



Transforming Lives. Building Community Well-Being.

Healthy Opportunities Pilot Services Member Rights and Responsibilities

Important Information for NC Medicaid Coverage of Healthy Opportunities Pilot Services: Member Rights and Responsibilities

Dear Member:

Welcome to the Healthy Opportunities Pilot program. The Healthy Opportunities Pilot ("HOP") is a demonstration program offered by NC Medicaid for Health Plan members in three regions of North Carolina who have certain health conditions and social needs. HOP connects Medicaid members to non-medical services that are not generally covered by Medicaid to improve people's health.

Trillium Health Resources will connect you to resources in your community to help you manage issues beyond your medical care.

Trillium Health Resources and your care manager will help you get the services you need. HOP services will be provided to you at no additional cost and will not change your Medicaid eligibility or coverage.

Services you may qualify for include food and nutrition services, housing services, transportation supports and interpersonal safety and toxic stress services (including services that address violence within the home or community and services that address long-term stress, including stress related to abuse or trauma).

Keep this document in a safe place for your reference and records. The following is important information about your coverage of HOP services:

1. Trillium Health Resources has determined that you qualify for the Healthy Opportunities Pilot program, meaning that HOP services will be available at no cost to you.
2. You can choose not to participate in the HOP program at any time. You may revoke your consent to participate or to share your personal health information by contacting Trillium Health Resources or your care manager.
3. If you revoke consent, you can always change your mind and contact Trillium Health Resources or your care manager to be reevaluated for the program.
4. You will become ineligible for HOP if you no longer have a qualifying health condition and social need, if you move outside of the HOP region, or if you are no longer enrolled in Medicaid Managed Care. If you no longer qualify for HOP services, or if

funding for HOP services runs out, NC Medicaid will no longer pay for HOP services. If that happens, your care manager will work with you to try to find other community services that may help meet your needs, but services offered outside the HOP program are subject to availability. Some non- HOP services may not be covered by NC Medicaid, and you may need to pay for those services. Your care manager will work with you to try to find services you can afford.

5. Your care manager will contact you and assess whether the HOP services you receive still meet your needs at least once every three months. Your care manager will also check that you still qualify for services at least once every six months. **If you do not participate in a service or eligibility reassessment every six months, you will no longer be eligible for NC Medicaid- funded HOP services.**
6. If you participate in the necessary reassessments, NC Medicaid will continue to pay for your HOP services until you no longer qualify for HOP services, do not need HOP services, or HOP funding is no longer available.
7. If Trillium Health Resources determines you no longer qualify for HOP services, you can request a reassessment if your health status or life circumstances change. You may call Trillium Health Resources or contact your care manager to request a reassessment.

Filing a Grievance

You can file a grievance with Trillium Health Resources by doing one of the following:

- 🌱 Calling our Member and Recipient Services Line at 1-877-685-2415, Monday – Saturday, 7 a.m. – 6 p.m.
- 🌱 By fax 252.215.6881
- 🌱 Online at [Complaint / Grievance submission form](#)
- 🌱 In person
Trillium Health Resources
201 West First Street
Greenville, NC 27858-1132

Questions?

If you have questions or concerns about Healthy Opportunities Pilot program benefits, services, or resources, call our Member Services Line at 1-877-685-2415, Monday – Saturday, 7 a.m. – 6 p.m.

You can also visit our website to learn more. Go to our [Health-Related Resources Needs](#) webpage.