

# NEW PROVIDER REFERENCE GUIDE

Provider Support Services: **1-855-250-1539**

Member & Recipient Services: **1-877-685-2415**

Monday – Saturday, 7 a.m. – 6 p.m



<p><b>Trillium Health Resources</b></p> <p>Visit our website at to learn more about Trillium. <a href="https://www.trilliumnc.org">TrilliumHealthResources.org</a> <a href="#">BH/IDD Tailored Plan Provider Manual</a></p>	<p><b>Provider Questions &amp; Support</b></p> <p>Network Services Ticket System for all questions, concerns, comments, and requests. To submit a service ticket please email <a href="mailto:NetworkServicesSupport@trilliumnc.org">NetworkServicesSupport@trilliumnc.org</a> For immediate assistance call <b>Provider Support Services 1-855-250-1539</b> Monday – Saturday, 7 a.m. – 6 p.m.</p>
<p><b>NCTracks</b></p> <p>Medicaid Management Information System for the N.C. Department of Health and Human Services (N.C. DHHS). Providers must be enrolled and maintain <b>Active status</b> to remain contracted with Trillium and receive reimbursement for services. <a href="#">NC Tracks 1-800-688-6696</a> <b>Member Eligibility</b>—Providers can check Members' and Recipients' insurance status.</p>	<p><b>My Learning Campus</b></p> <p>Web-based training/education site to access recorded modules on topics Trillium deems important for Providers to complete. Available 24/7, including videos, tests, evaluations, certificates, and record-keeping system. To create your account and access courses, please fill out the <a href="#">Provider Learning Campus User Agreement form</a>. After creating your account, check out the <a href="#">Provider My Learning Campus</a></p>
<p><b>Provider Enrollment</b></p> <p>Prior to contracting or provision of services, all providers and practitioners must be enrolled and credentialed with the NC Department of Health and Human Services via NC Tracks <u>and</u> approved by Trillium for network participation. Please email <a href="mailto:NetworkServicesSupport@trilliumnc.org">NetworkServicesSupport@trilliumnc.org</a> for questions related to joining the Trillium network or updating a current agreement. For questions related to affiliating practitioners with your organization, please email <a href="mailto:ProviderEnrollment@trilliumnc.org">ProviderEnrollment@trilliumnc.org</a>.</p>	<p><b>Provider Direct</b></p> <p><b>Platform to enter or upload</b></p> <ul style="list-style-type: none"><li>• Treatment Authorization Requests (TARs)</li><li>• Person-Centered Plans (PCPs)</li><li>• Individual Service Plans (ISPs)</li><li>• Submit Claims</li></ul> <p>To gain access to Provider Portal</p> <ol style="list-style-type: none"><li>1. Complete the Provider Direct System Administrator training on <a href="#">Provider My Learning Campus</a>.</li><li>2. Submit a certificate of completion along with the <a href="#">System Administrator Designee Request Form</a> to <a href="mailto:PDsupport@trilliumnc.org">PDsupport@trilliumnc.org</a>.</li><li>3. Once you complete the training and System Administrator Designee Request Form, you will receive your login credentials.</li></ol> <p>For technical issues please email <a href="mailto:PDsupport@trilliumnc.org">PDsupport@trilliumnc.org</a>.</p>
<p><b>Finance</b></p> <p>Requesting rate adjustments are rare exceptions to using standard rates. Occasionally, individual-specific rates may be established, but only if the individual's need cannot justifiably be met using an established rate. If approved, the special rate will be based on the individual's clinical needs and provider's requirements. If you need a specialized rate please submit a request to Rates Finance.</p> <p><b>Schedules by Service Type &amp; Funding Source</b></p> <ul style="list-style-type: none"><li>• <a href="#">Billing Codes &amp; Rates   Check Write Schedule</a></li><li>• <a href="#">Authorization Agreement for Direct Deposit</a>—send to <a href="mailto:FinanceForms@trilliumnc.org">FinanceForms@trilliumnc.org</a></li><li>• Specialized Rate—<a href="mailto:RatesFinance@trilliumnc.org">RatesFinance@trilliumnc.org</a></li></ul>	<p><b>Claims</b></p> <p>Providers are contractually required to submit their claims electronically via 837 HIPAA Transaction files or can be entered via <a href="#">Provider Direct</a>. Claims should be submitted timely in accordance with contractual guidelines. Claims submitted outside of the timely filing guidelines will deny.</p> <ul style="list-style-type: none"><li>• <a href="#">Claims Request Form (Claims Request Form Purpose)</a></li><li>• <a href="#">Remittance Advice (RA) Companion Guide</a>—Documentation of adjudicated claims status. This can be found in <a href="#">Provider Direct</a> under File Transfers/View File Repository.</li><li>• <a href="#">Replacement-Voided-Denied Claims Process</a></li><li>• <a href="#">Electronic Visit Verification (EVV)</a>—For questions and issues, email <a href="mailto:NCsupport@hhaexchange.com">NCsupport@hhaexchange.com</a> or call <b>1-866-242-2465</b>.</li></ul>
<p><b>Helpful Links for Providers</b></p> <p><a href="#">Clinical Practice Guidelines</a> <a href="#">Benefit Plans   Service Definitions</a> <a href="#">Value-Based Care</a> <a href="#">Communication Bulletins</a> <a href="#">Documents &amp; Forms</a> <a href="#">Zixmail Secure for Providers</a></p> <p>*Emails containing Personal Health Information should be sent securely.</p>	