



Network Communication Bulletin #384

To: All Providers

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Senior VP of Network Management

Date: December 6, 2024

Subject: Registry of Unmet Needs Application; Early and Periodic Screening, Diagnosis, and Treatment Information; Medicaid Managed Care Provider Updates; December 2024 Provider Training Schedule Available; December: Roadmap2Ready; State Funded Services Rate Increase; Hurricane Helene Resources and Updates; Important Information for Relative as Direct Support Employee; Iris Reminders for Providers; Care Management Trainings Available in My Learning Campus; Trillium Provider Network Survey for Technical Assistance, Education, and Training Topics; Proposed Medicaid Policies Open for Public Comment; Medication Management Services - Open Enrollment; Connections-Care Management Platform; Request for Proposal: Transition Management Services; Upcoming Re-Entry Simulation; Trillium is a Closed Network for BH/SUD/IDD; Need to Report Fraud, Waste, and Abuse?

NEW

REGISTRY OF UNMET NEEDS APPLICATION

Effective December 1, 2024 members who think they may qualify for NC Innovations services should use the updated link to submit a Registry of Unmet Needs application (also known as the waitlist for Innovations waiver services) and supporting documentation: [Registry of Unmet Needs Application](#)

Visit www.TrilliumHealthResources.org to learn more about Innovations Waiver services.

EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT

WELLNESS VISITS (EARLY AND PERIODIC SCREENING OR HEALTH CHECK)

Wellness visits are an essential part of children's health. Medicaid's [Early and Periodic Screening, Diagnostic and Treatment](#) (EPSDT) benefit covers a program of regular wellness visits called Health Check.

Wellness visits allow health care providers to carefully monitor a child's overall health and development, so that health concerns are identified and addressed early. These visits include [services recommended by the American Academy of Pediatrics](#).

The required components of a Health Check visit are:

- 🌱 Comprehensive health and developmental history that assesses for both physical and mental health, as well as for substance use disorders
- 🌱 Comprehensive, unclothed physical examination
- 🌱 Appropriate immunizations, in accordance with the schedule for pediatric vaccines established by the Advisory Committee on Immunization Practices
- 🌱 Laboratory testing (including blood lead screening appropriate for age and risk factors)
- 🌱 Health education and anticipatory guidance for both the child and caregiver

DIAGNOSTIC AND TREATMENT SERVICES

If a problem is found during a wellness visit, providers make appropriate referrals to necessary diagnostic and treatment services. Prior approval from the Division of Health Benefits may be required for specialized care.

- 🌱 [EPSDT Provider Information Link](#)

MEDICAID MANAGED CARE PROVIDER UPDATES

OUT OF STATE PHARMACY LISTS NOW POSTED & UPDATED DAILY ON NCTRACKS

As a service to both NC Medicaid beneficiaries and providers, NCTracks has created a webpage listing of all enrolled out of state (OOS) pharmacies, categorized by state. To download the list for a particular state, click the corresponding link within the table. This data will be updated daily.

The link can be found on the public facing [NCTracks Recipient Portal](#) under Quick Links. Logging into NCTracks is not required to access the Recipient Portal where the Out of State Enrolled Pharmacies List is found.

NOTIFICATION REQUIRED FOR CHANGE OF OWNERSHIP

Consistent with state and federal law, NCDHHS requires notification of any change of ownership (CHOW) for providers enrolled as a NC Medicaid provider. The enrolled provider must notify the Department at least 30 days prior to the effective date of any CHOW.

Providers will need to complete the [Provider Change of Ownership Disclosure Form](#). The form is located on the [NCTracks Providers webpage](#) under Quick Links.

NC MEDICAID ADVISORY COMMITTEE AND BENEFICIARY ADVISORY COUNCIL – SEEKING INPUT TO IMPROVE NC MEDICAID





In April 2024, the Centers for Medicare and Medicaid Services (CMS) released its final rule, “Ensuring Access to Medicaid Services.” The new rule requires State Medicaid agencies to create a Medicaid Advisory Committee (MAC) and Beneficiary Advisory Council (BAC) by July 2025. The MAC will replace the current Medical Care Advisory Committee (MCAC). The MAC/BAC are designed to center the lived experiences of beneficiaries, their families and caregivers.

[Applications](#) for the MAC and BAC are now being accepted. For questions or additional information, please email Medicaid.NCEngagement@dhhs.nc.gov.

