

To: All Providers

From: Khristine Brewington, MS, LCMHCS, LCAS, CCS, CCJP
VP of Network Management

Date: April 24, 2023

Subject: Community Inclusion Training, Updates on Competitive Integrated Employment and Continuation of New Admissions to Adult Day Vocational Programs, Out of State Providers- Submission Address for Paper Claims, ABA (AKA RBBHT)- The Good, The Bad, and The Progress, Public Comment Period OPEN for Clinical Coverage Policies (3H-1-Home Infusion Therapy/8H-6-Community Transitions), Free Crisis Intervention Training Opportunity for Children & Youth Providers!, Parents as Collaborative Leaders (PACL) Training, Public Comment Period Open for State Funded Service Definition – Respite, EVV Soft Launch Schedule/Updates, Upcoming Assistive Technology Pop Up Events, Disaster Planning, Need to Report Fraud, Waste, and Abuse?

COMMUNITY INCLUSION TRAININGS

The Temple University Collaborative on Community Inclusion (www.tucollaborative.org) is a national research and training center that focuses on the importance of promoting opportunities for people with serious mental illnesses to participate in their communities (e.g., work, school, dating, parenting, engagement in faith communities, leisure and recreation, volunteering, friendships) as critical to their physical, cognitive, and mental health and wellness. They will be offering a series of trainings on topics supporting community inclusion and participation. Trainings are being offered the fourth Wednesday of the month from 12:00-1:30pm.

- 🌱 Community Inclusion as a Medical Necessity – April 26, 2023
- 🌱 Fundamentals of Community Inclusion (Part 1) – May 24, 2023
- 🌱 Fundamentals of Community Inclusion (Part 2) – June 28, 2023
- 🌱 Addressing Social Isolation & Loneliness – July 26, 2023
- 🌱 Beyond the Diagnosis: Community Inclusion Storytelling – September 27, 2023
- 🌱 Promoting the Development & Use of Natural Supports – October 25, 2023

[See Flier for More Information](#)

UPDATES ON COMPETITIVE INTEGRATED EMPLOYMENT AND CONTINUATION OF NEW ADMISSIONS TO ADULT DAY VOCATIONAL PROGRAMS

This bulletin updates DHHS collaborative work with the community on Competitive Integrated Employment (CIE) efforts to enhance services and supports available for individuals with intellectual and developmental disabilities to help them achieve their goals of employment and community inclusion. This bulletin updates information shared with LME/MCOs in May 2022 regarding admissions to Adult Day Vocation Programs (ADVP).

On Jan. 20, 2022, a memorandum of understanding between Disability Rights North Carolina, the Center for Public Representation, and the North Carolina Department of Health and Human Services (NCDHHS) was announced. Subsequently, on Dec. 8, 2022, an [Implementation Memorandum of Agreement](#) (Implementation Agreement) was signed between Disability Rights North Carolina, the Center for Public Representation and NCDHHS.

As part of the original CIE MOU, NCDHHS announced its plan to close admissions to Adult Day Vocational Programs (ADVPs) beginning July 1, 2022. However, after careful consideration of feedback from persons with Intellectual/Developmental Disabilities (I/DD), family members and providers, NCDHHS determined that it will not move forward with the cessation of new admissions to ADVPs.

The Implementation Agreement signed in December 2022 reflects the Department's updated plan to expand CIE opportunities based on valuable feedback from community stakeholders including providers, consumers, families, and others. DHHS is pursuing the objectives of the Implementation Agreement within a modified timeframe to onboard technical expertise to accomplish CIE goals.

NCDHHS is committed to ensuring that all individuals regardless of disability status have the opportunity to work in the community if they elect to do so. NCDHHS values full integration and supports the rights of people with intellectual and developmental disabilities to choose this pathway. CIE allows individuals to work in the community alongside other employees without disabilities. It also allows individuals to earn at least minimum wage and receive the same workplace benefits and opportunities as other employees doing the same job.

Over the past decade, North Carolina has worked to transform services and systems to support individuals with disabilities as fully included members of their communities. CIE is critical to achieving equal opportunity, full participation, and economic self-sufficiency for people with disabilities. DHHS will update our Strategic Plan to Promote and Expand CIE for Individuals with I/DD (CIE I/DD Plan) in partnership with consumers, families, providers, and stakeholders.

