

Network Communication Bulletin

Transforming Lives. Building Community Well-Being.

To: All Providers

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

Senior VP of Network Management

Date: January 13, 2025

Subject: Mental Health Parity Kickoff January 21, 2025; NCTracks Updates; January 2025 Provider

Training Schedule Now Available; Delay in Division of Health Service Regulation License Renewal Updates; Renewal of Department of Health Service Regulation License; Upcoming Re-Entry Simulation January 29, 2025; Request for Applications: Mobile Crisis Provider (Medicaid and State); Innovations Incident Reporting for Failure to Provide Back-up Staffing; Updated Trillium Provider Trainings; 2024-2025 National Core Indicators – I/DD Survey; Roadmap2Ready: January; Request for Applications: Rural Equity and Innovation in Integrated Care; Medication Management Services - Open Enrollment; 2025 Trillium Family Weekends at Victory Junction; Important Information for Relative as Direct Support Employee; IRIS Reminders for Providers; Trillium is a Closed Network for BH/SUD/IDD; Need to Report Fraud, Waste, and Abuse?

NEW

MENTAL HEALTH PARITY KICKOFF JANUARY 21, 2025

We invite you to attend the Mental Health Parity Kickoff







MENTAL HEALTH PARITY KICKOFF JANUARY 21, 2025

January 21, 2025

10:00 a.m. to 11:00 a.m.

Register Here

EQUAL ACCESS

No limitations or restrictions on MH/SUD benefits compared to other covered services regarding copays, deductibles, out- of- pocket maximums, treatment limitations, or prior authorization requirements.

BENEFIT DESIGN

MH/SUD benefits are structured with comparable coverage levels, including an adequate network of providers and treatment opt ions the same as other medical services

Provider Support Service: 1-855-250-1539

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



PANELISTS

Joy Futrell	Cindy Ehlers	Tracy Hayes	Rob Robinson
CEO- Trillium	COO- Trillium	CEO- Vaya	CEO - Alliance

NCTRACKS UPDATES

THE NC DIVISION OF HEALTH BENEFITS (DHB) HAS RECENTLY PUBLISHED NEW MEDICAID BULLETIN ARTICLES:

- New Unit Limitations for Allergy Testing & Allergy Immunotherapy CPT Codes Effective Feb. 1, 2025, updated unit limitations will be applied to some allergy testing and immunotherapy CPT codes.
- Updated Policy Guidance for Personal Care Services for Beneficiaries in Congregate and In-Home Settings - Providers will continue to follow Personal Care Services in In-home settings (3L) from Jan. 1, 2025, through March 31, 2025.

Providers are encouraged to review this information. All bulletin articles, including those related to COVID-19, are available on <u>DHB's</u> Medicaid <u>Bulletin webpage</u>.

1099s TO BE MAILED NEXT WEEK

The 1099s will be mailed on Thursday, Jan. 16, 2025. The 1099s will be sent to the "1099 Reporting/Pay-To Address" location currently on the provider file. Due to postal service volume, providers should allow seven to 10 business days to receive a 1099. For more information about the 1099s, refer to the 1099 Frequently Asked Questions on the NCTracks Provider Portal.

JANUARY 2025 PROVIDER TRAINING SCHEDULE NOW AVAILABLE

Registration is open for the <u>Jan. 2025 training courses</u> listed below. NCTracks zoom courses can be attended remotely from any location. Courses offered this month include:

- Prior Approval Medical
- Submitting an Institutional Claim
- New Office Administrator
- Create and Submit a PA for DME and Home Health Supply using Electronic Physician Signature
- Submitting A Professional Claim Provider NEMT
- Submitting a Prior Approval Private Duty Nursing

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

Jan. 2025 Provider Training Schedule

REMINDERS

DELAY IN DIVISION OF HEALTH SERVICE REGULATION LICENSE RENEWAL UPDATES

NC Medicaid requires providers to keep credentials current on their NCTracks provider enrollment record. The expiring credential must be verified as renewed through the licensing entity prior to being updated on the NCTracks record. NC Medicaid is aware and collaborating with the Division of Health Service Regulation (DHSR) regarding the inventory of pending license renewal applications. Any DHSR licensure renewal application that was submitted to DHSR prior to December 31 will remain active with NC Medicaid until DHSR processes all the renewals. Any DHSR Providers due to suspend, due to the expired license, will remain in active status until all renewal applications are completed by DHSR.

In addition, DHSR will send to NC Medicaid a licensure file, each week which is used to update the NCTracks provider enrollment record. As provider licenses are renewed, the information is shared with NC Medicaid and updates are automatically made on the NCTracks record. Providers may also report the license renewal using the NCTracks MCR process upon notification from DHSR that the license is renewed, knowing that NCTracks will verify the status and new expiration date using the file received from DHSR prior to updating the NCTracks enrollment record.

