



Network Communication Bulletin #379

To: All Providers

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

Date: October 18, 2024

Subject: Update: Assistance for Providers Experiencing Disruptions Due to Hurricane Helene, Hurricane Helene Policy Flexibilities and Resources, Attention Innovations Waiver Residential Service Providers, Roadmap2Ready: October is Fire Prevention Month, Revised Tailored Plan and Medicaid Direct Claim Submission Protocol, Featured Cultural Competency, DEI, and Bias Trainings, Annual Provider Training Needs Assessment, Working with Children with Complex Needs, Updated Clinical Practice Guidelines List, Innovations Direct Care Worker Wage End of Year Summary Report, Request for Proposal: Transition Management Services, Attention: All State Funded Providers, Providers Submitting Paper Claim Submission, Re-Entry Simulations, Provider Relations Resource for Behavioral Health Providers, DSP Recruitment and Retention Provider Grant Initiative, Trillium is a Closed Network for BH/SUD/IDD, Requesting Naloxone: Process Change Effective September 30, 2024, Day Supports Service Providers Reminder, Need to Report Fraud, Waste, and Abuse?

NEW

UPDATE: ASSISTANCE FOR PROVIDERS EXPERIENCING DISRUPTIONS DUE TO HURRICANE HELENE

Trillium Health Resources is aware that some providers may be experiencing service disruptions due to the impact of Hurricane Helene. To assist these providers, Trillium has created a tool to report and track service and financial disruptions.

Providers can notify Trillium of service disruptions to members via the [Stabilization payment request submission form](#). If funding is being requested, providers will need to fill out the [Disaster Expense Reimbursement Request Form](#) and attach it to the Smartsheet. Upon receipt of the form, Trillium will review and process the request as quickly as possible.

Please reach out to TrilliumFinance@TrilliumNC.org with questions about the process, or to receive updates on the progress of a submission.

WHAT DO PROVIDERS NEED TO DO?

Providers experiencing service and/or financial disruption due to conditions resulting from Hurricane Helene should complete [Stabilization payment request submission form](#) as well as the [Disaster Expense Reimbursement Request Form](#). Questions regarding the process and information required should be directed to TrilliumFinance@TrilliumNC.org.

WHAT TYPES OF EXPENSES CAN THE FORMS BE UTILIZED FOR?

Providers may submit:

- 🌱 Expenses directly related to Hurricane Helene response efforts.
- 🌱 Expenses that cannot be immediately paid for with other funds.
- 🌱 Expenses that are incurred at (a) cost and scale consistent with the need on the ground and (b) whenever possible, in line with the standard rate/cost of such expenses in the normal course of business.

These member-focused expenses may include:

- 🌱 Counseling, crisis counseling, and/or peer support services.
- 🌱 Shelter supports behavioral health, I/DD and TBI needs.
- 🌱 “Guest dosing” of medications.
- 🌱 Other critical expenses related to supporting the behavioral health or other disability needs of people directly impacted by the storm.

HARDSHIP PAYMENT:

For Hurricane Helene hardship requests, providers can continue to claim a hardship payment via email communication to the Financial Hardship team at TrilliumFinance@TrilliumNC.org. Upon receipt, Trillium will review and process the request as quickly as possible.

WHO CAN PROVIDERS CONTACT IF THEY HAVE QUESTIONS?

If providers have questions, they should contact TrilliumFinance@TrilliumNC.org.

HURRICANE HELENE POLICY FLEXIBILITIES AND RESOURCES

[READ THE FULL ARTICLE](#)

The links below provide information on updated flexibilities being implemented by NC Medicaid due to the Hurricane Helene Public Health Emergency.

