



## Network Communication Bulletin #026

To: All Providers  
From: Cindy Ehlers, MS, LPC - Vice President of Clinical Operations  
Date: Monday April 09, 2018  
Subject: **New Medicare Beneficiary Identifier, Trillium Health Resources-Integrated Care Training, Important NCTRACKS Information, Site Level Adjudication-Phase 2, Medicaid Bulletin March 2018 updates, Medicaid and Health Choice Health Plan Error, New Contact Emails for Claims Department, Forensic Screener Training Opportunity**

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### NEW MEDICARE BENEFICIARY IDENTIFIER

The Centers for Medicare and Medicaid Services (CMS) will begin replacing the Medicare Health Insurance Claim Number (HICN) with a new Medicare Beneficiary Identifier (MBI) on April 1, 2018. CMS has communicated the expectation that the new MBI not be released to beneficiaries and other external parties until October 1, 2018 unless they are new beneficiaries or have received their new Medicare cards. Because of this expectation, Trillium will not populate any MBIs in Provider Direct (PD) until October 1, 2018. If you have any questions regarding this, please contact Trillium's Eligibility and Enrollment Staff at [EnrollmentandEligibility@Trilliumnc.org](mailto:EnrollmentandEligibility@Trilliumnc.org).

### INTEGRATED CARE EFFORTS = SUCCESSFUL OUTCOMES FOR MEMBER HEALTH

Part I Dates and Locations:

May 3<sup>rd</sup>- Elizabeth City

May 10<sup>th</sup>- Wilmington

May 11<sup>th</sup>- Greenville

9:30am-4:00pm

\*attendees only need to complete training on one date

Providing whole person, integrated care involves the coordination of many multi-dimensional activities by community agencies. One of the first steps in addressing whole person care is having knowledge about, and understanding of the activities related to, the eligibility and scope of funding options that a person and family may access. Accessing funding options can help address the social determinants of health for members. Members with behavioral health and intellectual/developmental disabilities rely on these services to assist them in accessing care.

Trillium is committed to providing training for our valued providers and community partners. It is vital that we share the roles and responsibilities we all play in the delivery of quality services and supports to meet the health outcomes for the individuals we all serve.

The goals of this training are:

- 🌱 Provide an overview of the data about individuals with behavioral health and/or IDD with accessing public assistance programs.

- 🌱 Outline the regulatory authorities, categories of aid, and policy direction of the Medicaid/Health Choice, Food and Nutrition Services (FNS), Low Income Home Energy Assistance Program (LIHEAP), and other public assistance services.
- 🌱 Explain the role of public assistance programs in meeting the goals of Medicaid Transformation, addressing social determinants of health, and clinical outcomes for individuals and families.
- 🌱 Outline the requirements of eligibility for the public assistance programs and the role provider agencies play in completing those activities.
- 🌱 Provide tools that enable provider agencies to actively participate in obtaining and retaining public assistance for individuals.
- 🌱 Outline challenges and solutions that community agencies and providers face in maintaining uninterrupted periods of eligibility.
- 🌱 Discuss the clinical and program implications of the disruption of eligibility for services.

Later this fall, Trillium will offer a follow up “Part II” training that links maintaining eligibility with accomplishing value based purchasing (“pay for performance”) initiatives. Part II will cover outcomes and quality strategies identified in Medicaid Transformation by disability areas and specific services. Demonstrating value to managed care companies who will manage the standard or tailored plans is a key element in sustainability for provider agencies. A robust provider network increases the ability to support healthier individuals and communities.

Application has been made for CEUs/Contact hours; attendees will be able to request hours after the training by completing an evaluation form.

Click the link below for more information and to register:

<http://act-llc.org/trilliumevents/>

Limited seats available, so reserve yours now!

### **IMPORTANT NCTRACKS INFORMATION:**

NCTracks is the NC Department of Health and Human Services’s Medicaid Management Information System. Trillium wants to encourage all providers to periodically review their contracted site information in Provider Direct and make sure that all NPI numbers, address information and Taxonomies are current and have correct linkage at NCTracks. To review your Taxonomy codes and linkages please visit the NCTracks website at [www.nctracks.nc.gov](http://www.nctracks.nc.gov). For a full list of Taxonomy codes visit [www.nucc.org](http://www.nucc.org).

