

To: All Providers of State and Medicaid Funded Services

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Date: October 23, 2020

Subject: Special Bulletin COVID-19 #139 from DHHS (Temporary Rate Increases UPDATE, Temporary Clinical Policy Revisions & Federal Public Health Emergency Declaration), Trillium's Disaster Response Unit Update, Important NC TOPPS Reminders, Important NC SNAP Reminders

SPECIAL BULLETIN COVID-19 #139: COVID-19 TEMPORARY PROVIDER RATE INCREASES AND CLINICAL POLICY CHANGES EXTENDED

TEMPORARY RATE INCREASES DURING COVID-19 UPDATE

As a follow-up to Network Communication Bulletin #119 Trillium is extending the 20% rate enhancements from December 31, 2020 to **January 31, 2021**. The increase will be for these services that may require providers to pay overtime for staff when other staff cannot work due to COVID-19, OR due to paying direct care staff a higher rate for hazard pay during this event.

Specific services impacted include:

- | | |
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| 🌱 ADVP | 🌱 Mobile Crisis |
| 🌱 Developmental Day | 🌱 Basic Benefit Outpatient Services |
| 🌱 Peer Support | 🌱 Personal Care |
| 🌱 Community Support Team (CST) | 🌱 SAIOP and SACOT |
| 🌱 Assertive Community Treatment Team (ACTT) | 🌱 Supported Employment |
| 🌱 Intensive In-Home | 🌱 Psychiatric Inpatient Hospitalization (Medicaid ONLY) |
| 🌱 Long Term Vocational Support | |

The rates are now available and providers may start submitting replacement claims. For providers to receive the rate enhancements, the codes will need to be billed with the CR modifier, with the exception being the Psychiatric Inpatient Hospitalization service, which will be increased using the usual billing code.

The rates may be used for dates of service from July 1, 2020 to **January 31, 2021**. Trillium may audit records for providers that bill these codes to assure compliance with the billing and to ensure these enhanced rates do go to direct care staff. In addition, the residential services that were enhanced due to COVID-19 will remain in place until further notice. To view the rates please go to [COVID-19 Rate Table FY 2019-2021](#).

If you have any questions regarding this communication, please email RATESFinance@TrilliumNC.org. Please use email only, as we are experiencing higher than normal call volume at this time.

TEMPORARY CLINICAL POLICY PROVISIONS

Many of the Clinical Policy Provisions, such as the telehealth provisions, enacted to support COVID-19 response which do not require new federal authorities are in the process of becoming permanent policy and DHB is seeking federal authority where appropriate. For permanent policy changes to the Medicaid program, DHB will post changes publicly. All stakeholders are encouraged to provide feedback.

The table below clarifies when certain COVID-19 related federal authorities will end relative to the end of the federal Public Health Emergency. DHB will notify providers through special bulletins of any termination of temporary policies if the Public Health Emergency is not extended. Please use the table below to review expiration of temporary provisions.

Source of Federal Authority	Expiration of Federal Authority
	DHB has the authority to end prior to the end of federal expiration date
COVID-19 1115 Waiver	Expires at end of Public Health Emergency + 60 days
1135 Waivers	Expires at end of Public Health Emergency
Medicaid Disaster SPAs	Expires at end of Public Health Emergency
CHIP Disaster SPA	Expires at end of Public Health Emergency or state-declared emergency whichever is later
Concurrence Letter	Expires at the end of the Public Health Emergency
Appendix Ks (applicable to 1915(c) waivers)	Expires on March 12, 2021

FEDERAL PUBLIC HEALTH EMERGENCY DECLARATION

The current expiration date for the federal Public Health Emergency is January 21, 2021. The federal government may continue to extend the Public Health Emergency at its discretion. Please refer to the federal [Public Health Emergency website](#) for more information and updates.

TRILLIUM'S DISASTER RESPONSE UNIT UPDATE



Roadmap2Ready Hurricane Preparedness Tip #4

Hurricane Season Readiness toolkits are available on the new [Community Crisis and Disaster Response](#) webpage for [members](#) and [providers](#). The toolkits can be downloaded, emailed or printed.

Trillium Health Resources is focused on preparing members and provider agencies for Hurricane Season during the COVID-19 pandemic. Disasters can happen anytime, but proactive measures can help reduce their impact. To help develop your disaster plan for hurricanes, please refer to our new webpage [here](#). Our **Roadmap2Ready** campaign was developed by our Community Crisis and Disaster Response team with the intention of connecting members and providers to reliable resources that assist with preparing for a hurricane. Our team collaborates with state, county, and community programs within our 26 county catchment area to identify gaps and needs related to inclusive disaster response.

