

To: All Providers

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Date: April 19, 2024

Subject: Change of Email Address for Provider Invoices, North Carolina's Transition of 1915(b)(3) Benefits to 1915(i) Fact Sheet, 2024 Direct Support Professional Survey Live Now, North Carolina Child Treatment Collaboration, New Resources to Learn More About NC Medicaid's Tailored Plans, Update to NCTracks: Re-verification Terminations, Important Email Addresses Update, Launch of Behavioral Health and Intellectual/Developmental Disabilities Tailored Plans, Updated Provider Fact Sheets, Summer Food Assistance Program Lunch and Learn: Sun Bucks, Certified Older Adult Peer Specialist Training Registration Open, Native American Health Summit in April, Tobacco-Related Policy Requirements, Unlicensed Alternative Family Living and Overnight Respite Requests, Community Crisis Intervention Training, Proposed Medicaid Clinical Coverage Policies-Open for Review and Comment, Roadmap2 Ready Disaster Planning, Need to Report Fraud, Waste, and Abuse?

CHANGE OF EMAIL ADDRESS FOR PROVIDER INVOICES

To receive reimbursement for invoices February 1, 2024 and forward, please submit your invoices to Payablesnoreply@trilliumnc.org. Trillium will remit payment of your invoice within thirty (30) days of receipt of complete, accurate, and approved invoice.

NORTH CAROLINA'S TRANSITION OF 1915 (b)(3) BENEFITS TO 1915(i) FACT SHEET

Home and community-based services (HCBS) provide opportunities for community integration, enabling Medicaid enrollees to obtain services in their community. North Carolina's local management entities/managed care organizations (LME/MCOs) provide 1915(b)(3) services, which offer a critical set of HCBS to Medicaid enrollees with

significant behavioral health needs and intellectual/developmental disabilities (I/DD).

Because Behavioral Health I/DD Tailored Plans will be operating under North Carolina's 1115 demonstration, they will no longer be able to provide services under the 1915(b)(3) authority. To ensure that individuals maintain access to these critical services when Tailored Plans launch, North Carolina is transitioning 1915(b)(3) services to 1915(i) services.

With this transition, North Carolina is expanding the populations eligible for some of these important services. Trainings provided by NCDHHS on the 1915(b)(3) to 1915(i) transition, can be accessed at the below links:

 [Tailored Care Management \(TCM\) Provider Slides](#)

 [Service Provider Slides](#)

Federal rules require that to obtain 1915(i) benefits, an individual must obtain an independent assessment to determine eligibility for 1915(i) services and to be used to develop a Care Plan for individuals with behavioral health needs or an Individual Support Plan (ISP) for individuals with an I/DD or traumatic brain injury (TBI) in North Carolina. This fact sheet provides answers to common questions about North Carolina's transition from 1915(b)(3) to 1915(i) services.

Fact Sheet North Carolina's Transition of 1915(b)(3) Benefits to 1915(i)

**2024 DIRECT SUPPORT PROFESSIONAL SURVEY LIVE
NOW!**

The North Carolina Division of Mental Health, Developmental Disabilities, and Substance Use Disorder (DMH/DD/SUS) wants to hear from **YOU** on future improvements that **YOU** would like to see for Direct Support Professionals.

Please complete this [2-minute survey](#) to make your voice heard!

This survey can be **100% anonymous** if you choose not to provide your name. All survey answers will be shared directly with the Division of Mental Health, Developmental Disabilities, and Substance Use Services (DMH/DD/SUS).

The survey will **only** be open until April 26 so please respond today. Limit one response per person.

NORTH CAROLINA CHILD TREATMENT PROGRAM COLLABORATION

The [NC Child Treatment Program \(NC CTP\)](#) is collaborating with the North Carolina Administrative Offices of the Courts, Safe Babies Courts State Advisory Committee, NC Department of Health and Human Services and the Division of Child and Family Wellbeing to bring Zero to Three's Safe Baby Court Teams to New Hanover and Brunswick counties. This evidence-based model for children 0-6 and their caregivers (foster, potential adoptive, kinship, and biological) is beginning in 5 counties.

 [CPC Cohort Information](#)

NEW RESOURCES TO LEARN MORE ABOUT NC MEDICAID'S TAILORED PLANS

Starting July 1, 2024, some people with NC Medicaid will get a new health plan — a Behavioral Health and Intellectual/Developmental Disabilities Tailored Plan (Tailored Plan). Tailored Plans cover physical health, prescription and behavioral health needs, including mental health, severe substance use disorder, I/DD and Traumatic Brain Injury (TBI) needs, all in one plan.

Today, with input from many in the community, we launched [new resources and information](#) to help people know what to expect with the launch of Tailored Plans.

Please share the resources below about Tailored Plans with the communities you serve. There is important information about what to expect and actions that people can take between now and July to prepare for this move.

For additional information about Tailored Plan services, visit the [Tailored Plans website](#).

MORE INFORMATION ABOUT NC MEDICAID'S TAILORED PLANS LAUNCH JULY 1

In preparation of the launch, some people will be automatically enrolled in one of four Tailored Plans on April 13, 2024. Until July 1, 2024, everyone will continue receiving mental health, severe substance use, I/DD, and traumatic brain injury (TBI) services as they do today.

