖ Trillium is prohibited from reimbursing Out-of-Network providers no more than 90% of the Medicaid Fee for Service Rate.
  - Exclusions to this rule may include, but are not limited to:
    - ❖ First 91 calendar days following BH I/DD Tailored Plan Launch (7/1/2024 to 9/30/2024)
    - Emergency Services
    - Post-Stabilization Services
    - Services provided to a member during a Transition of Care episode
    - ❖ Behavioral Health, I/DD, and TBI services when the provider has not been offered a full contract
    - ❖ Physical Health and Pharmacy services when the provider has not been offered a full contract

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#### Behavioral Health -Out-of-Network Single Case Agreements

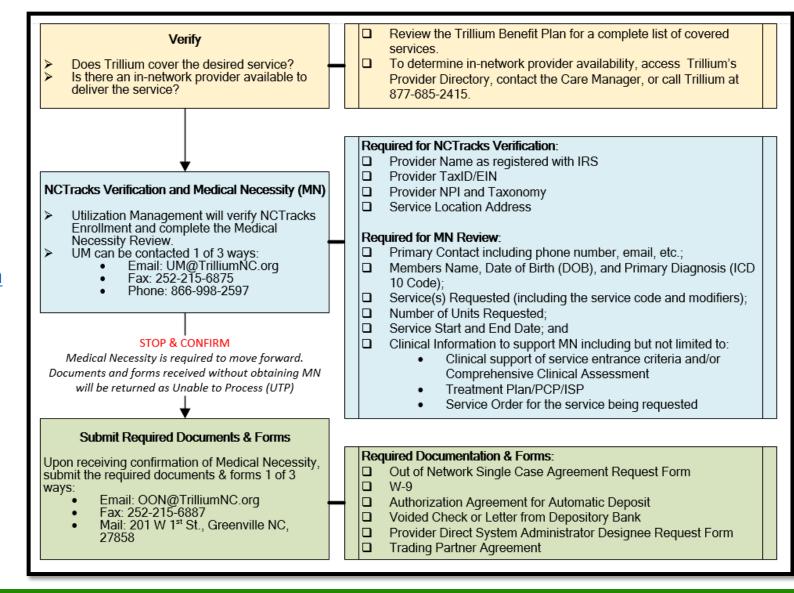
- Single Case Agreements are used to ensure continuity of care and access to services for members who require medically necessary services from a provider that is out-of-network.
  - This does not apply to emergency services.
- Single Case Agreements:
  - Are required when an out-of-network provider is serving a member who is enrolled with Trillium.
  - Are member-specific, and providers must follow the out-ofnetwork process each time a new member or new service is needed.
  - End on June 30 of each year and reissued, as applicable, effective July 1.
- Out-of-Network applies to providers that <u>do not</u> have a full contract with Trillium.
- Fully contracted in-network providers must submit their request to add service codes or service locations to Network Development.
  - NetworkServicesSupport@TrilliumNC.org
  - (855) 250-1539





## Behavioral Health Out-of-Network Process

- Review the Out-of-Network Process: www.trilliumhealthresources.org/contracting-trillium
- Review the Trillium Benefit Plan: www.trilliumhealthresources.org/forproviders/benefit-plans-service-definitions
- Review the Trillium Provider Directory: www.trilliumhealthresources.org/providerdirectory
- Have questions about this process?
  OON@TrilliumNC.org



#### Physical Health Provider Network

Jesse Hardin Carolina Complete Health Network Director, Communications and Program Implementation

# Open Physical Health Network

Trillium maintains an open physical health provider network.

Carolina Complete Health is working as a delegate to build the physical health network for Trillium.

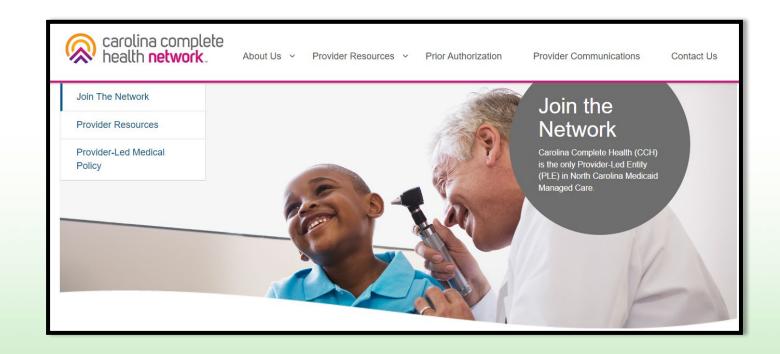
Physical health providers may join the Trillium network through Carolina Complete Health's Contract Request Form.

Providers do not have to be a participating CCH Standard Plan provider to join the Tailored Plan network.