DHHS will continue to enhance employment services and supports for individuals with intellectual and other developmental disabilities, including Traumatic Brain Injury (TBI), by aligning them with evidence-based and promising practices to promote informed choice and more opportunities for CIE.

Please continue to look for updates on CIE work on the [DHHS Competitive Integrated Employment Webpage](#). NCDHHS remains committed to advancing competitive integrated employment efforts for all. We will be working closely with all stakeholders as we further refine our efforts to reach this goal.

If you have any questions, please contact Ginger Yarbrough at 984-236-5046 or ginger.yarbrough@dhhs.nc.gov.

ABA (AKA RBBHT) - THE GOOD, THE BAD AND THE PROGRESS

There is controversy regarding Applied Behavior Analysis (ABA), particularly when used as a comprehensive treatment for individuals with autism. It can be confusing for caregivers who are trying to determine treatment options and select providers for their child. In addition, some families and autistic adults may have experienced or heard of “ABA” treatments that are not reflective of best practices or even potentially harmful. This webinar is intended to help explain what ABA should look like - a treatment plan that is person-centered and promotes goals related to empowerment, independence, and overall happiness. We will also discuss what questions should be considered and asked when researching ABA providers and before beginning an ABA program. A panel including autistic individuals, parents and ASNC clinicians will participate in the session. Session objectives: Define Applied Behavior Analysis in practical terms Provide examples of high-quality ABA across the spectrum and age range Outline key questions to ask when pursuing ABA services.

 [Register Free](#)

 [Additional Webinars](#) (updated often)

PUBLIC COMMENT PERIOD OPEN FOR CLINICAL COVERAGE POLICIES

3H-1 HOME INFUSION THERAPY

Policy Description

The Home Infusion Therapy (HIT) program covers self-administered infusion therapy and enteral supplies provided to a NC Medicaid (Medicaid) or NC Health Choice (NCHC) beneficiary residing in a private residence or to a Medicaid beneficiary residing in an adult care home. Covered services include the following: a. Total parenteral nutrition (TPN); b. Enteral nutrition (EN); c. Intravenous chemotherapy; d. Intravenous antibiotic therapy; and e. Pain management therapy, including subcutaneous, epidural, intrathecal, and intravenous pain management therapy.

 [3H-1 Home Infusion Therapy](#)

8H-6 COMMUNITY TRANSITION (NEW POLICY)


Policy Description:

Community Transition provides one-time funding for initial set up expenses to a beneficiary transitioning from an institutional or other approved setting into their own private residence in the community where they are responsible for their own living expenses. An institutional or other approved setting can include a state developmental center, community intermediate care facility (ICF-IID), nursing facility, licensed group home, alternative family living (AFL) facility, foster home, adult care home (ACH), State Operated Healthcare Facility, or a Psychiatric Residential Treatment Facility (PRTF). Community Transition can support a beneficiary being diverted from entry into ACHs or any institutional level of care due to preadmission, screening, and diversion efforts, provided that the beneficiary is moving to a living arrangement where the beneficiary is directly responsible for their own living expenses.

 [8H-6 Community Transition](#)

OUT-OF-STATE PROVIDERS- SUBMISSION ADDRESS FOR PAPER CLAIMS

Effective May 15, 2023 the Paper Claims submission address will change.

 Contracted providers are contractually required to submit their claims electronically via 837 HIPAA Transaction Files or can be entered via direct data entry into the appropriate provider portal.

♻️ Non-contracted providers who wish to submit a paper claim can mail their claims to the address below:

- Trillium Health Resources
PO Box 240909
Apple Valley, MN 55124

If you have questions, please contact the Provider Support Service Line at 1-855-250-1539.

FREE CRISIS INTERVENTION TRAINING OPPORTUNITY FOR CHILDREN & YOUTH PROVIDERS!