The NC Medicaid Enrollment Broker will begin mailing letters and enrollment packets on April 17 to people who were automatically enrolled and to those who have the option to enroll in a Tailored Plan. Notices are also being sent to beneficiaries' authorized representatives.

The packets provide details about Tailored Plan enrollment, including:

- 🌱 Name and contact information of the Tailored Plan in which the eligible person was enrolled
- 🌱 Reminder that Tailored Plan benefits will begin July 1, 2024
- 🌱 How to select a primary care provider (PCP)
- 🌱 Other available health care options for each beneficiary, as applicable
- 🌱 Contact information for the Enrollment Broker, which can provide choice counseling and make enrollment changes
- 🌱 Copay, services and drug list

The Tailored Plan choice period is April 15 – May 15, 2024. During this time beneficiaries should contact their Tailored Plan to choose a primary care provider (PCP) with their plan. If a beneficiary's PCP is not shown in their Tailored Plan's network of providers, they should check back regularly as the Tailored Plans continue to add new providers and the list is updated daily.

If a Tailored Plan beneficiary does not select a PCP during the choice period, one will be automatically assigned to them on May 16, 2024.

Beneficiaries with questions can contact the Medicaid Enrollment Broker at 1-833-870-5500 or visit [NC Medicaid Plans website](#).

Additional information is available in the [press release](#).

UPDATE TO NCTRACKS: RE-VERIFICATION TERMINATIONS

Currently, if a provider does not complete the re-verification process, or the re-verification application is denied due to a negative background finding, failure to complete fingerprinting, bad data, or expired credentials (license/accreditation/certification per the Provider Permission Matrix), only the provider's non-Division of Mental Health, Developmental Disabilities and Substance Use Services (DMH/DD/SUS) health plans terminate.

Effective May 19, 2024, an update to NCTracks will be made to the re-verification process. If a provider's Medicaid health plan is terminated during the re-verification process, their **DMH/DD/SUS health plans will also terminate**:

Providers will be required to submit a re-enrollment application to continue to render services to NC Medicaid or State-funded beneficiaries.

More information about the re-verification process and links to training documents can be found on the [Provider Re-Credentialing/Re-verification page](#).

 [NCTracks Home](#)

IMPORTANT EMAIL ADDRESSES UPDATE

On May 1, 2024, Eastpointe and Sandhills Center legacy MCO email addresses will no longer accept incoming emails. If you are unable to determine a staff member's Trillium email address, you may call 866-998-2597 and request to be transferred to any of our staff.

Please use Trillium email addresses going forward when communicating with all Trillium staff members. It is our hope that this will simplify communications and responses to your questions and concerns.

Thank you for your assistance!

LAUNCH OF BEHAVIORAL HEALTH AND INTELLECTUAL/DEVELOPMENTAL DISABILITIES TAILORED PLANS

Tailored Plans are a new kind of NC Medicaid Managed Care health plan for approximately 210,000 beneficiaries with a serious mental illness, a serious emotional disturbance, a severe substance use disorder, an intellectual/developmental disability or a traumatic brain injury in North Carolina.

They will cover doctor visits, prescription drugs and services for mental health, substance use, I/DD and traumatic brain injury in one plan. Eligible North Carolinians who are covered by NC Medicaid Direct will be covered by a Tailored Plan beginning July 1. The name of their Medicaid plan will change but the services covered remain the same. A bilingual toolkit with accessible resources is now available for people impacted by the transition to Tailored Plans.

The [NC Medicaid Enrollment Broker](#) will mail a letter in mid-April to anyone moving to a Tailored Plan. Tailored Plan beneficiaries will need to choose a primary care provider between April 15 and May 15, 2024. If you don't choose a PCP by May 15, the Tailored Plan will assign one to you. People can change their PCP through Jan. 31, 2025. 31, 2025.

Tailored Plans will be managed by the






committee hearing last week, NC Medicaid officially announced that all Tailored Plans are ready to go live on July 1.

For more information about [Tailored Plans](#) website. You can access the [Tailored Plans Toolkit here](#).

 [Press Release](#)

UPDATED PROVIDER FACT SHEETS

NCDHHS updated Fact Sheets in the NC Medicaid Managed Care Provider Playbook to reflect the July 1, 2024, launch of Tailored Plans.

-  [What Providers Need to Know: Part 1 – Before Tailored Plan Launch](#)
-  [Tailored Plan Provider Contracting Deadlines Questions and Answers](#)
-  [NC Medicaid Provider and Health Plan Lookup Tool](#)
-  [What Providers Need to Know: NC Health Choice Move to Medicaid](#)
-  [NC Medicaid Managed Care: Provider Training](#)

SUMMER FOOD ASSISTANCE PROGRAM LUNCH AND LEARN: SUN BUCKS

The North Carolina Division of Child and Family Well-Being (DCFV) invites you to join the upcoming Lunch & Learn webinar for community organizations to hear more about the newest summer food assistance program: **SUN Bucks**.

