

To: All Providers
From: Cindy Ehlers, Executive Vice President
Date: April 27, 2020
Subject: NC DHHS Clinical Coverage Policies: Service Exclusions and Limitations, Rate Table for COVID-19 Codes

NC DHHS CLINICAL COVERAGE POLICIES: SERVICE EXCLUSIONS AND LIMITATIONS

Trillium is working with the North Carolina Department of Health and Human Services (NC DHHS) on service-specific guidance in response to the COVID-19 pandemic. The North Carolina Division of Health Benefits (DHB) coordinated with the Center for Medicare and Medicaid Services (CMS) and requested waivers that support flexibility in service delivery that both protects the public and ensures our most vulnerable citizens are able to continue receive support for their Behavioral I/DD needs.

Network Providers are granted service delivery flexibilities outlined in Trillium’s Network Communication Bulletin. These flexibilities are to ensure members receive access to care and provide a continuum of care. Network Providers must adhere to NC DHHS Medicaid and Health Choice Clinical Coverage Policies. Network Providers must adhere to Clinical Coverage Service Exclusions and Limitations Guidelines. Providers must ensure all services that are delivered are according to NC DHHS Clinical Coverage Policy and meet medical necessity. At some point after COVID-19 emergency is over, Trillium will perform post-payment clinical reviews to ensure compliance with State and Medicaid regulations.

Providers suspected of participating in fraudulent practices will be subjected to an investigation. Based on the outcome of the investigation, Trillium may impose sanctions on any Network Provider who is found in violation of contractual obligations, state and federal laws, rules, regulations and policies defined to protect the health and safety of members. In addition to technical guidance, disciplinary actions or sanctions can be taken against a Network Provider including, but not limited to, any one or combination of the following:

- 🌱 Education and/or technical assistance given to the provider
- 🌱 Referral Freeze
- 🌱 Recoupment
- 🌱 Plan of Correction (POC)
- 🌱 Additional Monitoring
- 🌱 Self-audit review of documentation and/or paid claims
- 🌱 Monetary Penalty
- 🌱 Sanctions

 Contract Suspension

 Referral to another regulatory body

 Contract Termination

If further guidance is needed, please review Trillium Health Resources Provider Manual at <https://www.trilliumhealthresources.org/sites/default/files/docs/Provider-documents/Provider-Manual/Trillium-Provider-Manual.pdf> and/or the Clinical Coverage Policies/NC DHHS link: <https://medicaid.ncdhhs.gov/providers/clinical-coverage-policies>

RATE TABLE FOR COVID-19 CODES

Trillium has implemented a [COVID-19 Crisis Event Fee Schedule](#) that is posted on its website. The purpose of this fee schedule is to assist providers in accessing the rates that have been implemented by Trillium for the COVID-19 Crisis. The rates will continue for the duration of the declared state of emergency or until further notice or amendment. Please refer to your contract and/or Provider Communication for any special requirements to bill the temporary rates. If you have any questions regarding this communication, please email RATESFinance@TrilliumNC.org.

Any questions about this Communication Bulletin may be sent to the following email: NetworkManagement@TrilliumNC.org. These questions will be answered in a Question and Answer format and published on Trillium's website.