We are happy to announce that the [UNCG Center for Youth, Family, and Community Partnerships](#) (CYFCP) and [NC DHHS Division of Mental Health, Developmental Disabilities, and Substance Abuse Services](#) (DMHDDSAS) are partnering with the [Crisis Prevention Institute](#) (CPI) to provide free crisis intervention training opportunities to children's and youth mental health service providers across North Carolina!

Registration is *now open* for the first nine training opportunities! These sessions will be held virtually. Learn more about this opportunity at go.uncg.edu/crisistraining and register at go.uncg.edu/crisistrainingsignup.

We are really excited to be offering free access to this incredibly valuable training, so we can help provide quality continuing professional development for in-demand skills - all at no cost to you!

If you have any questions, you can contact Shannon Barr, Training Coordinator, at scbarr@uncg.edu.

TRAUMA-INFORMED BEHAVIORAL INTERVENTIONS FOR PROVIDERS: VERBAL INTERVENTION

WEDNESDAY - MAY 17
FRIDAY - MAY 19
TUESDAY - MAY 23
FRIDAY - MAY 26

THURSDAY - JUNE 1
TUESDAY - JUNE 6
TUESDAY - JUNE 13
THURSDAY - JUNE 15
WEDNESDAY - JUNE 21

UNC GREENSBORO
Center for Youth, Family and Community Partnerships

TIME
9:00 AM TO 1:00 PM

LOCATION
VIRTUAL

LEARN MORE AND REGISTER:
GO.UNCG.EDU/CRISISTRAINING

PARENTS AS COLLABORATIVE LEADERS (PACL) TRAINING

The Whole Child Health Section of the N.C. Child Division of Child & Family Well-Being has assembled a group of parent leaders and trained them to facilitate the nationally recognized, research-based curriculum, Parents as Collaborative Leaders. These parents are passionate about teaching others who have children with a variety of special healthcare needs and/or developmental concerns to become effective leaders in their communities, at the state level, and at the national level. These trainings have been used to support parents and caregivers being more active and confident at the table in a variety of educational, medical, and community settings.

These trainings are offered at no cost. These trainings are for parents/caregivers and advocates of our members. **The time for all trainings is 10:00am-11:30am.**

- 🌱 **Module 6:** Listening & Asking Clarifying Questions – April 27, 2023

[Registration Link](#)

More information about Modules 5 & 6

- 🌱 **Module 7:** Understanding Conflict – May 11, 2023

[Registration Link](#)

- 🌱 **Module 8:** Re-Framing Agendas: From the Personal to the Policy Level – June 8, 2023

[Registration Link](#)

More information about Modules 7 & 8

- 🌱 **Module 9:** Solving Problems in Groups – June 22, 2023

[Registration Link](#)

- 🌱 **Module 10:** Understanding Diversity – July 20, 2023

[Registration Link](#)

More information about Modules 9 & 10

PUBLIC COMMENT PERIOD OPEN FOR STATE FUNDED SERVICE DEFINITION - RESPITE

The Division of Mental Health, Developmental Disabilities and Substance Use Services has posted for 45 day public comment of the [Proposed State-Funded Service Definition Policies](#) for your feedback.

The public comment review period is from **March 17, 2023 – May 3, 2023** and your feedback can be provided at DMHIDDCONTACT@dhhs.nc.gov. Below you will find a brief summary of the proposed service definition.

RESPITE

- 🌱 Respite provides individualized or group periodic support and relief to the primary caregiver(s) from the stress of caring for child or adolescent recipients age 3-17 with serious emotional disturbance (SED), or severe substance use disorders (SUD), child or adolescent or adult recipients age 3 and above with intellectual or developmental disability (I/DD) or traumatic brain injury (TBI).
- 🌱 This service must be provided in the following settings:
 - Mental Health and Substance Use - homes licensed to provide therapeutic foster care, private home services under 131D, a center-based or private home Respite service licensed under 10A NCAC 27G .5100. **OR**