- [!\[\]\(aca6fcc8bd95e8255b9ea1b1d08ef300_img.jpg\) Disaster Relief Applications Available for Health Care Providers Not Currently Enrolled as a NC Medicaid Provider](#)
- [!\[\]\(0083087c61cec498ac803a4aec5bb1bd_img.jpg\) Reimbursement for Medically Necessary Services during Hurricane Helene](#)
- [!\[\]\(2e94242fda9f31152eb2b29146bfce46_img.jpg\) Behavioral Health Services](#)
- [!\[\]\(680c68b4e62fe5ec9774c1168e904fbf_img.jpg\) Dental](#)
- [!\[\]\(0012cbbec5c5a1cf6c111135ad58ebc0_img.jpg\) Durable Medical Equipment, Prosthetics, Orthotics and Supplies \(DMEPOS\)](#)
- [!\[\]\(87f26857125315836dd413b717a8c1ec_img.jpg\) Family Planning](#)
- [!\[\]\(615ec7e7e0f3dea1f20d356589f114f8_img.jpg\) Innovations and Traumatic Brain Injury \(TBI\) Waiver](#)
- [!\[\]\(4de969360fdb54eeda9f21a7a7358827_img.jpg\) Long Term Services and Supports \(LTSS\)](#)
- [!\[\]\(a2a9cf2d53e65666524c478455611427_img.jpg\) Obstetrical Services](#)
- [!\[\]\(625065e18fcf2a70e8b9353eff469f16_img.jpg\) Outpatient Specialized Therapies](#)
- [!\[\]\(7350d93709b93230905dae80a2cce8d7_img.jpg\) Pharmacy](#)
- [!\[\]\(c27dbf1b9c12f35a291530782bfc3819_img.jpg\) Swing Beds: Expanded Ability for Hospital Swing Beds](#)
- [!\[\]\(65f8038c86ddbc0f86546ddc85ffbb97_img.jpg\) Key Reminders for Providers](#)
- [!\[\]\(66809a365ea12940db3cb7167d7b5e26_img.jpg\) Contact Information](#)

ADDITIONAL RESOURCES AND LINKS

- [!\[\]\(79de0df6c6ddd2d4eb74f1cc5f48ec50_img.jpg\) Hurricane Helene Newsletter – English](#)
- [!\[\]\(d4c9768318b38eff1042b07478e20b4c_img.jpg\) Hurricane Helene Newsletter – Spanish](#)
- [!\[\]\(27d314856359a9d7feca17161bc1f4a4_img.jpg\) Hurricane Helene Response Guidance for Managed Care Health Plans](#)
- [!\[\]\(d355663486c698e3972a8b93ac8b2102_img.jpg\) Medicaid TP Support Calendar](#)
- [!\[\]\(1858f6a9022d088c0a7eca873f99643b_img.jpg\) Hurricane Helen Policy Flexibilities to Support Providers and Recipients](#)
- [!\[\]\(4a9a9afe1808e44249cde903a007394f_img.jpg\) Weathering the Storm](#)
- [!\[\]\(b0b1e1d141c1d30eea8a1d92bb8c534b_img.jpg\) SAMHSA Disaster Distress Helpline](#)

- 🌱 [Replacement Benefits Available for Food and Nutrition Services Recipients Impacted by Hurricane Helene](#)
- 🌱 [North Carolinians Enrolled in Food and Nutrition Services Can Use Benefits to Buy Hot Food Following Hurricane Helene](#)
- 🌱 Call 911 for emergency assistance.
- 🌱 Call 211 for local resources.
- 🌱 For those seeking immediate shelter, ReadyNC.gov lists open shelters.
- 🌱 Specific resource requests should be directed to county emergency management agencies.
- 🌱 Individuals residing in counties affected by the disaster can apply for assistance with FEMA by visiting disasterassistance.gov or calling 1-800-621-3362.
- 🌱 Visit the NCDHHS Hurricane Helene Recovery Resources website for current information.
- 🌱 Visit the North Carolina Department of Public Safety website for Hurricane Helene storm information and resources.
- 🌱 Call or text 988 for mental health support from a trained mental health professional.
- 🌱 Call NC's Peer Warmline (1-855-PEERS NC) to speak to a peer living in recovery from mental health or substance use issues.
- 🌱 First responders and volunteers can call Hope4NC (1-855-587-3463) for support.
- 🌱 The Disability Disaster Hotline provides information, referrals and guidance to people with disabilities and their families during disasters.
- 🌱 The Connections App provides evidence-based support for mental health and substance use recovery.