 [Full Article Available Here](#)

DECEMBER 2024 PROVIDER TRAINING SCHEDULE AVAILABLE

Registration is open for the [December 2024 training courses](#) listed below. NCTracks zoom courses can be attended remotely from any location. Courses offered this month include:

-  Ordering, Prescribing and Referring (OPR) Provider Enrollment
-  Submitting a Prior Approval Private Duty Nursing (2 Dates Available)
-  Provider Recredentialing and Reverification
-  Provider Web Portal Applications

🌱 Using the Provider Message Center Inbox

See the document linked below for more information on the course schedule and access to Zoom links:

🌱 [December 2024 Provider Training Schedule](#)

🌱 [NCTracks](#)

DECEMBER: ROADMAP2READY

Part of being prepared is to have a plan for any kind of emergency. Not only is it a requirement for licensed facilities but these allow your business, staff and clients to be better prepared and give input on how to improve.

To finish out the year, here are the links of the past Roadmap2Ready and the topics they covered in 2024. If you would like to submit a topic to cover next year, please email Audrey.Hart@TrilliumNC.org.

April: [Submitting your emergency plans to Trillium](#) and Non-Profit Security Grant opportunity with NC Emergency Management (topic found on page 9).

May: [Importance of updating your organizations contact information](#) with 911 (topic found on page 7).

June and July: [Recruiting providers to assist with shelters in times of emergency \(topic found on page 6\)](#).

August: [Conducting a Hazard & Vulnerability Analysis for your organization \(topic found on page 3\)](#).

September: [Preparedness Month- Steps to becoming prepared \(topic found on page 4\)](#).

October: [Fire Prevention—Creating](#) a fire plan for your organization based on OSHA requirements (topic found on page 5).

November: [Winter Weather Planning and safe house heating practices \(topic found on page 4\)](#).

We hope you have a safe, warm and joyous winter. We will be back in January with more topics on how to improve your organizations and personal emergency plans.

REMINDERS





STATE FUNDED SERVICES RATE INCREASE

Please review the updated rate table that reflects rate increase for providers with approved State Funded services effective November 1, 2024. The [linked service codes](#) have been updated.

HURRICANE HELENE RESOURCES AND UPDATES







The [Disaster Supplemental Nutrition Assistance Program \(D-SNAP\)](#) is a temporary disaster food assistance program for individuals impacted by natural disasters like Hurricane Helene.

Additional Resources for Food Support:

-  [NC Food and Nutrition Services](#)
-  [NC WIC Program](#)
-  [NC WIC Flexibilities in Response to Hurricane Helene](#)
-  [Local Food Resources \(2-1-1\)](#)

PHYSICAL AND MENTAL HEALTH RESOURCES

[NCDHHS](#) has deployed crisis counselors in shelters and communities to support mental health recovery from Hurricane Helene. The following are resources currently available to support those in Western North Carolina:

-  [Julian F. Keith Alcohol and Drug Abuse Treatment Center](#)
-  [Weathering the Storm: Mental Health and Disability-related Resources](#)
-  [Somethings: Mental Health Services for Teens](#)
-  [Children with Special Health Care Needs Help Line](#)
-  [Hope for NC Helpline: support for first responders and volunteers](#)
-  [988 Suicide and Crisis Hotline](#)

IMPORTANT INFORMATION FOR RELATIVE AS DIRECT SUPPORT EMPLOYEE

Effective December 1, 2024, providers and/or employer of record (EOR) should use the following link to request initial or renewal of Relative as Direct Support Employee (RDSE), formerly known as Relative as Provider (RAP): [Innovations Waiver - Relative/Guardian as Direct Service Employee](#).

IRIS REMINDERS FOR PROVIDERS

IRIS ALERTS:

The Live IRIS site is located at <https://iris.ncdhhs.gov>. In addition, the IRIS Training site can be accessed at <https://iristraining.ncdhhs.gov>.

IRIS REPORTING TIMELINES

- 🌱 Level 2 incidents: An IRIS report must be submitted within 72 hours of learning of the incident.
- 🌱 Level 3 incidents: Verbal or written (email) notification to Trillium within 24 hours of learning of the incident. An IRIS report must be submitted within 72 hours of learning of the incident; however, for incidents involving allegations against staff, the IRIS report must be submitted within 24 hours of learning of the incident (to meet HCPR reporting timelines).

