

Mid-State Regional Advisory Board May 26, 2026

The Trillium Health Resources Mid-State Regional Advisory Board met Tuesday, May 26, 2026. The meeting was held in person at the Asheboro Office (938 New Century Drive) and via Web-Ex.

Members Present:

Commissioner David Allen (Chair), Kishia Dunlap, Commissioner Carlvena Foster (Vice Chair), Mary Hassell, Leann Henkel, Dr. Tommy Jarrell, Commissioner Priscilla Little-Reid, Ann Shaw, Commissioner Dr. Rick Watkins

Members Absent:

Commissioner Melvin "Skip" Alston, Commissioner Jeffrey Pope

Trillium Staff Present:

Anthony Ward-Regional Vice President, Sandra Dunlap-Executive Assistant/Clerk

Guest/s Present:

None

I. Call to Order

Vice Chair Commissioner Carlvena Foster called the meeting to order at 6:00 p.m. and welcomed everyone.

II. Certification of Quorum

Sandra Dunlap, Clerk, certified a quorum.

III. Adoption of Agenda

Vice Chair Commissioner Foster entertained a motion to adopt the May 2026 agenda. Mary Hassell motioned to adopt the May agenda. Commissioner Little-Reid seconded the motion to adopt. All in favor, none opposed; the motion carried.

IV. Approval of Minutes

Vice Chair Commissioner Foster entertained a motion to approve the March 2026 meeting minutes. Commissioner Allen motioned to approve the minutes as written. Kishia Dunlap seconded the motion to approve. All in favor, none opposed; the motion carried.

V. Public Comments

None.

VI. Regional Vice President Report

Anthony Ward, Mid-State Regional Vice President, provided the following:

Member & Recipient Services — 877.685.2415

Provider Support Services — 855.250.1539

Administrative & Business Matters — 866.998.2597

[TrilliumHealthResources.org](https://www.TrilliumHealthResources.org)



A. North Carolina Medicaid Rebase Update

In August 2025, following NC General Assembly approval of a NC DHHS mini budget that did not fully fund the projected cost of Medicaid services for the fiscal year, NC DHHS announced reimbursement rates for services would be reduced between 3-10%, effective October 1, 2025.

Those reductions were challenged and ultimately lead to a December 2025 announcement by NC Governor Josh Stein that the reductions would be restored, but without additional funds being appropriated, Medicaid would run out of funding by Spring 2026, which would lead to even more significant challenges for the Medicaid and healthcare system.

The NC General Assembly returned to session on Tuesday, April 21, 2026 and announced a deal to fully fund Medicaid on April 22, 2026. That legislation, House Bill 696, received final General Assembly approval on April 28, 2026 and was signed by Governor Stein on April 30, 2026.

Vice President Ward announced the funding meant that Medicaid reductions will not come back into place this year and possibly through 2027 depending on the State budget for next fiscal year.

B. Rural Health Transformation Program Funding

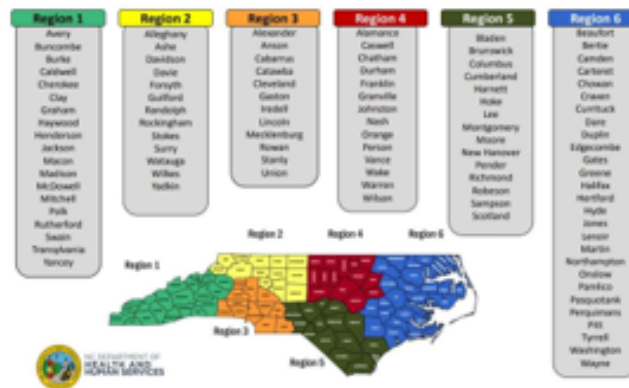
On December 29, 2025, the Centers for Medicare & Medicaid Services (CMS) announced that all 50 states would receive awards under the Rural Health Transformation Program, with North Carolina being awarded \$213 Million. This amount was based on North Carolina's application submitted in November 2025.

That application included North Carolina's planned investments across the 6 eligible categories, including:

- **Community-Rooted Care Networks:** Establishing locally governed "NC ROOTS" Hubs that connect medical, behavioral health, and social services, making it easier for rural residents to access comprehensive care close to home
- **Prevention and Chronic Disease Management:** Expanding programs for diabetes and hypertension control, cancer screening, maternal health services, and nutrition support including "food as medicine" initiatives
- **Behavioral Health Expansion:** Growing mental health and substance use disorder services through new clinics, mobile crisis teams, school-based programs, and integration with primary care
- **Workforce Development:** Training and retaining healthcare professionals through rural residency programs, incentives and innovative career pathways—creating jobs while addressing provider shortages
- **Financial Sustainability:** Helping rural practices and hospitals transition to value-based payment models that reward keeping people healthy, not just treating illness
- **Technology and Innovation:** Deploying cutting-edge artificial intelligence to support rural providers, expanding broadband access, improving health information sharing, and ensuring digital literacy for all residents

On February 27, 2026, NC DHHS announced a Request for Applications (RFA) process seeking applications from qualified organizations to serve as designated North Carolina Rural Organizations Orchestrating Transformation for Sustainability (NC ROOTS) Hubs.