IMPORTANT NC TOPPS REMINDERS

Every NC TOPPS provider site account must have at least one Superuser. (It is highly recommended each site have 2 Superusers for backup purposes.)

- 🌿 [Superuser Request Form](#) can be found on Trillium's website and should be submitted to the NC TOPPS Help Desk, nctopps@ncsu.edu.

NEW SITE REQUESTS

- 🌿 New site requests will only be approved for Trillium contracted sites; if a site is not in your Trillium contract, the site request will be denied.
- 🌿 Wait until you receive the email from Trillium's Contracting Unit that the site and codes have been added before you request an NC TOPPS site addition in the system
- 🌿 Once the site has been approved, contact the NC TOPPS Help Desk, nctopps@ncsu.edu, to establish a Superuser

APPROVING NEW USERS AT PROVIDER AGENCIES

- 🌱 Agency Superusers are responsible for approving and deleting users on the agency account. (Trillium staff have no way of knowing when agencies hire or terminate staff.)

NC TOPPS submissions are required for adults and children ages six years and above who are receiving publicly-funded services for mental health and/or substance use disorders. A list of qualifying service codes can be found on the Trillium website on the [NC TOPPS Services page](#).

- 🌱 All updates should be completed online through the [NC TOPPS Database](#).
- 🌱 Initial updates must be completed at the first visit but no later than the second visit. **Trillium highly recommends providers complete the Initial update during the first visit.**
- 🌱 Updates must be completed at initial visit, 3 months, 6 months, annual, 18 months, and Bi-annually after the initial submission. Updates can be done up to 2 weeks prior to or after the initial submission date.
- 🌱 Episode Completion Submissions must be completed when a member completes or terminates services.
- 🌱 If a member states they are transferring to a new provider and you have not been contacted to by the new providers within 2 weeks to release and share information, complete an Episode Completion.
- 🌱 NC TOPPS submissions **are not required** for Health Choice members and Medicare-only members.
- 🌱 NC TOPPS submissions **are not required** for members that are only receiving: Unmanaged outpatient therapy and/or medication management, Crisis Services, Inpatient hospitalization psychiatric services, IDD services and supports.

Unable to Access Member's NC TOPPS Record?

1. Check Name Format
 - a. NC TOPPS requires First Initial of the first name and the first 3 initials of the last name
2. Check Trillium Record Number
 - b. NC TOPPS uses the Trillium record number and must be 6 digits, if Trillium record number is less than 6 digits try a zero at the beginning.
3. Check the CNDS Number
 - c. The CNDS number should be the same as the member's Medicaid number.
4. If you are still unable to access the record, send a secure email to: NCTOPPS@TrilliumNC.org
 - d. Include: Member's name, Trillium Record Number, and Date of Birth. State that you are unable to access member's record.
 - e. If you get a message that the member has an open episode with another provider, see below for NC TOPPS Transfer Procedure.

NC TOPPS TRANSFER PROCEDURE

1. For dual service members, check the hierarchy of services to determine which provider is responsible for the NC TOPPS. The service hierarchy can be found in Section II, Provider Agency Responsibilities, in the NC TOPPS Guidelines.
2. Submit request via zixmail to: NCTOPPS@TrilliumNC.org
3. Include in the body of the email:
 - a. Member's name, Trillium record number, date of birth
 - b. Name and address of the provider location will member will be served
 - c. Name of QP/Clinician that will be responsible for the NC TOPPS
4. Attach a copy of a Release of Information signed by the member or their legal guardian.

NC TOPPS INITIALS REPORT

- 🌱 Sent weekly includes 3 months of newly authorized members for NC TOPPS services based on claims report (Includes 3 months due to claims lag) ***If you have not billed a new NC TOPPS authorized service you will not receive a report***
- 🌱 The report is a provider tool to ensure that members that should have an NC TOPPS record have one
- 🌱 No response back to the NC TOPPS staff is required, unless you are unable to access the member's record or need to request a transfer, or did not complete the initial because the member did not follow up with a second visit ***(A claims check will be done to ensure that the member did not have a second visit)***
- 🌱 A random sample of members from the weekly Initial reports will be reviewed each quarter to ensure compliance. If your agency is found to be out of compliance; action will be taken including technical assistance or a Plan of Correction.