TRILLIUM'S REPORTING EXPECTATIONS

- 🌱 All reports must be submitted on time (zero late submissions). If a report is submitted outside the 72-hour required timeframe, please provide a statement in the IRIS report regarding the submission of the incident outside reporting timeframe.
- 🌱 All required fields (DOB, gender, incident details, cause of incident, incident prevention, authorities contacted, etc.) must be completed in IRIS in order for Trillium to process and close the report.
- 🌱 Please ensure member's LME-MCO record number, Medicaid ID and/or CNDS ID is completed on the Consumer's Treatment tab.
- 🌱 On the Provider Information tab, please ensure the Provider Agency name is entered in full and how it appears on the contract/license etc.

- 🌱 When a report contains allegations of abuse/neglect/exploitation against staff, the internal investigation report is required to be uploaded to the IRIS report within 5 working days.
- 🌱 Response to Trillium's questions must be provided within 24 hours of receiving an email or phone call regarding an incident. Please note, failure to respond to follow up questions or complete required elements may result in referral to Compliance.

REMINDERS

- 🌱 If a staff person is in a car accident while providing services to a member, an incident report is required to be submitted in IRIS. Even if a member does not require medical treatment, it is expected that the incident will be reported to law enforcement and medical treatment will be offered. These incidents meet a level II incident criteria and can be submitted as "Consumer Injury-Auto Accident."
- 🌱 On the Provider Information tab, please ensure the correct plan/service that the member is enrolled in is selected. This will ensure the IRIS report is directed to the proper Health Plan or LME-MCO for review.
- 🌱 When selecting the "Host" LME-MCO and the "Home" LME-MCO on the Provider Information tab in IRIS, please remember that the "Host" LME-MCO is the county where services are being provided and the "Home" LME-MCO is the county of residence where the member's Medicaid is linked to.
- 🌱 For Allegations of Abuse/Neglect/Exploitation against Staff, please ensure that both of the questions listed on the Incident Information tab, "**Does this incident include an allegation against Staff and/or Facility?**" and "**Will this allegation require a submission of a Consumer Incident Report?**" are both checked **YES**. Then complete the abuse tab and all **three** tabs under the HCPR tab.
- 🌱 For Member Deaths, please upload the death certificate and/or Medical Examiner report upon receipt and update the death information tabs accordingly.
- 🌱 Medical illness is not reportable unless it results in injury or death or is believed to be caused by abuse/neglect or medication error.
- 🌱 For Member Injury, please elaborate on the type of treatment (i.e., stitches, cast, prescription medication) that the member receives for the injury

(treatment does not include diagnostic tests such as blood work, x-ray, MRI, EKG, etc.).

Please visit Trillium's [My Learning Campus](#) to access Incident Reporting Training for your agency staff.

For any incident-related questions, please contact:

- 🌱 Julie McCall (Julie.Mccall@TrilliumNC.org) for **IRIS counties:** Bladen, Columbus, Brunswick, New Hanover, Pender, Onslow, Jones, Carteret, Pamlico, Craven, Pitt, Beaufort, Hyde, Dare, Tyrrell, Washington, Martin, Bertie, Chowan, Perquimans, Pasquotank, Currituck, Camden, Gates, Hertford, Northampton, Halifax, Nash.
- 🌱 Christy Way (Christy.Way@TrilliumNC.org) for **IRIS counties:** Anson, Hoke, Lee, Montgomery, Moore, Randolph, Richmond
- 🌱 Debbie Powell (Debbie.Powell@TrilliumNC.org) for **IRIS counties:** Guilford
- 🌱 John English (John.English@TrilliumNC.org) for **IRIS counties:** Edgecombe, Wilson, Robeson, Scotland, Greene
- 🌱 Veronica Murphy (Veronica.Murphy@TrilliumNC.org) for **IRIS counties:** Duplin, Lenoir, Sampson, Warren, and Wayne

CARE MANAGEMENT TRAININGS IN MY LEARNING CAMPUS

The Trillium Training Department would like to encourage staff, providers and members to learn more about diabetes and healthy eating by participating in these training sessions on the [Members My Learning Campus](#):

- 🌱 [What is Diabetes?](#)
- 🌱 [Healthy Eating](#)
- 🌱 [Healthy Eating Tips](#)

TRILLIUM PROVIDER NETWORK SURVEY FOR TECHNICAL ASSISTANCE, EDUCATION, AND TRAINING TOPICS

The Trillium Network Management team wants to ensure that we provide technical assistance and education on a variety of topics to assist our provider network. Your input is important to us to make sure that we are meeting your needs and

expectations. We have three quick questions that will not take more than a minute to complete.

