

Network Communication Bulletin #353

To: All Providers

From: Khristine Brewington, MS, LCMHCS, LCAS, CCS, CCJP

VP of Network Management

Date: June 21, 2024

Subject: Provider Data Management / Credentialing Verification Organization: Launch

Date Announcement Refinement of Rural County Definition in Medicaid Expansion Enrollment Dashboard, Upcoming Re-Entry Simulations, June 2024 Pharmacy Newsletter Now Available, Tailored Plans Webinar, June Provider Training Still Available, NCDHHS Releases New Bilingual Toolkit Resources Ahead of Tailored Plan Launch on July 1, Recruitment for Peer Support Curriculum Advisors, 2024 Provider Experience Survey Extended to June 30, Stakeholder Engagement for Behavioral Health Clinical Coverage Policy Update, NCDHHS Launches New Strategic Plan for 2024-2026, Tailored Plans and Tailored Care Management for Primary Care Providers and Specialty Providers, Authorizations and Claims Submission for Plan Launch on July 1, 2024, Submission of Paper Claims, Tailored Plan Provider Informational Sessions, Trillium In-Person Town Hall Opportunities, Behavioral Health Screening Programs, Roadmap2Ready Disaster Planning, IDD Providers: National Core Indicators™ State of the Workforce Survey Available, 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, New Functionality -EDI 277, Tobacco-Related Policy Requirements, Unlicensed Alternative Family Living and Overnight Respite Requests, Need to Report Fraud, Waste, and Abuse?

PDM/CVO: LAUNCH DATE ANNOUNCEMENT

The North Carolina Department of Health and Human Services (NCDHHS) will be replacing the current provider enrollment and data management system components of NCTracks with a centralized Provider Data Management/Credentialing Verification Organization (PDM/CVO) solution.

Provider Support Service: 1-855-250-1539

Administrative & Business Matters: 1-866-998-2597



The solution will meet National Committee for Quality Assurance (NCQA) standards and enhance provider credentialing through centralized CVO features that include a Credentialing Committee and delegated enrollment and credentialing.

NCDHHS awarded a contract to Optum for the design, development, and implementation of the PDM/CVO. To allow for additional time to test the system and ensure that providers and NCDHHS payers experience a seamless transition to the new solution, the PDM/CVO launch is now anticipated in 2026. For more information on the PDM/CVO solution and what providers are encouraged to do to prepare, please see Medicaid Provider bulletin article Provider Data Management / Credentialing VerificationOrganization Solution New Launch Date of 2026.

For the most up-to-date provider information, including fact sheets and other applicable resources, please visit the <u>NC Medicaid Provider Data Management / Credentialing Verification Organization webpage</u>.

REFINEMENT OF RURAL COUNTY DEFINITION IN MEDICAID EXPANSION ENROLLMENT DASHBOARD

The North Carolina Department of Health and Human Services (NCDHHS) launched a new public dashboard in December 2023 to track monthly enrollment in NC Medicaid for people eligible through expansion. The NC Medicaid Expansion Enrollment Dashboard offers a detailed overview of enrollment trends in adults ages 19-64 who are newly eligible for full Medicaid health care coverage.

UPCOMING RE-ENTRY SIMULATIONS

Trillium Health Resources is sponsoring Re-entry Simulations. You will learn about the many barriers individuals go through when they are released from jail. Participants experience the difficulties of finding a job, keeping a stable home, going to treatment regularly, and following release rules.

Upcoming Re-Entry Simulations Training:

- A Hamlet, NC June 25
- Snow Hill, NC July 16
- Ahoskie, NC August 20
- Beaufort, NC September 10
- A Bolivia, NC September 24

JUNE 2024 PHARMACY NEWSLETTER NOW AVAILABLE, TAILORED PLANS WEBINAR

The latest Medicaid Pharmacy Newsletter, dated June 2024, is now available on the N.C. Medicaid website. In addition to the July 2024 checkwrite schedule, this edition of the newsletter includes the articles:

- NC Medicaid to Remove Copays for Drugs used to treat Opioid Use Disorder and Nicotine Replacement Therapy
- Reminder of Tailored Plans Launch on July 1, 2024
- ♠ OTC COVID 19 Tests for Home Use Pharmacy POS Coverage
- Immunizing Pharmacist Enrollment Contraceptives and NRT Protocol Reimbursement to Pharmacies

Providers are encouraged to review this important information.

2024 Medicaid Pharmacy Newsletters

JUNE PROVIDER TRAINING STILL AVAILABLE

Registration is open for the <u>June 2024 training courses</u> listed below. NCTracks zoom courses can be attended remotely from any location. Courses offered this month include:

- Submitting a Prior Approval Medical
- How to Update Credentials
- Submitting an Institutional Claim
- Submitting an Institutional Prior Approval
- A How To Submit a Professional Claim

See the document linked below for more information on course schedule and access to zoom links:

June 2024 Provider Training Schedule

NCDHHS RELEASES NEW BILINGUAL TOOLKIT RESOURCES AHEAD OF TAILORED PLAN LAUNCH ON JULY 1

On July 1, some people on NC Medicaid will move to a Tailored Plan. It's a new kind of Medicaid health plan for people with serious mental illness, a severe substance use disorder, an intellectual/developmental disability or a traumatic brain injury.