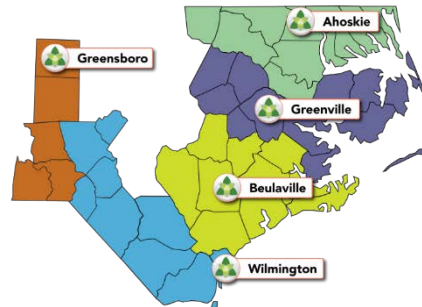
ATTENTION INNOVATIONS WAIVER RESIDENTIAL SERVICE PROVIDERS

This is a reminder that Trillium Innovations providers are required to comply with Clinical Coverage Policy 8-P North Carolina Innovation related to residential services. Private home respite services serving individuals outside their private homes are subject to licensure under NC G.S. 122C Article 2 when: more than two individuals are served concurrently, or either one or two children, two adults, or any combination thereof are served for a cumulative period of time exceeding 240 hours per calendar month.

An Alternative Family Living (AFL) site shall be licensed if serving either (1) one or more minor clients or (2) two or more adult clients. Minor and adult clients shall not reside in the same location. Unlicensed supervised living homes (AFLs) may only serve one adult as criteria not being met for 10A NCAC 27 G.5601 (b) (1) or (2).

ROADMAP 2 READY: OCTOBER IS FIRE PREVENTION MONTH

Roadmap 2 Ready



Part of being prepared is to have a plan for any kind of emergency. We will be providing best practices for preparedness to help your organization. Last month we gave you information about National Preparedness Month. This month we will cover fire, one of the hazards that may have come up as a risk. The Occupational Safety and Health Administration (OSHA) has the following requirements for workplace safety in relation to fire safety. At a minimum, the plan must include but is not limited to the following elements [[29 CFR 1910.38\(c\)](#)]:

- 🌱 [Means of reporting fires and other emergencies](#)
- 🌱 [Evacuation procedures and emergency escape route assignments](#)
- 🌱 [Procedures for employees who remain to operate critical plant operations before they evacuate](#)
- 🌱 [Accounting for all employees after an emergency evacuation has been completed](#)
- 🌱 [Rescue and medical duties for employees performing them](#)
- 🌱 [Names or job titles of persons who can be contacted](#)

If you provide services to members in a residential setting, help them by checking [their smoke alarms](#) and talk about [home evacuation plans](#)! If they have no fire alarms or they need to be replaced, reach out to the American Red Cross for their [free fire alarm installation](#) program.

Please [complete this document](#) 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. For more insight on what this could look like please view this training that the NCDHHS put together. (Available [in Trillium's MyLearningCampus.](#))

REMINDERS

CONNECTIONS-CARE MANAGEMENT PLATFORM

[Network Communication Bulletin #378](#) notified providers that Trillium Health Resources will no longer offer our Tailored Care Management (TCM) platform to TCM providers.

Trillium's intent is to terminate the TCM provider contracts regarding the use of our care management platform no later than June 30, 2025. Future TCM providers will be required to utilize their own platform for documentation of service delivery.

The reason for this decision is that Trillium is not funded, nor is it financially sustainable to continue to support external TCM entities in providing access to Trillium's Connection platform.

REVISED TAILORED PLAN AND MEDICAID DIRECT CLAIM SUBMISSION PROTOCOL

Trillium has posted a revised Tailored Plan & Medicaid Direct Claim Submission Protocol. Trillium revised its protocol based on the updated NC Medicaid Division of Health Benefits PHP Billing Guide that provides guidance to differentiate between Behavioral Health and Physical Health claims. The revised Behavioral Health error messages for EDI and Provider Direct will be deployed on October 16, 2024.

The revised Claim Submission protocol can be found in the [Provider Documents & Forms](#) page on our website under the Claims/Finance Information & Forms.

PHP Billing Guidance V28 will contain the updates and may be found on NC Medicaid Division of Health Benefits website under [Health Plan Billing Guidance](#) when released.

If you have any questions, please contact ClaimsSupport@TrilliumNC.org.

FEATURED CULTURAL COMPENENCY, DEI, AND BIAS TRAININGS

Registration is open for classes including Healthcare, Equity, and You; Supporting Transgender Individuals; Cultural Competency; and The Engagement Strategy with the Eastern Band of Cherokee Indians.

[Review classes and register here.](#)

ANNUAL PROVIDER TRAINING NEEDS ASSESSMENT

Trillium Health Resources requests your participation in the annual Provider Training Needs Assessment. Your participation in this survey is completely voluntary but very useful in the development of topics for provider trainings.