Trillium Health Resources applied as the NC ROOTS Hub in 4 of the NC Medicaid Managed Care Regions for Region 2, 4, 5 & 6.



On Friday, May 1, 2026, Trillium Health Resources was notified that we were awarded two NC ROOTS Hub lead awards for Regions 2 & 5. Other awardees include:

Impact Health – Region 1

Vaya Health – Region 3

University of North Carolina Hospitals – Region 4

Access East, Inc. – Region 6

Trillium staff are working with NC DHHS staff to finalize contracts for a June 1, 2026 implementation. Early steps of the work include completion of a Community Health Assessment, selection of members for the advisory structure and activation of stakeholder engagement. Additional information will be shared as it is available.

Vice President Ward announced that staff have been selected to serve in Interim roles while permanent staff are identified. A gaps assessment is required by the State with a completion date of July 31. Each region will have an Advisory Board, and Trillium is accepting applications for those who are interested in serving.

C. Trillium Health Resources Provider Network Management and Claims Submission

Earlier, Trillium Health Resources announced a plan to transition to a unified claims system for Tailored Plan operations. All providers of behavioral health, physical health and long-term services and supports (LTSS) will submit claims through a single portal.

Currently, physical health and LTSS providers who deliver services to Trillium members submit claims to Carolina Complete Health for payment. When the unified system launches, all claims for these services will be submitted to Trillium. This transition will enhance administration efficiency, transparency and accountability in claims processing and payment.

The services network providers offer will not change - only the process for submitting claims will.

Trillium announced a delay of the unified claims system from July 1, 2026 to October 1, 2026 to allow additional time to solidify internal and external processes and allow additional time for End-to-End testing of the new system.

Vice President Ward announced additional provisions for cost effectiveness regarding Medicaid eligibility are in place. The State will likely work with DSS to obtain eligibility information status more frequently.

D. House Bill 696 Additional Measures

House Bill 696 fully funded NC Medicaid for the year and included additional provisions in anticipation of the upcoming Medicaid rebase, including:

- o Directing NC DHHS staff to check for changes in eligibility on a monthly basis
- o Funds a performance audit of North Carolina's Medicaid program
- o Mandates that NC DHHS develop a plan to improve health outcomes for people on Medicaid and make the program more cost-effective

Without adjustments, the projected Medicaid rebase for the upcoming fiscal year is projected to be up to \$1 billion.

One of the Medicaid services seeing significant growth is Research-based Behavioral Health Therapy / Applied Behavior Analysis (ABA). According to NC DHHS data, in 2020, spending on ABA was \$1.9 million. In 2025, spending increased to \$505.6 million and is projected to be \$1.1 billion by the end of fiscal year 2027.

NC DHHS is reviewing this spending and has indicated the growth appears to be "concentrated among a small number of providers".

NC DHHS staff are working to revise the Clinical Coverage Policy that guides delivery and billing for ABA services by limiting telehealth provision of the service and adjusting requirements of billing providers.

Vice President Ward highlighted the increases in service utilization and discussed what is known about additional staff for program integrity. Advisory board members may hear concerns from individuals during the review of ABA services. VP Ward also announced that Vaya Health and Partners Health Management are merging into one agency and will operate under Vaya Partners.

VII. Governing Board Report

Governing Board member Commissioner David Allen provided an update of the April Governing Board meeting. The next Governing Board meeting is scheduled for Thursday, June 25 at 4:00 p.m.

VIII. Consumer and Family Advisory Committee (CFAC) Report

Leann Henkel CFAC Chair provided a Mid-State Consumer and Family Advisory (CFAC) report and shared highlights of the April and May meetings.

IX. Regional Advisory Board Comments

None.

X. Mid-State Regional Vice President Evaluation (closed session)

Vice Chair Commissioner Foster recognized a motion from Commissioner Priscilla Little-Reid to go into closed session to discuss confidential personnel information in accordance with NC General Statute 143-318-11A6. Commissioner Allen seconded the motion to go into closed session. All in favor, none opposed; the motion carried. The meeting entered closed session.

In closed session an evaluation discussion of Vice President Anthony Ward was conducted. The results of the evaluation will be sent from Chair Commissioner Allen to Senior Vice President Dave Peterson for review.

Vice Chair Commissioner Foster recognized a motion from Commissioner Allen to reconvene as open session. Mary Hassell seconded the motion. All in favor, none opposed; the motion carried. Vice Chair Commissioner Foster announced the closed session ended and called the meeting to order.

XI. Meeting Materials

- Chief Executive Officer Report
- Financial Report/Budget Ordinance
- Tailored Plan Operations Report
- Operations Report PowerPoint Presentation

XII. Adjournment

With there being no other business, Vice Chair Commissioner Foster entertained a motion to adjourn the meeting. *Commissioner Priscilla Little-Reid made a motion to adjourn the May meeting. Mary Hassell seconded the motion. All in favor, none opposed; the motion carried. The meeting adjourned at 6:58 p.m.*

The next meeting is scheduled for Tuesday, July 28, 2026, starting at 6:00 p.m. at the Asheboro Office, 938 New Century Drive, Asheboro, NC.


Commissioner Carlvena Foster, Vice Chair

9/22/26
Date


Sandra Dunlap, Clerk

7/10/26
Date