

Frequently Asked Questions Providers

Transforming Lives. Building Community Well-Being.

1. Although there are no authorizations required from February-April can I start submitting authorizations now for May?

Yes, you can submit them

2. I see that Developmental Therapy has end dated on your rate sheet effective 12/31. Is that due to the consolidation?

Please see Clinical Communication Bulletin 041.

3. When the consolidation is complete, will we be keeping Provider Direct as the main site for providers?

Yes.

4. Will the Trillium rates stay the same after the consolidation? they are different rates from Sandhills Center (SHC) and Eastpointe (EP).

We are committed to maintaining the same funding levels at this time for providers and services they are rendering. Please refer to <u>Clinical Consolidation</u> Communication 02.

5. Will providers need to do client updates for all Medicaid members or is it just for IPRS?

Medicaid member eligibility will be loaded via the 834 eligibility file received from the Department of Health Benefits (DHB). We are working diligently with Eastpointe and Sandhills to get existing State funded eligibility data loaded for the providers. Any New Enrollments for State funds or Client Updates for dates of service February 1, 2024 and after will need to be entered in Provider Direct.

6. Will unmanaged visits reset or will the visits used follow the Sandhills and Eastpointe members over to Trillium?

Yes, all 3 MCOs will reset as of May. Unmanaged visits will also reset on July 1st.



7. How can I receive Communications about the Consolidation?

Sign-up to receive Trillium communications

- In your browser, type <u>www.trilliumhealthresources.org</u>
- 2. Scroll to the bottom of the screen to locate "SIGN-UP FOR OUR COMMUNICATION"
- 3. Select "For Providers"
- 4. "Sign up to stay in the know!"
- 5. Enter the following on the screen:
 - a. Fmail Address
 - b. First Name
 - c. Last Name
 - d. Address
 - e. Company
- 6. Select the "Email Lists" you would like to receive
- 7. Members/Families (Members/Recipients Communication Bulletins/Newsletter)
- 8. NETWORK PROVIDER Clinical/Network/Urgent Communications
- 9. Click "Sign Up" at the bottom of the form

You may also visit https://www.trilliumhealthresources.org/consolidation

8. Can someone explain how the legacy system of EP and SHC will work regarding old claim issues?

Dates of service prior to 2/1/24 will go to the claims systems at EP or SH, any claims post 2/1/24 will come to Trillium's system/processed by Trillium.

9. How long will legacy system be intact with EP and SH- working with EP now to resolve claims issues and want to ensure this is addressed?

Legacy systems will be functioning for 12 months

10. Asked about Direct Support Worker rate increases- contacted EP multiple times, being referred to Trillium consolidation memo?

We have received confirmation that EP has updated rates per Department guidance. Request that questions be emailed to RatesFinance@TrilliumNC.org to ensure EP rates are being applied and providers concern is addressed.

11. When will there be training on using Trillium's authorizations process. EP has ended authorizations as of 1/31/24. Medicaid looks like it has ended 1/31, no authorization to transfer 2/1.

We will provide instructions on accessing PD - system we use and will include migrated information from EP/SHs. Can also contact us is assistance/further assistance needed. There is training available within the system. There are also flexibilities around won't need authorizations for members transitioning 2/1/24.

12. Do we need to move all members to Trillium 2/1/24?

From enrollment perspective, members will show up on 834. For members with State Funded eligibility, working with EP-SHs on uploading that information now.

13. PD username/passwords- will new providers receive this information and when?

Additional information upcoming in clinical communication bulletin, there will be required training and access will be granted once provider transition information is received. Understand the importance of getting providers looped in.

14. I have contracts with both Eastpointe and Trillium. How will that work now that Trillium is over all of the counties that I serve?

Please be assured that our team is actively working to streamline the contracting transition. You will automatically move into the Trillium Network. Trillium is committed to ensuring a seamless transfer of services and contracts. Our primary goal is to minimize disruptions and maintain continuity in services. We are in the process of reviewing all existing contracts. We understand the importance of timely communication. Our aim is to provide you with regular updates on the progress of our contracting. To ensure a successful transition of services, we may need your cooperation in reviewing and confirming the details of your existing contracts. We will reach out to you promptly with specific information that might be needed to facilitate this process.

15. When will Eastpointe and Sandhills members transitioning to Trillium receive a new Trillium card?

Member ID Cards will be sent by NCDHHS as part of the annual recertification cycle rather than in February 2024.

The Enrollment Broker has distributed enrollment letters to members who transitioned LME/MCOs as part of consolidation. Members can continue to use their existing Medicaid ID Cards to get services.

16. Will the Sandhills training for Fraud and Waste and Culturally and Linguistically Competent Care transfer?

There is reciprocity for FWA. Please click on link below for steps on how to submit and further information.

Network Communication Bulletin 257

17. We are currently connected as a clearinghouse. Are current clearinghouses not allowed?

Please send in question via email to PDSupport@TrilliumNC.org and we can respond and provide details/review specifics of situation

18. We have been an established provider for Trillium for years but will have some of our residents with Eastpointe & Sandhills transition to Trillium. Do I still need to complete the forms again that were mentioned in the Clinical Consolidation Bulletin 003 dated 1/4/24?

No, you do not need to complete these forms since you are already contracted with Trillium and previously completed these forms. <u>Clinical Consolidation Communication</u>

<u>03</u> is targeted to providers who are only contracted with Sandhills and/or Eastpointe.

19. How do I submit claims to Trillium?

It is imperative that you have a Provider Direct log-in. For details please see Clinical Consolidation Communication 03

20. If you are an existing provider in all three consolidating MCOs is there action required during this transition?

If the provider has a full contract with Trillium and serves EP/SHs area, you do not have to complete new information

21. Will the consumers from Sandhills and Eastpointe have the same LME numbers or will these be changing?

Members within the Sandhills and Eastpointe catchment area will be assigned a Trillium client identification number. In instances where a member has been in the

Trillium system before, such as relocating between counties, their previously assigned client identification number may be retained. Members Medicaid identification number will not change.