- I/DD or TBI - licensed AFLs (for children or if the AFL serves 2 or more adults), or unlicensed AFL (if serving 1 adult)
- 🌱 This service requires the following specific criteria:
 - age 3 through 17 and has a primary diagnosis of a SED, or a primary diagnosis of severe SUD, as defined by the current Diagnostic and Statistical Manual of Mental Disorders (DSM-5), or any subsequent editions of this reference material; **OR**,
 - age 3 and up and has a primary diagnosis of I/DD or TBI with a NC Support Needs Assessment Profile (Level 3 or higher), or Supports Intensity Scale (Level D or higher), or TBI Assessment requiring a moderate to high level of supervision and support in most settings;
 - The recipient requires continuous supervision due to their diagnosis;
 - The primary caregiver(s) need periodic support and relief from the responsibility and stress of caregiving **OR** the recipient needs periodic support and relief from the primary caregiver(s);
 - For all of the above there are no other natural supports are unavailable to assist with caregiving.
- 🌱 No more than 1,536 units (384 hours) can be provided to a recipient in a plan year.
- 🌱 For 24-hour respite, providers shall bill for the time staff were awake providing supports.

EVV SOFT LAUNCH SCHEDULE/UPDATES

🌱 [Electronic Visit Verification Updates March-13-2023](#)

HOME HEALTH CARE SERVICES SOFT LAUNCH APRIL 1, 2023, THROUGH JUNE 30, 2023

Starting April 1, 2023, the North Carolina Department of Health and Human Services (NCDHHS) will implement a **soft launch** of the Electronic Visit Verification (EVV) system for Home Health Care Services (HHCS) rendered under both the Standard Plans and NC Medicaid Direct. **EVV will verify:**

- | | |
|----------------------------------|-----------------------------------|
| 🌱 Date of service | 🌱 Individual providing service |
| 🌱 Beneficiary receiving services | 🌱 Type of service rendered |
| 🌱 Location of service | 🌱 Time the service begins and end |

Services covered through the State Plan and the 3-A Home Health Clinical Coverage Policy that will be subject to the EVV requirement:

- | | |
|--------------------|--------------------------|
| 🌱 Aide Services | 🌱 Speech Therapy |
| 🌱 Physical Therapy | 🌱 Occupational Therapy |
| | 🌱 Skilled Nursing Visits |

During this soft launch period beginning April 1, 2023:

- 🌱 Home Health Care providers will submit EVV information
- 🌱 The EVV program will operate as “Pay and Report”
- 🌱 Claims will not pend based on failed validation. If a claim fails validation, a report will be generated noting the validation issue and the provider will be allowed to receive payment.

A hard launch will begin July 1, 2023. On this date:

- 🌱 All Home Health Care providers are expected to be fully compliant with EVV requirements
- 🌱 EVV data must be validated prior to claims adjudication
- 🌱 Claims without the required EVV criteria will deny

REVENUE CODES AND SERVICES FOR CLAIMS SUBJECT TO EVV:

REVENUE CODE	SERVICE
THERAPIES	
420	Physical therapy
424	Physical therapy evaluation
430	Occupational therapy
434	Occupational therapy evaluation
440	Speech-language pathology services
444	Speech-language pathology services evaluation
SKILLED NURSING VISITS	
550	Skilled nursing: Initial assessment/re-assessment (Initial assessment of a new patient or 60-calendar-day re-assessment)
551	Skilled nursing: Treatment, teaching/training, observation/evaluation
559	Skilled nursing: For a dually eligible beneficiary when the visit does not meet Medicare criteria (for example, the beneficiary is not homebound)
580	Skilled nursing: venipuncture
581	Skilled nursing: Pre-filling insulin syringes/Medi-Planners
HOME HEALTH AIDE	
570	Home Health Aide

HOME HEALTH CARE SERVICES PROVIDER SELECTION OF ELECTRONIC VISIT VERIFICATION VENDOR

Home Health Care Service providers rendering Home Health Care Services (HHCS) subject to electronic visit verification (EVV) are required to utilize an EVV to capture HHCS visits.

This requirement includes providers who render HHCS under both NC Medicaid Managed Care and NC Medicaid Direct.

Each Medicaid payer type has a free EVV solution a provider can use. For providers rendering services to beneficiaries under:

- 🌱 **NC Medicaid Direct**, Sandata is the free solution.
- 🌱 **Standard Plans** (except for Healthy Blue) HHAeXchange is the free solution.
- 🌱 **Healthy Blue**, CareBridge is the free solution.