The purpose of these questions is to assist us in developing and providing technical assistance on topics that are relevant to you and your organization. Also, our goal is to improve our customer service.

 [Click here to complete the survey](#)

PROPOSED MEDICAID POLICIES OPEN FOR PUBLIC COMMENT

All policies currently open for public comment can be found on the [North Carolina Medicaid Division of Health Benefits](#).





Providers can submit comments to Medicaid.public.comment@dhhs.nc.gov

Proposed Policy	Date Posted	Comment Period Ends
10A, Outpatient Specialized Therapies	11/04/2024	12/19/2024
10B, Independent Practitioners (IP)	11/04/2024	12/19/2024
PA Criteria Lyfgenia	11/04/2024	12/19/2024

MEDICATION MANAGEMENT SERVICES: OPEN ENROLLMENT

Trillium has identified the need for additional Psychiatric Medication Management Services. These services focus on reducing psychiatric and behavioral symptoms to improve functioning in familial, social, educational, or occupational life domains. Providers must be enrolled in NC Tracks and meet all of the requirements in [Clinical Coverage Policy 8C](#).

Qualified practitioners include:

-  Psychiatrist/ MD/ DO
-  Psychiatric Mental Health Nurse Practitioner (PMHNP)
-  Physician Assistant (PA)
-  Nurse Practitioner (NP)

[Questions Link](#)

[Application Link](#)

CONNECTIONS-CARE MANAGEMENT PLATFORM

[Network Communication Bulletin #378](#) notified providers that Trillium Health Resources will no longer offer our Tailored Care Management (TCM) platform to TCM providers.

Trillium's intent is to terminate the TCM provider contracts regarding the use of our care management platform no later than June 30, 2025. Future TCM providers will be required to utilize their own platform for the documentation of service delivery.

The reason for this decision is that Trillium is not funded, nor is it financially sustainable to continue to support external TCM entities in providing access to Trillium's Connection platform.

REQUEST FOR PROPOSAL: TRANSITION MANAGEMENT SERVICES

Trillium has posted a Request For Proposal (RFP) to invite service providers to submit a proposal for the implementation of Transition Management Services (TMS). TMS is provided to individuals participating in the Transition to Community Living (TCL) initiative.

TMS is a rehabilitation service intended to increase and restore an individual's ability to live successfully in the community by maintaining tenancy. TMS focuses on increasing the individual's ability to live as independently as possible, managing the illness, and re-establishing his or her community roles related to the following life domains: emotional, social, safety, housing, medical and health, educational, vocational, and legal. TMS provides structured rehabilitative interventions through a team approach. Providers may submit proposals for one or more of the counties/regions included in the RFP.

The five regions/counties included in the RFP are as follows:

1. Craven
2. Guilford/Randolph
3. Moore/Hoke
4. New Hanover
5. Pitt/Greene/Wilson

For more information, to ask questions, and to apply, please visit the [Current Service Needs](#) page on the Trillium website.

RE-ENTRY SIMULATION

Trillium Health Resources has been sponsoring Re-entry Simulations. You will learn about the many barriers individuals go through when they are released from jail.

Participants experience the difficulties of finding a job, keeping a stable home, going to treatment regularly, and following release rules.

UPCOMING RE-ENTRY SIMULATION EVENT:

 [Pasquotank County, NC – January 29, 2025](#)

TRILLIUM IS A CLOSED NETWORK FOR BH/SUD/IDD

As a reminder, Trillium operates a closed network for all behavioral health, substance use, and intellectual and developmental disabilities services. (*N.C. Gen. Stat. 108D-23*).

At this time, Trillium is not accepting requests to add new providers to the Trillium behavioral health, substance use, and intellectual and developmental disabilities provider network outside of a published recruitment opportunity.

Trillium continually assesses the needs of members and adjusts the network to ensure members have access to needed services. [Current service needs](#) are posted on our website. Non-contracted providers can submit an [Interest Submission Form](#) to express future interest in contracting for behavioral health, substance use, and intellectual/developmental disabilities services.

Trillium will review interest submissions on a monthly basis.

In-network Trillium providers requesting contract changes should email NetworkServicesSupport@TrilliumNC.org or use the applicable forms on our [Provider Documents & Forms](#) webpage.

For more information, providers can review our [Network Participation webpage](#).

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.