22. Do we have to provide separate forms for Eastpointe and Sandhills if we are existing with Trillium or can we send 1 form for both Sandhills and Eastpointe?

If fully contracted with Trillium, don't have to complete forms. Packet is for EP/SHs not fully contracted with Trillium.

23. Who will be responsible for submitting the SAR/TAR for Innovation Waiver services? Providers or Care Coordinators?

Providers

24. If there is a current authorization on file for Eastpointe and Sandhills client will a new authorization be required for Trillium or will it transfer?

Please see <u>Clinical Consolidation Communication 01</u> and <u>Clinical Consolidation</u> Communication 04

25. What do providers need to do with HHA Exchange to ensure no disruptions?

Please see Clinical Consolidation Communication 04

26. Our agency had a previous OON contract and log in credentials with Trillium over a year ago. We are now only contracted with Eastpointe and our login no longer works with Trillium. What do we do?

You will have to follow the process outlined in <u>Clinical Consolidation Communication</u>

03, complete the Systems Administrator Training to get a new Provider Direct login.

27. Is there a way that providers can check and see if the members they serve for Eastpointe are in Trillium's Provider Direct?

834 has been loaded. We are working diligently with Eastpointe and Sandhills to get existing State funded eligibility data loaded for the providers. Any New Enrollments for State funds or Client Updates for dates of service February 1, 2024 and after will need to be entered in Provider Direct.

28. Will we receive confirmation that the packet from Clinical Consolidation Communication 03 was received?

Yes, you will receive confirmation that the packet was received.

29. I would like clarification on what this means please. In Communication Bulletin 004, it says that For claims filed for all new admissions that do not have a prior authorization during the dates February 1, 2024-May 31st, 2024 providers will need to upload a Comprehensive Clinical Assessment and/or Psychological evaluation and PCP, ISP, care plan or service plan that supports dates of services for all services. It is the expectation that all agencies will ensure clinical documents are in place in in Provider Direct medical record to support medical necessity for claims filed for services for new admissions beginning February 1, 2024 - May 31, 2024.

When you are able to start submitting clinical documents, please begin doing so to support the NPA.

30. Once you complete the training and want to start submitting the Authorizations, do we use only Trillium's LOC forms or do we need to submit Eastpointe/Sandhills LOC forms instead?

It will be via Trillium's Provider Direct in a specific module.

31. If I am a current System Administrator for Trillium, do I have to take the Provider Direct 3.0 System Administrator Training?

Nο

32. What is the Additional Counties IDD Provider Checklist for?

Thank you for inquiring the Additional Counties IDD Provider Checklist Form, this form inadvertently was posted, and will be removed from the website to avoid any further confusion.

33. We are a current Sandhills provider moving to Trillium. We have unlicensed AFL health and safety reviews due in February. What does this process look like for Trillium? Who should I contact about scheduling?

Providers will still have the Health & Safety reviews conducted by the Sandhills staff, who will be Trillium staff as of 2/1/24. They will be reaching out to get something scheduled.

34. Billing KX code is used at Sandhills for outpatient therapy telephonic code.

Does Trillium have a Telephonic code for outpatient therapy?

Yes, please see Medicaid Clinical Coverage Policy No. 8C

35. We have a client with Sandhills receiving LTCS. Is CLFS the service that they will be transitioning to on 2/1? If so will the service be cross walked on our contract?

Yes, LTCS is cross walked to CLFS

36. We have a client whose authorization with Eastpointe ends on January 28, 2024; however the Trillium consolidation doesn't begin until February 1, 2024. What do we do about the 2 days that the client is not authorized?

Submit an authorization to cover the two days

37. Will we be able to access the Provider My Learning Campus prior to 2/1 if I only have contract with Sandhills?

You can access prior to 2/1 but need to complete the process as outlined in <u>Clinical Consolidation Communication 03</u> – concentrate on PD System Administrator Training if that is needed for your agency

38. What if we want a new contract?

Visit page on Trillium's website for provider opportunities at https://www.trilliumhealthresources.org/for-providers/request-opportunities

39. Can we continue using Therap?

For technical questions around SFTP set up or connection with a clearinghouse that Trillium utilizes, Network Consolidation Communication Bulletin 001 (link below to recent communications) provides clearinghouse information. If you have additional questions please submit those to PDSupport@trilliumnc.org. If you are an EVV vendor, please see Clinical Consolidation Communication Bulletin 04 for EVV information at consolidation-for-providers.

40. What is your fiscal year end for state funded claims?

Fiscal Year end for State Funded Claims is 6/30 of every year. There is also a Department timely filing cut off for the submission of State Funded claims. This information will be communicated with providers closer to fiscal year end in June.

41. With the mission of keeping providers whole during this transition, has Trillium considered moving out their timely filing window to 180 days to align with all other MCO's?

It will be 365 days for Medicaid starting 2/1/24; State will remain 90 days

42. Where can I find information for services under EPSDT?

See Clinical Consolidation Communication 09

43. Do you require NC SNAPS for a TAR?

Yes, we follow clinical coverage policy on when NC SNAPS are used in determining medical necessity

44. We are having trouble determining if the client has State (IPRS) or Medicaid, how can we find that information?

When in the Provider Direct Client section you will see a tab "Insurance Plans" this will indicate State, Medicaid B, Medicaid C etc...

45. Is there a form that must be filled out to prior to uploading 837?

Yes. SFTP form: Trillium SFTP Access Change TCM Form