Tailored Plans cover your doctor visits, prescription drugs and services for mental health, substance use disorder, intellectual/developmental disabilities and traumatic brain injury in one plan.

If your NC Medicaid will move to a Tailored Plan, you should have gotten a letter and welcome packet. (If you're not sure, call your NC Medicaid Enrollment Broker at 833-870-5500 and ask).

We've been listening to your questions. Today, we want to share new tools to help you get answers. Check out these free materials, in Spanish and English, to learn more about your Tailored Plan: Medicaid.NCDHHS.Gov/Tailored-Plans/Toolkit

RECRUITMENT FOR PEER SUPPORT CURRICULUM ADVISORS

The Division of Mental Health, Developmental Disabilities, and Substance Use Services (DMHDDSUS), in partnership with the UNC Behavioral Health Springboard, is currently recruiting applicants for our Standardized Curriculum Committee.

This committee will be responsible for assisting in the development of a Standardized Peer Support Curriculum. We are looking for members who are knowledgeable about the role of Peer Support Specialists, represent the diversity of the state, and are willing and able to devote their time and energy to this project.

The deadline to submit applications is June 30, 2024 at 5:00 p.m. For additional details, and to apply, view the <u>Standardized Curriculum Committee Application</u>. Applicants will be notified by July 5, 2024 if they have been selected.

2024 PROVIDER EXPERIENCE SURVEY EXTENDED TO JUNE 30

Participation in this survey is vital to understanding how primary care and Ob/Gyn providers experience and are satisfied with North Carolina's Medicaid program and with each PHP.

This survey aids in identifying areas for improvement with the intention of bettering PHP relationships with providers and reducing the administrative burdens of contracting with PHPs.

All practices and organizations that provide primary care and Ob/Gyn services should have received an email, in addition to a physical mail, invitation to participate in the survey in April or May of this year. For practices employed by a larger organization (e.g., UNC or Duke practices), the invitation would have gone to the organization central office. The survey will remain open until June 30, 2024.

Practices and organizations who have not received an invitation to participate or who no longer have the invitation, email <u>csrl@unc.edu</u> and indicate you would like to complete the Medicaid Survey and the name of the practice(s).

STAKEHOLDER ENGAGEMENT FOR BEHAVIORAL HEALTH CLINICAL COVERAGE POLICY UPDATE

NC DHHS invites you to join one of two stakeholder engagements being offered to review updates for Clinical Coverage Policy 8A-9, Opioid Treatment Program. This webinar is open to all stakeholders.

<u>June 24, 2024 | 01:00PM</u> <u>June 26, 2024 | 02:00PM</u>

NCDHHS LAUNCHES NEW STRATEGIC PLAN FOR 2024-2026

NCDHHS has launched its <u>2024-2026 Strategic Plan</u>, which outlines its key priorities for the next two years. The plan is grounded in the <u>department's values</u> and builds on its many successes, such as expanding Medicaid, launching the Division of Child and Family Well-Being and achieving national for the Division of Public Health. As a department, NCDHHS' goal is a healthier state that meets the needs of all North Carolinians.

TAILORED PLANS AND TAILORED CARE MANAGEMENT FOR PRIMARY CARE PROVIDERS AND SPECIALTY PROVIDERS

Tailored Plan (TP) and Tailored Care Management (TCM) play crucial roles in providing comprehensive healthcare services to members.

With TP launch scheduled for July 1, 2024, this course aims to equip PCPs and specialty providers with the necessary knowledge and understanding of TP and TCM, enabling them to deliver and coordinate enhanced care to their patients.

* Register Here

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 <u>Claims Submission Protocol</u> 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.

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.

- A If you missed the <u>June 6th session on Claims here is the link</u>.
- A If you missed the June 11th session on Network here is the link

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

ROADMAP2 READY DISASTER PLANNING





Emergency plans were due May 1st, <u>submit them if you haven't already</u>. If you need any resources to help improve your plan, visit https://asprtracie.hhs.gov/cmsrule.

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. <u>Last month</u> we covered how to provide updated contact information to 911 tele communicators.

Trillium is searching for providers who are interested in working in shelters during natural disasters. We are seeking professionals whose desire is to deliver support and/or crisis counseling during a time when the citizens of North Carolina need them the most. Providers will be assigned to a shelter to support and triage emotional needs prior to, during and after Hurricanes or other potential disasters. For more insight on what this could look like please view this training that the NCDHHS put together. (Available in Trilliums My Learning Campus)

Please <u>complete this document</u> if you wish to notify us of your interest in joining our Shelter Response Team. You must complete all the required fields and submit this document to let us know of your interest.

Thank you for helping us support the people of North Carolina.

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.

REQUEST FOR PROPOSAL ANNOUNCEMENT: OPIOD 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 <u>Provider Network Participation Opportunities</u> 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 <u>Provider Network Participation Opportunities webpage</u> 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 <u>ClaimsSupport@TrilliumNC.org</u>.

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 <u>Claims2@TrilliumNC.org</u> 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 <u>ClaimsSupport@TrilliumNC.org</u>.

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
- A 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 <u>ClaimsSupport@TrilliumNC.org</u>.

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.

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 <u>ClaimsSupport@TrilliumNC.org</u>.

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.

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.