All of your responses will be kept confidential. Responses will only be used for statistical purposes and to determine your training needs. Please take about five minutes to complete this survey so that Trillium's Training Department can provide trainings that your agency needs. If you have any questions, please contact Jackie Tadeo, Training Director (Jackie.Tadeo@TrilliumNC.org). You can access the survey by clicking the following link:

 [Provider Training Needs Assessment](#)

This survey will be available October 4 – November 4, 2024.

WORKING WITH CHILDREN WITH COMPLEX NEEDS

The Build Up Team, housed within the Impact Center at UNC's Frank Porter Graham Child Development Institute is offering an Implementation Science 101 webinar titled Understanding How Implementation Science and Practice May Improve Agency and Clinical Outcomes.

 [Click here to register](#) for Friday, November 8, 2024 from 10am-12pm EST.

UPDATED CLINICAL PRACTICE GUIDELINE LIST

Providers, Trillium has reviewed and updated our Clinical Practice Guidelines (CPG) list which you can access on the CPG home page or use the link below for direct access:

 [Clinical Practice Guidelines | Trillium Health Resources](#)

INNOVATIONS DIRECT CARE WORKER WAGE END OF YEAR SUMMARY REPORT WAS DUE SEPTEMBER 30, 2024

Pursuant to the 2023 Appropriations Act, Session Law 2023-134, North Carolina Medicaid established a process for eligible Medicaid providers to submit required information to participate in the Innovations Direct Care Worker (DCW) provider rate increase that was intended to support increased DCW wages.

Providers should reference the [Innovations DCW Wage Increase Attestation and Acknowledgment Form](#), which details the documentation they can use to support and verify that the Innovations DCW Wage Increase funding was used for the benefit of its Innovations DCW.

Per the legislation, Innovations waiver services providers must submit to the relevant Health Plan an annual summary of expenditures, due three months after the respective State Fiscal Year ending June 30, 2024, to validate distribution of Innovations DCW Wage Increase revenue.

For your convenience, please see the [Example - Innovations Direct Care Worker Wage End of Year Summary Report](#), which details how to complete the required report.

For the State Fiscal Year ending June 30, 2024, the [Innovations Direct Care Worker Wage End of Year Summary Report](#) was due September 30, 2024.

The report should be submitted to RatesFinance@TrilliumNC.org. If you have questions about this report or require assistance, please submit an email to RatesFinance@TrilliumNC.org.

REQUEST FOR PROPOSAL: TRANSITION MANAGEMENT SERVICES

Trillium has posted a Request For Proposal (RFP) to invite service providers to submit a proposal for the implementation of Transition Management Services (TMS). TMS is provided to individuals participating in the Transition to Community Living (TCL) initiative.

TMS is a rehabilitation service intended to increase and restore an individual's ability to live successfully in the community by maintaining tenancy. TMS focuses on increasing the individual's ability to live as independently as possible, managing the illness, and reestablishing his or her community roles related to the following life domains: emotional, social, safety, housing, medical and health, educational, vocational, and legal.

TMS provides structured rehabilitative interventions through a team approach. Providers may submit proposals for one or more of the counties/regions included in the RFP.

The five regions/counties included in the RFP are as follows:

1. Craven
2. Guilford/Randolph
3. Moore/Hoke
4. New Hanover
5. Pitt/Greene/Wilson

For more information, to ask questions, and to apply, please visit the [Current Service Needs](#) page on Trillium's website.

ATTENTION: ALL STATE FUNDED PROVIDERS

DMH/DD/SUS has established the FY 2023-2024 cut off for claims with dates of service in fiscal year 2023–2024 as October 28, 2024. To ensure claims are adjudicated and submitted to NCTracks timely, all state funded claims for dates of service in fiscal year 2023-2024 need to be submitted to Trillium for processing by October 14, 2024. Claims for dates of service in fiscal year 2023-2024 submitted after October 14th are at risk for denial for untimely submission and may not be reimbursable.

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

PROVIDERS SUBMITTING PAPER CLAIM SUBMISSIONS

Contracted providers are contractually required to submit their claims electronically via 837 HIPAA Transaction Files or can be entered via direct data entry into the appropriate provider portal.

Non-contracted providers who are unable to bill electronically, may submit a paper claim to the appropriate address below:

MEDICAID DIRECT:

Trillium Health Resources
PO Box 240909
Apple Valley, MN 55124

TAILORED PLAN:**Behavioral Health/IDD**

Paper Claims Submission
Trillium Health Resources
PO Box 240909
Apple Valley, MN 55124

Physical Health




Paper Claims Submission
Trillium Health Resources
Attn: Claims
PO Box 8003
Farmington, MO 63640-8003

If you have any questions, please contact the Provider Support Service Line at 1-855-250-1539.