The information in Trillium’s software platform must match what is in NCTracks. If it is determined that an NPI number, taxonomy, and address needs to be added to the Provider Contract in Trillium’s software, or a service needs to be added to a site, please submit a ticket to the Network Department at [NetworkServicesSupport@trilliumnc.org](mailto:NetworkServicesSupport@trilliumnc.org)

If you receive notification from Network Services regarding a change needed in your NPI number, taxonomy, address or health plan, it will be your responsibility to make these corrections. Once the issue is resolved, please respond to Network Services.

If corrections are needed at NCTracks, please contact NCTracks at 1-800-688-6696 or [NCTracksprovider@nctracks.com](mailto:NCTracksprovider@nctracks.com).

To view information in Provider Direct, follow the steps below:

- 🗑️ Under the menu bar select the Admin Tab
- 🗑️ Provider Management
  - ▶ A list of all provider sites will appear
- 🗑️ Select site to view all services approved to be bill under that site

## SITE LEVEL ADJUDICATION - PHASE 2

Trillium will be implementing a second phase of the site level adjudication process. Implementation of this phase is projected for May 2018.

When billing claims, please make sure the correct NPI number and address, including zip+4, for the billing provider is submitted on the claim. The Service Facility Location (SFL) information is situational and should be submitted on the claim per billing guidelines.

Trillium recommends Provider Agencies to be proactive and review their services and site information and make any needed updates to ensure all services are contracted at the site level to avoid any unnecessary denials. Site information can be reviewed in Provider Direct by following the steps below:

- 🗑️ Under the menu bar select the Admin Tab
- 🗑️ Provider Management
  - ▶ A list of all provider sites will appear
- 🗑️ Select site to view all services approved to be bill under that site

Trillium also recommends that Provider Agencies reference NCTracks to ensure that those NPI numbers, addresses and zip+4 are also added and updated at NCTracks. The information in Trillium's software platform must match what is in NCTracks. If it is determined that an NPI number, taxonomy, and address needs to be added to the Provider Contract in Trillium's software, or a service needs to be added to a site, please submit a ticket to the Network Department at [NetworkServicesSupport@trilliumnc.org](mailto:NetworkServicesSupport@trilliumnc.org).

If you receive notification from Network Services regarding a change needed in your NPI number, taxonomy, address or health plan, it will be your responsibility to make these corrections. Once the issue is resolved, please respond to Network Services.

If corrections are needed at NCTracks, please contact NCTracks at 1-800-688-6696 or [NCTracksprovider@nctracks.com](mailto:NCTracksprovider@nctracks.com).

## MEDICAID BULLETIN MARCH 2018 UPDATES

### **NCTracks Update: Accurate Provider Email Crucial**

In a recent attempt to send an email helping providers with a common error, CSRA noticed that 12.5 percent of the provider email addresses were invalid or unsubscribed. To provide providers with the accurate information they need, it is crucial that NCTracks has a valid email address that is subscribed to the NCTracks Communications email list. This is especially important for targeted emails that apply to specific providers (such as a claim reprocessing notice).

NCTracks encourages providers to:

- 🗑️ Check the email address on their provider record today to make sure it is accurate

- 🌱 Subscribe or re-subscribe to the NCTracks communications email list (the “Sign Up for NCTracks Communications” link can also be found on the Provider Communications tab of the Provider Home page)

CSRA, 1-800-688-6696

## RE-CREDENTIALING AND ONGOING VERIFICATION UPDATES

### List of Providers Due for Re-credentialing

A list of providers scheduled for re-credentialing January through April 2018 is available on the [provider enrollment page](#) of the North Carolina Medicaid website under the “Re-credentialing” header. Providers can use this resource to determine their re-credentialing/re-validation due date and determine which month to begin the re-credentialing process. Organizations and systems with multiple providers may download this spreadsheet, which includes National Provider Identifier (NPI) numbers and provider names, to compare with their provider list.