- If you are not in network with Trillium Tailored Plan, you will be considered 'out-of-network' and subject to prior authorization requirements.\*
- Out-of-network providers may be subject to a reduced reimbursed rate at 90% of the Medicaid Fee Schedule.\*

For questions about your contract status, email <a href="mailto:NetworkRelations@cch-network.com">NetworkRelations@cch-network.com</a>

\*Following Tailored Plan Launch flexibilities set by NCDHHS: Read More



# NC Medicaid Credentialing

Prior to contracting with Trillium, providers must be credentialed with NC Medicaid.

NCTracks is the "system of record" for provider enrollment data.

View our <u>Provider Guide: Provider Enrollment and Data (PDF)</u> for more information.

#### **Update Provider Record**

- If provider/organization information in the online directory is out-of-date or inaccurate, the provider should complete a Manage Change Request (MCR) via the NCTracks Secure Provider Portal to correct it (inclusive of updates to demographic information, languages, and services).
- If the individual to organization Provider Affiliation information is incorrect, the provider for the affiliated individual provider must update the group affiliation on the individual provider's record.

#### **Taxonomy Updates**

- Due to a recent update in the NCTracks system, providers may now select and terminate a taxonomy on their record in suspension status if the provider deems the taxonomy as no longer applicable to services rendered.
- To validate your taxonomy code, please use the NCTracks: How to view and update Taxonomy on the Provider Profile in NCTracks User Guide.

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# Vision Services through Centene Vision Services (Formerly Envolve)

Please note, medical ophthalmology services are considered physical health services and use physical health claim and authorization methods

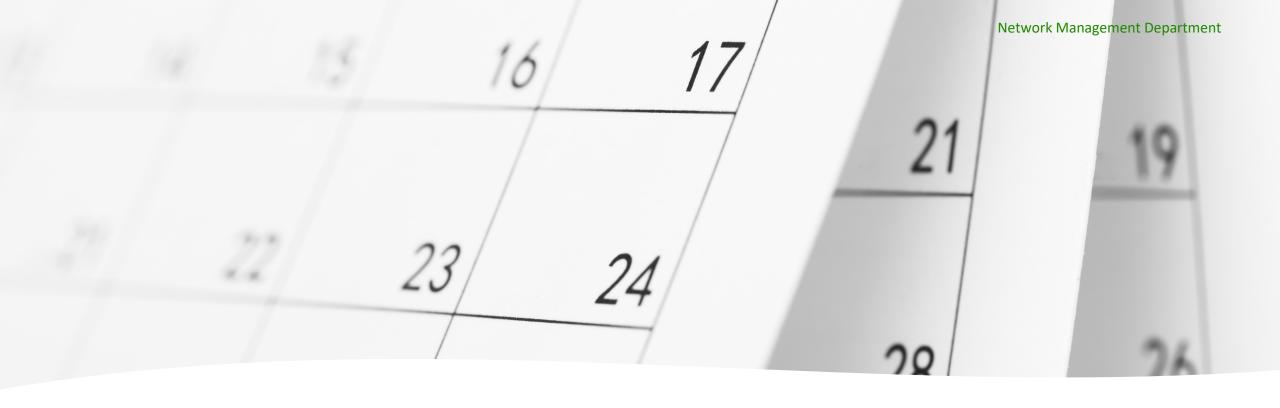
Optometrists should contract and submit claims through Envolve. More information can be found in the CCH Provider Manual.

Envolve Vision Provider Web Portal	<ul> <li>https://www.envolvevision.com/logon</li> <li>Eye Health Manager (available 24/7)</li> <li>Verify member eligibility and benefits</li> <li>File claims and review claim status</li> <li>Use audit tools</li> <li>Download, research, and reprint EOPs</li> </ul>	
Envolve Vision Paper Claims	<ul> <li>Envolve Vision,</li> <li>Attn: Claims</li> <li>PO Box 7548</li> <li>Rocky Mount, NC 27804</li> </ul>	
Envolve Electronic Claim Submission	Change HealthCare Payer ID#56190	
Envolve Customer Services	• 1-833-224-0516	

# Physical Health Claim Submission

Method	Physical Health Provider Claims Submission	
Electronic	Trillium Physical Health Portal* (*Not available for OON providers) provider.trilliumhealthresources.org	
Paper	Trillium Health Resources/Carolina Complete Health Attn: Claims PO Box 8003 Farmington, MO 63640-8003	
Clearinghouse/ SFTP	Provider's Clearinghouse connection to Availity for Claims processing.	
Payor ID	68069	

These methods
will get the
physical health
claim to CCH for
processing



# Timely Filing and Claims Payment

- Contracted providers have 365 calendar days from the date of service (Professional) or date of discharge (Hospital).
- Non-contracted providers have 180 calendar days from the date of service (Professional) or date of discharge (Hospital).
- Trillium physical health claims payments are issued weekly. Check run is Wednesday with payment issued the following business day.
- Contracted providers can sign up for EFT/ERA through Payspan.
- Out-of-Network providers will receive paper checks.