For inquiries related to the status of your license, please contact **DHSR**.

RENEWAL OF DEPARTMENT OF HEALTH SERVICE REGULATION LICENSE

Trillium Health Resources reminds providers to renew their Department of Health Service Regulation (DHSR) license. When providers renew their licenses, this prevents disruption in care for our members. For instructions on how to renew DHSR licenses, please see and click the hyperlinks below:

- 1. NC Division of Health Service Regulation Mental Health and Licensure and Certification Section.
- 2. Review Question number 21. When do I need to review my license? Answer: All licenses expire at the end of the calendar year. A renewal application must be submitted through DHSR's online <u>Enterprise System</u>.
- 3. Select Complete Your License Application box, and select Renewal Application Sign-in.

RE-ENTRY SIMULATION

Trillium Health Resources has been 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 SIMULATION EVENT:

Pasquotank County, NC – January 29, 2025

REQUEST FOR APPLICATIONS: MOBILE CRISIS PROVIDER (MEDICAID AND STATE)

Trillium is seeking providers to deliver state funded and Medicaid Tailored Plan and Medicaid Direct Mobile Crisis services in specified counties. The coverage area for this RFA includes Sampson, Bladen, Columbus, Robeson, Scotland, Hoke, Lee, Moore, Anson, Richmond, Montgomery, Randolph and Guilford counties

ELIGIBLE APPLICANTS:

Applicant must be enrolled in the Trillium provider network. The applicant must be currently also be enrolled as a state funded and Medicaid Tailored Plan and Medicaid Direct provider. Applicant must be willing to serve all ages in acute behavioral health or IDD crisis. Preference given to agencies that offer a robust continuum of care available in the region they are applying to serve. MCM Services must be provided both in person and through telehealth approaches. MCM must have access to psychiatric services 24/7. Applicant must be in good standing with Trillium.

ADDITIONAL ELIGIBILITY:

- Eligible applicants must currently have a minimum of 100 Trillium members receiving services.
- Eligible applicant must have current primary BH outpatient sites located within the majority of the coverage area. The coverage area for this RFA includes Sampson, Bladen, Columbus, Robeson, Scotland, Hoke, Lee, Moore, Anson, Richmond, Montgomery, Randolph and Guilford counties
- Eligible applicants must demonstrate the necessary relationships with local law enforcement to divert members from ED and Incarceration into appropriate treatment settings.
- Applicants must provide evidence of established and working DEI policies that ensure that people of all backgrounds are supported equitably according to their uniqueness.
- Agencies must provide evidence of an established Electronic Health Record of data collection and tracking that can monitor effectiveness, integrate data and track member outcomes.

- Language, are made available and utilized for effective, appropriate communication.
- The agency awarded must agree to improve data collection and report quality measures using the Healthcare Effectiveness Data and Information Set (HEDIS) based on race, ethnicity, disability status, sexual orientation, gender identity and health related resource needs.
- A Preference given to historically underutilized providers that meet all criteria for this RFA.

If your organization meets all the criteria, please click the link and complete the form below and apply for a meeting to discuss your plan for this model with our team no later than January 10, 2025.

RFA: Mobile Crisis Provider (Medicaid and State)

INNOVATIONS INCIDENT REPORTING FOR FAILURE TO PROVIDE BACK-UP STAFFING

Provider agencies are expected to inform Trillium when a staff member cannot deliver a service. The provider agency must report whether the agency cannot provide back-up staffing, or back-up staffing was offered, but declined by the member/guardian. This reporting is required bi-weekly using the *Innovations Incident Reporting for Failure to Provide Back-Up Staffing* form. The updated form can be found here.

Please ensure the following form fields are completed in their entirety:

- Covered period Provider Agency
- Provider Site Location/Address
- Date of missed service.
- Member's first and last name
- Member's date of birth

- Service(s) missed
- Number of hours missed
- Reason for missed hours
- Name/Number/Email of person completing the form

BACK-UP STAFFING REPORTING SUBMISSION

- A Hours missed from the 1st-15th of the month are due by the 22nd of the month.
- A Hours missed from the 16th to the end of the month are due by the 7th of the following month.
- Back-up staffing reports must be emailed to Trillium, Zixsecure, at IncidentReporting@TrilliumNC.org.

Thank you for your diligent efforts in submitting back-up staffing reports promptly. If you have any questions, please reach out to lncidentReporting@TrilliumNC.org.