**Note:** The terms re-credentialing, re-verification, and re-validation are synonymous.

### Changes to Re-credentialing Process

Beginning April 30, 2018, the re-credentialing notification and suspension will be modified to the following:

- The notification, suspension, and termination timeline will be modified to the following:
  - 🌱 First notification will now be sent 70 days prior to the provider re-credentialing due date.
  - 🌱 If re-credentialing is not submitted, reminders will be sent at 30 days, 15 days, and 5 days prior to the provider re-credentialing due date.
  - 🌱 Providers will be suspended if the re-credentialing application is not submitted by their re-credentialing due date.
  - 🌱 The provider will be terminated from the North Carolina Medicaid and NC Health Choice programs at the end of the month following 30 days of suspension.
- Re-credentialing is not optional. It is crucial that all providers who receive a notice promptly respond and begin the process.
- Providers are required to pay a \$100 application fee for re-credentialing.
- The existing rules to extend the re-credentialing due date if a Manage Change Request (MCR) Application is “In Review” will be removed. Therefore, if a change is required via a MCR, the MCR process must be completed before the re-credentialing due date.
- The Re-credentialing Application on the NCTracks Provider Portal will be modified to display the existing owners and managing employees and allow the provider to edit, end-date, or add to the Re-credentialing Application.

**Note:** Providers must thoroughly review their electronic record in NCTracks to ensure all information is accurate and up-to-date and take any actions necessary for corrections and updates.

If terminated, the provider must submit a re-enrollment application to be reinstated.

Re-credentialing does not apply to time-limited enrolled providers, such as out-of-state (OOS) lite providers. OOS providers who enroll using the OOS-lite application must complete the enrollment process every 365 days. OOS providers who are fully enrolled must re-credential every five years.

Because of the system changes, all enrollment, re-enrollment, MCR and re-verification applications currently in “saved draft” status will be deleted on April 28, 2018. To prevent these applications from being deleted, the draft must be submitted. Applications created on or after April 29, 2018, can once again be saved to draft.

### Changes to Ongoing Verification Process

Providers must also update their expiring licenses, certifications and accreditations. The system currently suspends and terminates providers who fail to respond within the specified time limits. With system modifications, the notification, suspension, and termination timeline will be modified to the following:

1. First notification will be sent 60 days prior to expiration
2. If the expired item has not been updated, a reminder will be sent on days 30, 14, and the final reminder on day 7 prior to expiration
3. The provider will be suspended if the expired item has not been updated by the due date. The suspension will remain for 60 days, and can be removed at any time if the expired item is updated.
4. The provider’s participation in the North Carolina Medicaid and NC Health Choice programs will be terminated if the item has not been updated by day 61 after suspension.

Providers with questions about the re-credentialing process can contact the NCTracks Call Center at 1-800-688-6696 (phone), 919-710-1965 (fax) or [NCTracksprovider@nctracks.com](mailto:NCTracksprovider@nctracks.com).

### FINGERPRINTING PROCESS FOR PROVIDERS

**Note:** This article was originally published in the [October 2017 Medicaid Bulletin](#). This is the final Medicaid Bulletin publication.

“High risk” individual providers and provider organizations, as outlined in [NC General Statute 108C-3g](#), and individual owners with 5 percent or more direct or indirect ownership interest in a “high risk” organization are required to submit fingerprints to the N.C. Medicaid program.

The provider’s Office Administrator (OA) will receive two notifications through the NCTracks provider portal, Provider Message Center Inbox, for each person required to submit fingerprints. One notification will be a letter with instructions and the other will be a Fingerprint Submission Release of Information Form. The OA also will receive an email for each party required to submit fingerprints. The email will have the Fingerprint Submission Release of Information Form attached.

The Fingerprint Submission Release of Information form should be printed and completed by the provider prior to taking it to any one of the [LiveScan locations for fingerprinting services](#). There is also a section on this form that must be signed by the official taking the fingerprints.

Once the provider is fingerprinted and the Fingerprint Submission Release of Information form is signed at the LiveScan location, the OA will electronically upload the form to the provider’s record in NCTracks by using the following steps:

1. From the Submitted Applications section of the Status and Management page, the OA will see that any NPI that has a status of “In Review” will also have a hyperlink to Upload Documents.
2. Select the Upload Documents link. Once the link is selected, the OA will be able to browse for and attach the form.
3. Select the Upload Documents link found under the Fingerprint Evidence Documents section.

At this point the process is complete, and the provider will be able to go to the Status and Management page for an updated application status.

**Note:** Individuals who are required to undergo the fingerprint-based background check will incur the cost of having their fingerprints taken. It is recommended that you contact the fingerprinting agency to confirm the fee prior to going.