Beginning in Summer 2024, SUN Bucks will provide grocery-buying benefits to qualifying families with school-aged children during the summer months. Benefits can be used to buy healthy food at places like grocery stores, farmers markets, and some online retailers.

Please register for one of the session(s) that work best with your schedule by using the links provided below.

Please forward to any community organizations you feel may benefit from these webinars!

Lunch & Learn: SUN Bucks, North Carolina's Newest Food Assistance Program for Kids!

Date	Time	Registration Link
Monday, April 22 nd	12:00 – 1:00 PM EST	Click here to register!
Wednesday, May 8 th	12:00 – 1:00 PM EST	Click here to register!

Additional information and resources are available on the [Sun Bucks website](#). You can also reach out to DCFWSUNBucks@dhhs.nc.gov with any questions.

NATIVE AMERICAN HEALTH SUMMIT IN APRIL

Trillium is hosting a Native American Health Summit on Saturday April 20th. This is an in-person event. Use the link below to learn more and register.

If you have any questions please contact Brooke Mickelson at Brooke.Mickelson@trilliumnc.org

 [Learn More and Register](#)

TOBACCO-RELATED POLICY REQUIREMENTS

Tobacco-related policy requirements will be **effective July 1, 2024**, for NC Medicaid Managed Care Standard Plans, Behavioral Health and Intellectual/Developmental Disabilities (I/DD) Tailored Plans, and Local Management Entity/Managed Care Organizations (LME/MCOs) contracted medical, behavioral health, I/DD and traumatic brain injury (TBI) service providers. These requirements apply to both Medicaid and state-funded service providers. The Department will work with health plans and LME/MCOs to include these requirements, as appropriate, in advance of July 1, 2024.

Secondhand smoke is a well-documented danger to health. No one should be exposed to secondhand smoke when they access care or on the job. Research shows that most people who use tobacco want to quit. An environment free from triggers, as well as access to evidence-based treatment, is necessary to support service recipients whose goal is to become tobacco free. Among people who try to become tobacco free, only a small minority receive such assistance. Additionally, people with behavioral health disorders die disproportionately from tobacco-related illness.

Starting July 1, 2024, Standard Plans, Tailored Plans and LME/MCOs will require contracted providers, with exceptions noted below, to implement a tobacco-free policy covering any portion of the property on which the provider operates that is under its control as owner or lessee, including buildings, grounds and vehicles.

 [Complete Detailed Information](#)

UNLICENSED ALTERNATIVE FAMILY LIVING AND OVERNIGHT RESPITE REQUESTS

Trillium conducts initial and annual site reviews for Unlicensed Alternative Family Living homes. These visits will be conducted live/virtually or conducted in person. Respite site visits will be conducted for any agency requesting overnight respite services in an unlicensed site.

To request, please complete the "Request to Add Site Form Alternate Family Living (AFL) or Respite" form located on Trillium's website under the For Provider's page-[AFL/Respite Additional Site Form](#).

An email notification will be sent with an attached checklist identifying items that will need to be seen during a site review. The documentation should be submitted as instructed. QP/Supervisor must be in attendance for the review.

TRILLIUM OFFERS COMMUNITY CRISIS INTERVENTION TRAINING

Community Crisis Intervention is an 8-hour training offered exclusively through Trillium. The training is a free intensive 1-day training. See the flyer below for more information.

[Community Crisis Intervention Training Information](#)

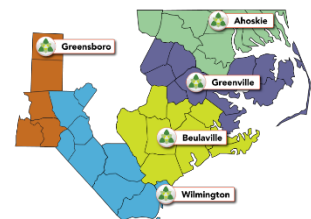
PROPOSED MEDICAID CLINICAL COVERAGE POLICIES- OPEN FOR REVIEW AND COMMENT

NC Medicaid Division of Health Benefits has posted Clinical Coverage Policies for public comment. [Proposed Medicaid Policies](#). The following new Behavioral Health Clinical Coverage Policies are now open for review and comment.

ROADMAP2 READY 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 website](#).

**Roadmap
2 Ready**



There is an opportunity through North Carolina Emergency Management to apply for the Non-Profit Security Grant Program. Details are posted on NCEM's updated [NSGP website](#). Eligible nonprofits are encouraged to visit the website for helpful application information, training opportunities and FAQs. Virtual Salesforce information sessions & office hours will be available to assist FY24 NSGP applicants with the Salesforce registration process, with the schedule announced on the website.

If you have not submitted your emergency plan this year, please submit it as soon as possible. Even if you have no updates to your plan from last year, you need to submit it again. 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. Our team collaborates with state, county, and community programs within our 46 county catchment area to identify gaps and needs related to an inclusive disaster response.

Please inform Trillium of any service provision or operational changes as a result of severe weather or other States of Emergency by completing the **Changes to Provider Operations form**. This form, which is only active when needed, is located on the [Community Crisis and Disaster Response webpage](#) under the "Provider" tab.

NEED TO REPORT FRAUD, WASTE AND ABUSE?

EthicsPoint is a secure and confidential system available 24 hours a day, 7 days a week for anyone to report suspected violations of potential fraud, waste and abuse or confidentiality issues. 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.