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# **Auth Request Submission**

- Trillium Physical Health authorizations are reviewed by Carolina Complete Health
- Providers have three methods to submit authorizations:
  - Portal\*: <u>provider.trilliumhealthresources.org</u> (\*Not available for OON Providers)
  - Phone: 833-552-3876
  - Fax (Fax Form)
    - Physical Health Outpatient: 833-875-0930
    - Physical Inpatient:
      - Face Sheets: 833-875-0650
      - Concurrent Reviews: 833-875-2264



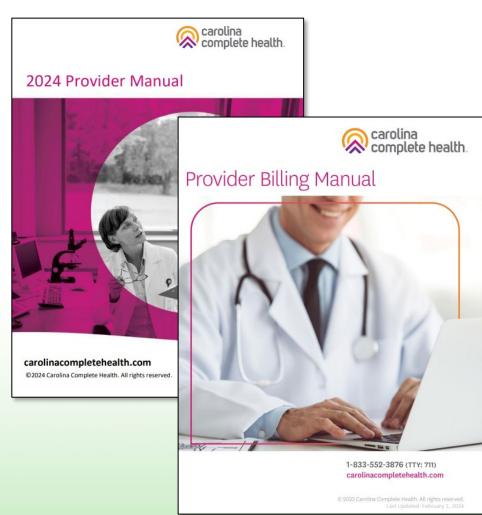
# Out-of-Network Authorizations

- Most out-of-network services and providers require prior authorization.
  - Exclusions: emergency services, primary care, family planning, post stabilization services, and tabletop x-rays.
- ❖ At the time of requesting an auth, the provider should indicate they are an out-of-network provider.
- Carolina Complete Health will review the authorization for medical necessity.
- If the authorization is approved, Carolina Complete Health contracting team will outreach to the provider to discuss a single case agreement.

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- ❖The Manuals include a wide array of important information relevant to providers including, but not limited to:
  - ❖ Network information
  - ❖Billing guidelines
  - Claims information
  - ❖Regulatory information
  - ❖Key contact list
  - ❖And much more!

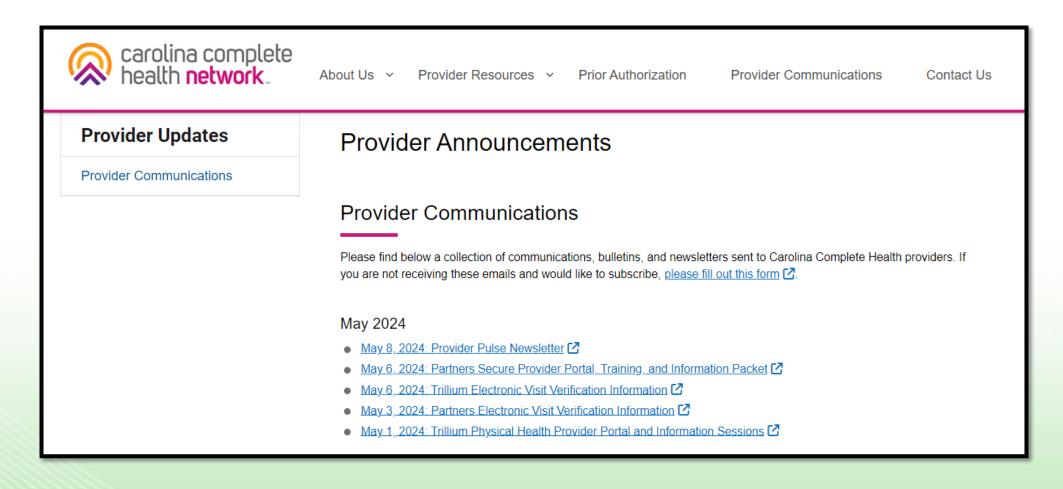
- https://network.carolinacompletehealth.com/guides
- You will be notified of updates via notices posted on our website and/or in the monthly Provider Pulse newsletter.



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#### **Provider Communications**

\*Keep up with our communications online or by subscribing to our newsletter https://network.carolinacompletehealth.com/provider-updates/cchn-bulletins-and-newsletters.html



# **Contact Information**

Network Management Department		
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Provider Type	Team	Topics	Contact
Physical Health	CCHN Provider Relations	Contract Status	NetworkRelations@cch-network.com
Physical Health	CCHN Provider Engagement	<ul><li>Education and Orientation</li><li>Panel Status</li><li>Payspan Support</li><li>Physical Health Portal</li></ul>	network.carolinacompletehealth.com/engagement ProviderEngagement@cch-network.com
Behavioral Health	Provider Relations and Engagement	All questions	NetworkServicesSupport@TrilliumNC.org (855) 250-1539



Questions