If the applicant opts to do a Fingerprinting card, rather than a live scan, they must mail the fingerprint card to the SBI for processing at NCSBI/Applicant Unit 3320 Garner Road Raleigh, NC 27626. The Electronic Submission Release of information form is still required to be uploaded to NCTracks.

**Note:** The Fingerprinting card should not be mailed to the address on the form. Mailing these documents will delay the application processing and could result in a for cause denial or termination.

### MEDICAID AND HEALTH CHOICE HEALTH PLAN ERROR

On February 10, 2018, Medicaid and Health Choice health plan participation was end-dated in the NCTracks system in error for 675 providers. The error was caused by the Maintain Eligibility Process, which was implemented on October 29, 2017








(<https://www.nctracks.nc.gov/content/public/providers/provider-communications/2017-announcements/Maintain-Provider-Eligibility-Process.html> ).

The Medicaid and Health Choice health plans have been reinstated as of march 29, 2018. If Medicaid was the only health plan included in the provider's record then the system automatically terminated the entire provider record. With this scenario NCTracks will reinstate the providers entire record.

### NEW CONTACT EMAILS FOR CLAIMS DEPARTMENT

Effective May 1, 2018, Trillium will implement a new contact email for the Claims and Enrollment & Eligibility.

For inquiries or submission of the below items, please use the email [Claims2@TrilliumNC.org](mailto:Claims2@TrilliumNC.org).

-  Claims Request Forms
-  Remittance Advise questions
-  How to submit claims
-  How to obtain and RA
-  How to bill a claim
-  How to correct claim
-  Any other claim inquiries or questions

For inquiries related to eligibility confirmation, adding or terminating Third Party Insurance or assistance completing New Enrollments or Clinical Updates in Provider Direct, please use [Enrollmentandeligibility@TrilliumNC.org](mailto:Enrollmentandeligibility@TrilliumNC.org).

Please remember when submitting any Protected Health Information, it is your responsibility to ensure it is properly secured.

If your agency does not currently use an email encryption service, Trillium does offer our zixmail portal for emailing us securely. The instructions for registering an account with our zixmail are found on our website, under For Providers, Provider Documents and Forms. Please note, this will only secure the

emails you compose within the zixmail website. It will not encrypt any emails sent directly from your agency's email client/website.

## FORENSIC SCREENER TRAINING OPPORTUNITY

If interested in participating in training to become a Forensic Evaluator, please contact Mia Best via email at [Mia.Best@TrilliumNC.org](mailto:Mia.Best@TrilliumNC.org).

Any questions about this Communication Bulletin may be sent to the following email: [NetworkManagement@TrilliumNC.org](mailto:NetworkManagement@TrilliumNC.org). These questions will be answered in a Q&A format and published on Trillium's website.

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### **A NOTE FROM TRILLIUM'S IT DEPARTMENT**

In order to ensure the highest security standards, Zix will be implementing additional security upgrades to the secure email portal/ZixPort on **June 3, 2018**.

The security upgrades will only allow a message recipient to access their messages using browsers that support TLS 1.2 or higher. Older browsers that do not support TLS 1.2 cannot be used to access the secure email portal/ZixPort after this date. Most browsers already have implemented this security feature, but you may need to check that you have the most updated version on your computer.

This change is necessary to improve security and is also a requirement for those customers that need PCI compliance.

Zix will be following the industry lead by email providers such as Google and Microsoft. Because most browsers and email platforms such as Google, Outlook.com and Yahoo have supported TLS 1.2 for the last few years, end-users are unlikely to be affected by this change. However, any browsers that do not support TLS 1.2 will need to be updated.

After June 3rd 2018, users that attempt to access the secure email portal/ZixPort with a browser that does not support TLS 1.2 will get a "connection refused" message.

A comprehensive list of browsers that support TLS 1.2 is available here:

<https://www.ssllabs.com/ssltest/clients.html>

Please review the list above and make sure you are ready by June 3. If you update your browser and still run into issues after June 3, please email Zix Customer Support at [support@zixcorp.com](mailto:support@zixcorp.com).

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Trillium offers trainings for providers and also shares about educational events across the region. To learn more, visit our [Upcoming Events page](#).

Trillium occasionally announces open enrollment and RFPs for new and existing providers. Visit the [RFP | RFA | RFI | Opportunities page](#) for listings.