RESOURCES:

Need additional information on submitting claims to Trillium [see our website](#).

ADDITIONAL HELPFUL LINKS:

-  [For Providers | Trillium Health Resources](#)
-  [Medicaid Direct & Tailored Plan Claims Submission Protocol](#)
-  [Trillium Tailored Plan Quick Reference Guide](#)

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.

** Please note: The Re-entry Simulation originally planned for September 24 in Bolivia has been rescheduled. The updated schedule is as follows:*

UPCOMING RE-ENTRY SIMULATION EVENTS:

-  [Nash County, NC – October 29](#)
-  Brunswick County, NC – November 19
-  [Robeson County, NC – November 6](#)

PROVIDER RELATIONS RESOURCE FOR BEHAVIORAL HEALTH PROVIDERS

Trillium is offering another way for Behavioral Health providers to connect with their Provider Relations and Engagement Coordinators.

We have been working to improve our level of service and are confident this new process will provide an excellent experience.

To locate your Coordinator, please [visit this link](#) to view the alphabetical listing of Behavioral Health providers.

DIRECT SUPPORT PROFESSIONAL RECRUITMENT AND RETENTION PROVIDER GRANT INITIATIVE

DMHDDSUS is announcing a new funding opportunity to strengthen the DSP workforce. This initiative is designed to provide financial support for DSPs to receive continuing education, training, and professional development to further enhance their ability to provide exceptional care.

The application opens Sept. 9 at noon.

Due Date: Nov. 8, 2024, 12:00 p.m. | **Application:** [Apply here](#)

TRILLIUM IS A CLOSED NETWORK FOR BH/SUD/IDD

As a reminder, Trillium operates a closed network for all behavioral health, substance use, and intellectual and developmental disabilities services. (*N.C. Gen. Stat. 108D-23*).

At this time, Trillium is not accepting requests to add new providers to the Trillium behavioral health, substance use, and intellectual and developmental disabilities provider network outside of a published recruitment opportunity.

Trillium continually assesses the needs of Members and adjusts the network to ensure Members have access to needed services. Current service needs are posted on our [Current Service Needs](#) webpage.

Non-Contracted Providers can submit an [Interest Submission Form](#) to express future interest in contracting for behavioral health, substance use, and intellectual and developmental disabilities services.

Trillium will review interest submissions on a monthly basis.

In-Network Trillium providers requesting contract changes should email NetworkServicesSupport@TrilliumNC.org or use the applicable forms located on our [Provider Documents Forms](#) webpage.

For more information, providers can review our [Network Participation webpage](#).

REQUESTING NALOXONE: PROCESS CHANGE EFFECTIVE SEPTEMBER 30, 2024

In response to the continuing opioid crisis, the North Carolina Department of Health and Human Services (DHHS) seeks to make naloxone more widely available, particularly to individuals and communities at highest risk of opioid overdose.

Effective September 30, 2024 all requests for Naloxone should be submitted to [Where Can I Get Naloxone?](#) The purpose of this form is for organizations to submit requests for naloxone to be provided by DHHS for distribution to individuals at high-risk of opioid overdose or those that may be able to assist in an overdose situation. Department's preference is for providers to use the above weblink to request supplies.

Once on the website, proceed to the bottom of the page under the heading Request for your Organization: "[Click here to submit your request](#)" for needed supplies.

DAY SUPPORTS SERVICE PROVIDERS REMINDER

This is reminder that providers who offer Day Supports Services, must adhere to the Day Supports Service definition under [NC Medicaid North Carolina Innovations Medicaid Clinical Coverage Policy No: 8-P](#) which states:

Transportation to/from the beneficiary's home, the day supports facility and travel within the community is included in the payment rate. Transportation to and from the licensed day program is the responsibility of the Day Supports provider.

Non-Emergency Medical Transportation (NEMT) **cannot** be used to transport Tailored Plan Members to and from Day Supports services.

Day Supports Providers may be subject to monitoring to ensure to adherence to NC Medicaid North Carolina Innovations Medicaid Clinical Coverage Policy No: 8-P.

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.