

**To:** All Providers  
**From:** Dr. Paul Garcia, Vice President of Utilization Management and Benefits  
**Date:** August 26, 2025  
**Subject:** 1915 I updates – New assessment tool and service clarifications

## 1915 I UPDATES

### 1915i ASSESSMENT TOOL:

Effective Oct. 1, 2025, the revised [NC Medicaid 1915\(i\) Assessment](#) form must be completed for a beneficiary requesting a 1915(i) service and for eligibility reassessments. Previous versions of the NC Medicaid 1915(i) Assessment published prior to Aug. 1, 2025, will not be processed and returned marked as “unable to process.”

Please note the updated version can be utilized prior to Oct. 1, 2025.

### 1915i SERVICE CLARIFICATIONS:

A member with 1915(i) eligibility in North Carolina cannot have two separate plans within the same plan year to receive more than the allowed benefit. When a member undergoes a reassessment and a new plan is written prior to the original one expiring, the annual benefit limit applies regardless of the number of care plans written within that year. This means that a reassessment and a new care plan do not reset the annual limit.

This applies to all 1915i services with authorization limits, but primarily, we are seeing the need for clarification as it relates to 1915i Respite. The annual respite limit is a fixed cap for each member within a single plan year. No more than 1200 units (300 hours) can be provided in a care plan year, based on the members’ initial care plan for the year. This limit applies regardless of the number of care plans written within that year. This limit applies regardless of provider transitions. If a member changes providers and receives a brand-new care plan, the 1200-unit limit based on the previous plan still applies.

Thank you for your attention to this communication. All questions related to this Clinical Communication Bulletin can be sent to [UM@TrilliumNC.org](mailto:UM@TrilliumNC.org). Questions will be answered as quickly as possible