UPDATED TRILLIUM PROVIDER TRAININGS

Provider My Training Campus

Updated Tailored Plan Provider Trainings

- 1. Culturally and Linguistically Competent Care
- 2. Disaster Planning: Preparing for Responding to, and Recovering from a Crisis or Emergency Event
- 3. Fraud, Waste, and Abuse Detection, Investigation, and Prevention Microlearning Series
- 4. HIPAA Privacy and Security Rules Microlearning Series
- 5. Linking to Other Programs Microlearning Series
- 6. Member and Recipient Rights and Responsibilities
- 7. Tailored Care Management for Youth in Foster Care, Receiving Adoption Assistance or Former Foster Youth
- **8.** The Engagement Strategy with the Eastern Band of Cherokee Indians Microlearning Series

Updated Medicaid Direct PIHP Provider Trainings

- 1. Culturally and Linguistically Competent Care
- 2. Difference Between NC Medicaid Direct, including the PIHP, and Medicaid Managed Care Program
- **3.** Disaster Planning: Preparing for Responding to, and Recovering from a Crisis or Emergency Event
- **4.** Fraud, Waste, and Abuse Detection, Investigation, and Prevention Microlearning Series
- 5. HIPAA Privacy and Security Rules Microlearning Series
- **6.** The Engagement Strategy with the Eastern Band of Cherokee Indians Microlearning Series

2024-2025 NATIONAL CORE INDICATORS-I/DD SURVEY

Trillium is partnering with NCDHHS to support the annual National Core Indicators (NCI) survey, which evaluates the outcomes of individuals receiving Intellectual and Developmental Disability (I/DD) services. This survey examines critical areas such as employment, community involvement, relationships, health and wellness, safety, and access to services. Standardized questions allow for comparisons between states and provide valuable insights into service quality.

How Providers Will Be Involved

Beginning in December 2024, providers serving members with I/DD aged 18 and older may be contacted to assist in the following ways:

Obtaining member consent for survey participation.

A Providing background information for consenting members.

Survey administration will be handled by the Carolina Institute for Developmental Disabilities (CIDD), a third-party organization contracted by the State.

ELIGIBILITY REQUIREMENTS FOR SURVEY PARTICIPATION

Members must meet the following criteria to participate in the survey:

- A Be diagnosed with an intellectual or developmental disability.
- A Receive Medicaid-funded services from an I/DD provider agency.
- A Be at least 18 years old.

NEXT STEPS FOR PROVIDERS

If your agency provides services to eligible members, please email <u>Surveys@TrilliumNC.org</u> with contact information for the point of contact for the NCI-IDD survey within your agency as soon as possible. Trillium will send additional details, including the list of members selected to participate, via email.

For questions or more information, contact <u>Surveys@TrilliumNC.org</u> or call 1-866-998-2597 (ask for Amanda Morgan).

Thank You for Your Partnership

Your support is essential to the success of this important initiative, which helps evaluate and improve services for individuals in our community.

ROADMAP2READY: JANUARY

Happy New Year! Take the initiative to improve your emergency plans for your organization this year. Each month we will cover a topic that is a part of the Centers for Medicare & Medicaid Services Emergency Preparedness Rule. Interested to see what we covered last year, <u>click here?</u>

One of the topics was on Hazard and Risk assessments, here are some resources in case you missed it. January is a good time to review the hazards and risks that came up in that assessment. Your local Emergency Management office and Healthcare Preparedness Coalition should have an All-Hazard risk assessment for your region which will help with coordination and communication. You can compare the two and see how they compare to yours!

There are seven (7) <u>North Carolina Healthcare Preparedness Coalitions</u> (HPCs) that work with the common mission of facilitating communication, coordination, and collaboration between healthcare facilities, public agencies, and the State of North Carolina. Their primary goals are to:

- Strengthen Partnership Engagement
- Support Information Sharing

- Expand Medical Surge Readiness
- Improve Incident Coordination
- Promote Fiscal Responsibility

Find out which Coalition covers your area by <u>visiting the website</u> and reach out to attend their meetings. They host trainings, exercises and provide preparedness resources to the regions they serve. <u>Check out trainings</u> that are available to you across the state.

REQUEST FOR APPLICATIONS: RURAL EQUITY AND INNOVATION IN INTEGRATED CARE

SOUTHEASTERN AND SOUTH CENTRAL NORTH CAROLINA

Rural Equity and Innovation Integrated Care (REI-IC) will increase capacity to meet integrated care needs of southeastern and south central rural NC and address health disparities in this region by paying for equity for Tailored Plan members living in this region. This Request for Application (RFA) will award 1M in funding for 6 providers. The model will evaluate the impact of a value-based care (VBC) approach focused on Tailored Plan members. The model will provide access to primary care treatment through an integrated care delivery framework located in a specialty BH community based organization. The organization will have a primary focus on members with moderate to severe mental health conditions and/or chronic substance use disorders and will include members with dual IDD diagnosis. Members will have access to primary care services in the same setting as behavioral health services.