Home Health EVV soft launch is scheduled for April 1, 2023, for both Standard Plans and NC Medicaid Direct.

- 🌱 Providers rendering HHCS subject to EVV under NC Medicaid Direct must be registered with Sandata to use their free EVV solution or select an alternate EVV solution.
- 🌱 The selected alternate EVV solution vendor must be registered with Sandata and complete the required Sandata EVV training and testing.

NC Medicaid requested that all providers select an alternate EVV vendor by Nov. 1, 2022; however, there are providers who have yet to make a selection. **It is imperative that provider agencies delivering HHCS subject to EVV under NC Medicaid Direct and planning to use Sandata, the State's free EVV solution, register with Sandata immediately.**

NC Medicaid Direct

Those provider agencies delivering HHCS subject to EVV under NC Medicaid Direct that will not be using the State's EVV solution should contact their alternate EVV solution vendor **as soon as possible** to ensure the vendor is registered and has completed all required Sandata EVV training and testing no later than March 20, 2023.

- 🌱 Any provider agency planning to deliver HHCS subject to EVV under NC Medicaid Direct that has not registered with Sandata or that has not selected an alternate EVV solution by March 20, 2023, will be required to enroll with Sandata for the initial April 1, 2023, Home Health EVV soft launch.
- 🌱 After the April 1, 2023, launch, a change to an Alternate EVV solution can be made.

- 🌱 HHCS providers are to ensure there is no disruption in visit capture during the transition to an alternative EVV solution.

Standard Plans

Home Health Care Service providers rendering HHCS under a Standard Plan should contact either HHAeXchange or CareBridge as applicable to obtain information about registering to use their free EVV solution or for registration and testing information for their selected alternate EVV solution vendor. Contact information is below.

Sandata

- 🌱 Sandata Customer Support Team
NCCustomerCare@Sandata.com
855-940-4915

- 🌱 Alternate EVV Support
NCAltEVV@Sandata.com
844-289-4246

HHAeXchange

- 🌱 CustomerSupport:
www.hhaexchange.com/contact
855-400-4429

CareBridge

- 🌱 Customer Support
ncevv@carebridgehealth.com
855-782-5976

- 🌱 Third-Party EVV Solutions Integrated with CareBridge
evvintegrationsupport@carebridgehealth.com
844-920-0989

NC Medicaid

- 🌱 Medicaid.evv@dhhs.nc.gov

UPCOMING ASSISTIVE TECHNOLOGY POP UP EVENTS

Upcoming Assistive Technology (AT) Pop Up events (open to the public) on Accessible Recreation and Gaming.

- 🌱 May 19 in Sanford.

[Registration info HERE](#)

Check out the [NCATP Events page](#) for more info.

DISASTER PLANNING

Hurricane Season begins June 1st and FEMA provides information you need to get informed, make a plan and build a kit based on your needs. To learn more visit [FEMA's Ready.gov](https://www.fema.gov/ready) website. Their resource page provides the information you need to learn for your own personal preparedness.



Trillium Health Resources is focused on preparing members and provider agencies for Hurricane Season. Disasters can happen anytime, but proactive measures can help reduce their impact. To help develop your disaster plan for hurricanes, please refer to our 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 28 county catchment area to identify gaps and needs related to inclusive disaster response.

Please inform Trillium of any service provision or operational changes as a result of a tropical storm or hurricane by completing the **Changes to Provider Operations form**. This form is located on the [Community Crisis and Disaster Response webpage](#) under the "Provider" tab when a storm is approaching. Our goal is to stay up to date about changes to service provision and to assist with continuing to best serve members.

NEED TO REPORT FRAUD, WASTE AND ABUSE?

EthicsPoint is a secure and confidential system available 24 hours a day, 7 days a week for reporting suspected violations of fraud, abuse and confidentiality breaches. You can access EthicsPoint through website submission at [EthicsPoint - Trillium Health Resources](#) or by calling toll free 1-855-659-7660.

Any questions about this Communication Bulletin *that does not already have an email listed for questions from that specific section*, 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.