NC TOPPS UPDATES NEEDED REPORT

- 🌱 Sent twice per month at the middle of the month and the end of the month.
- 🌱 The report is a provider tool to remind providers of updates that are coming due within 2 weeks or are currently due. **(Provider Superusers can also run this report for their agency)**
- 🌱 No response back to the LME is required unless the update is at least one day past due
 - a. Provider should respond back to the NC TOPPS staff, NCTOPPS@TrilliumNC.org, with the date the NC TOPPS was completed for members past due 1-14 days within 3 days of receiving the report.
- 🌱 A quarterly Updates Needed report will be checked at the end of each quarter to ensure compliance. If your agency is found to be out of compliance, action will be taken including technical assistance or a Plan of Correction.

When & How to contact the NC TOPPS Helpdesk

- 🌱 Questions about adding new users to your provider account
- 🌱 Setting up a Superuser account
- 🌱 Technical Issues within the NC TOPPS system including not able to access your user account
- 🌱 NC TOPPS Help Desk: nctopps@ncsu.edu

NC TOPPS CONTACT INFORMATION

- 🌱 Main Email for anything regarding NC TOPPS: NCTOPPS@TrilliumNC.org
- 🌱 NC TOPPS Contact: Stephanie Wilson, Network Coordinator, 1-866-998-2597
- 🌱 NC TOPPS Guidelines, Forms, FAQs and other Documents are available on the Trillium website

Please use zixmail for all secure email contact regarding NC TOPPS; [Trillium Zixmail Account Information](#)

If you feel your agency needs a refresher on NC TOPPS usage please contact NCTOPPS@TrilliumNC.org.

IMPORTANT NCSNAP REMINDERS

All Persons served by the State's Developmental Disabilities (DD) System Require an NC SNAP:

- 🌱 Assessments should be completed and submitted upon initial contact with the I/DD service system (Provider)
- 🌱 Assessments should be updated annually and anytime a significant change has occurred in the individual's needs/level of support

NC SNAPs Must be submitted via Email or Fax:

- 🌱 Email: NCsnap@trilliumnc.org
- 🌱 Fax Number: 252-215-6874; 910-353-4954

Ensure NC SNAPs are Filled-Out Completely Prior to Submission:

- 🌱 Assessments missing pertinent information (Consumer ID Number, Type of Assessment, etc.) will be returned to the provider for correction
- 🌱 Individual's Case Number should be the member's Trillium Case/Record Number
- 🌱 Assessments may be completed "by hand" but should be written in clear/legible handwriting (please do not use cursive handwriting)
- 🌱 Members' social security numbers should not be recorded on NC SNAPs

Each Page of the NC SNAP must be Submitted for Initial and Annual Assessments:

- 🌱 NC SNAP Summary Report & Supplemental Information forms may be sent in isolation for Discharge NC SNAPs only
- 🌱 Incomplete assessments will not be processed, and will be returned to the provider (via email)

Discharge NC SNAPs Should be submitted as promptly as possible:

- 🌱 Please do not wait until the member is due for an annual NC SNAP update to submit discharge NC SNAP
- 🌱 If a member has changed providers, the new provider should be listed on the Summary Report & Supplemental Information page of the NC SNAP

NC SNAPs submitted via email must be sent securely:

- 🌱 Members' names/initials should not be listed within the subject line of the email (this is an electronic HIPAA violation)

The Date of NC SNAP Assessment Should Reflect the Date That Assessments are completed:

- 🌱 Assessments listing a future date cannot be entered into the database
- 🌱 Assessments containing a future date will be returned to the provider for correction

Past-Due NC SNAP Notifications are Sent-Out Weekly:

- 🌱 Please respond to requests for updated NC SNAPs as promptly as possible
- 🌱 A Plan of Correction will be issued for providers that fail to submit assessments after the third request has been sent

Necessary Corrections to a Member's NC SNAP Utilizing the Following Procedures:

- 🌱 Corrections should be made by the individual who completed the assessment
- 🌱 One single line shall be drawn through the error, making sure the original entry is still legible
- 🌱 The corrected information shall be recorded legibly above or near the original entry
- 🌱 An explanation as to the type of documentation error shall be included whenever the reason for the correction is unclear
- 🌱 Correction fluid or tape shall not be used for the correction of errors

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