The primary outcome is to increase access to integrated care in Tier I counties in rural NC. Other objectives of this demonstration pilot also include improving quality of care, timely access to appointments for Tailored Plan members, reducing avoidable emergency department and inpatient utilization, and strengthening telehealth systems capacity.

Trillium will award funding for up to 6 providers for this pilot.

ELIGIBLE APPLICANTS:

Applicant must be enrolled in the Trillium provider network. The applicant must be Non-profit 501(c)3 currently enrolled in Medicaid to provide BH/SUD and IDD services. Applicant must be willing to serve adults and children 16 and up for acute and chronic behavioral health and add primary care. Preference given to agencies that also treat adults with co-occurring IDD needs. Services must be provided both in person and through telehealth approaches. Applicant must be in good standing with Trillium.

ADDITIONAL ELIGIBILITY:

Eligible applicants must currently have a minimum of 300 Medicaid Tailored Plan members receiving services.

- Eligible applicant must have current primary BH sites located in Tier I or Tier II counties within the majority of North Carolina's Region 5 including; Pender, New Hanover, Brunswick, Sampson, Bladen, Columbus, Robeson, Scotland, Hoke, Lee, Moore, Richmond, Montgomery, Randolph, Guilford (from Region 2).
- Eligible applicants must have the ability to demonstrate current telehealth applications and capabilities and effective and efficient use of an internal telehealth network across multiple counties to increase access to behavioral health and add primary care. In addition, the model assures coordination of services to support chronic and acute physical health conditions as part of the member integrated care plan and care team model of delivery.
- Applicants must provide evidence of established and working DEI policies that ensure that people of all backgrounds are supported equitably according to their uniqueness.
- Agencies must provide evidence of an established Electronic Health Record of data collection and tracking that can monitor effectiveness, integrate data and track member outcomes.
- A Eligible agencies must offer or be willing to offer Tailored Care Management and Crisis services as part of their service array.
- A Eligible agencies must ensure language interpretation services, including American Sign Language, are made available and utilized for effective, appropriate communication.
- The agency awarded must agree to improve data collection and report quality measures using the Healthcare Effectiveness Data and Information Set (HEDIS) based on race, ethnicity, disability status, sexual orientation, gender identity and health related resource needs.

If your organization meets all the criteria, please click the link and complete the form below and apply for a meeting to discuss your plan for this model with our team no later than January 10, 2025.

See Details and Apply Here

MEDICATION MANAGEMENT SERVICES: OPEN ENROLLMENT

Trillium has identified the need for additional Psychiatric Medication Management Services. These services focus on reducing psychiatric and behavioral symptoms to improve functioning in familial, social, educational, or occupational life domains. Providers must be enrolled in NC Tracks and meet all of the requirements in <u>Clinical Coverage Policy 8C</u>.

Qualified practitioners include:

- Psychiatrist/ MD/ DO
- Psychiatric Mental Health Nurse Practitioner (PMHNP)
- Physician Assistant (PA)
- Nurse Practitioner (NP)

2025 TRILLIUM FAMILY WEEKENDS AT VICTORY JUNCTION

April 4-6, 2025 | Application Deadline: Friday March 21, 2025

April 11-13, 2025 | Application Deadline: Friday March 28, 2025

Get ready—the newest session for Trillium Family Weekend at Victory Junction is here! We hope our members and families will take advantage of the camp's inclusive environment and diverse amenities.

The weekend is a unique experience for families to connect. Campers of every ability can feel fully empowered. Victory Junction adapts activities for every need. The camp's amazing staff are familiar with hosting Trillium families. They even accommodate special diets. There is no cost to attend.

Open to all Trillium members and their families or natural supports, regardless of age or diagnosis.

Come experience the magic of camp with us! Spots are limited! Complete the <u>Spring 2025 Interest</u> Form to begin your application. Check the <u>Spring Flyer</u> or visit the <u>Victory Junction Family Weekends Webpage</u> to learn more!

IMPORTANT INFORMATION FOR RELATIVE AS DIRECT SUPPORT EMPLOYEE

Effective December 1, 2024, providers and/or employer of record (EOR) should use the following link to request initial or renewal of Relative as Direct Support Employee (RDSE), formerly known as Relative as Provider (RAP): <u>Innovations Waiver - Relative/Guardian as Direct Service Employee</u>.

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 <u>not accepting requests to add new providers</u> 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. <u>Current service needs</u> are posted on our website. Non-contracted providers can submit an <u>Interest Submission Form</u> to express future interest in contracting for behavioral health, substance use, and intellectual/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 on our Provider Documents & Forms webpage.

For more information, providers can review our Network Participation webpage.

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.