

Network Communication Bulletin #438

Transforming Lives. Building Community Well-Being.

To: All Providers

From: Khristine Brewington, MS, LCMHCS, LCAS, CCS, CCJP

Senior VP of Network Management

Date: October 31, 2025

Subject: Fee Schedule Update and Claim Reprocessing Announcement; Request for

Application (RFA) High-Fidelity Wraparound Services; SUD Update, Letter of Support Process for New Waiver Requests, and OTP Waiver Renewals; NC Tracks Quick Links; TCL Housing Process Updates; Update to Provider Permission Matrix for Taxonomy; Provider Accreditation Requirement; Provider Training Needs Assessment Survey; Culturally & Linguistically Competent Care-Training Alerts & Updates; Roadmap 2 Ready: October 2025; Updated 1915(i) Assessment Reminder; Medicaid Rebase Rate Reductions; Tailored Plan/PIHP Provider Manual; Root Cause Analysis (RCA) in Transitions to Community Living (TCL) Housing; Taxonomy Verification; Provider Directory and NCTracks Data; Upcoming Supporting Children Early Simulations November and December; Provider My Learning Campus Reminder; Need to Report Fraud, Waste, and Abuse?

NEW

FEE SCHEDULE UPDATE AND CLAIM REPROCESSING ANNOUNCEMENT

Trillium Health Resources has published an <u>updated fee schedule</u> which reflects the NCDHHS **Medicaid Rate Reductions of 3%, 8%, and 10%** effective October 1, 2025. Please begin using these updated rates immediately.

Starting **November 1, 2025**, claims submitted for dates of service October 1, 2025 forward at rates higher than the reduced Medicaid fee schedules will be **reprocessed** to align with the updated fee schedule.

Please note:

The rate reductions have been applied to each provider's rates in effect as of September 30, 2025.

NCQA

HEALTH PLAN

- ♣ The rate changes also apply to all ILOS services, member-specific rates, and provider-specific rates.
- ▲ Impacted Medicaid reimbursement claims submitted above Trillium's published rates after October 1, 2025 will be reprocessed retroactively. There is no action needed by the provider at this time.
- Updated claims will be reflected in your Remittance Advice once processed.

Additional details regarding the services impacted and the base rate assumptions can be found here: NC Medicaid Rate Reductions.

For questions regarding these rate adjustments, please contact the Rates Team at: RatesFinance@TrilliumNC.org.

REQUEST FOR APPLICATION (RFA) HIGH-FIDELITY WRAPAROUND SERVICES

Trillium Health Resources is expanding High-Fidelity Wraparound (HFW) Services within Trillium's catchment area and is recruiting providers for the following identified counties: Northampton, Hertford, Pamlico, Hyde, Dare, Tyrrell, and Washington.

Trillium is seeking providers that demonstrate the capability and capacity to provide HFW services to achieve desired outcomes; including increased family assets and functioning and reduced out-of-home residential treatment and inpatient hospitalizations.

For more information and application, please visit our <u>Request Opportunities</u> section on the website.

SUD UPDATE, LETTER OF SUPPORT PROCESS FOR NEW WAIVER REQUESTS, AND OTP WAIVER RENEWALS

Trillium Health Resources provides updates on NC Medicaid's Substance Use clinical coverage policies and temporary waiver requests, and information on Opioid Treatment Program (OTP) waiver renewals.

Effective Date:

Clinical coverage policy updates are effective January 1, 2026.

SUD CLINICAL COVERAGE POLICY UPDATES AND TEMPORARY WAIVER REQUESTS

What is happening?

NC Medicaid has announced the following Medicaid and State-funded clinical coverage policies that go into effect January 1, 2026:

- Substance Use Intensive Outpatient Treatment
- Substance Use Comprehensive Outpatient Treatment
- Clinically Managed Residential Withdrawal Management
- Clinically Managed Low Intensity Residential
- Clinically Managed Population Specific High Intensity Residential
- Clinically Managed High Intensity Residential
- Medically Managed Intensive Inpatient Residential

Temporary Waiver Requests:

On October 7, 2025, the Division of Health Service Regulation (DHSR) sent a communication to Substance Use providers Request for Waiver 3200 3400 4100 4400 4500 Substance Use Disorder. This notice informed providers that they could request temporary waivers for the following service array:

- 📤 10A NCAC 27G Section .3200, Social Setting Detoxification for Substance Abuse
- ♣ 10A NCAC 27G Section .3400, Residential Treatment or Rehabilitation for Individuals with Substance Abuse Disorders
- △ 10A NCAC 27G Section .4100, Residential Recovery Programs for Individuals with Substance Abuse Disorders and Their Children
- △ 10A NCAC 27G Section .4400, Substance Abuse Intensive Outpatient Treatment Program
- ▲ 10A NCAC 27G Section .4500, Substance Abuse Comprehensive Outpatient Treatment Program
- 10A NCAC 27G Section .5600, Supervised Living for Individuals of All Disability Groups

What Providers Need to Do

For each service requiring a temporary waiver, providers must email Trillium Health Resources at NetworkServicesSupport@TrilliumNC.org with:

- Request(s) for Letters of Support for each service
- A signed Waiver of Licensure Rule Request for each service that needs a Letter of Support
- Trillium will process the request and issue a Letter of Support to the provider.
- Providers must then send both the Letter of Support from Trillium and the signed Waiver Service Request(s) to the DHSR Mental Health Licensure and Certification Section, attention Michael Blake, Administrative Supervisor, via email at michael.j.blake@dhhs.nc.gov
- A Providers can attend the NC Medicaid Behavioral Health Stakeholder Virtual Office Hours for more information.

OPIOID TREATMENT PROGRAM (OTP) WAIVER RENEWALS

What is happening?

On October 13, 2025, DHSR sent a communication to Substance Use Providers <u>OTP</u> <u>Waiver 2026</u>. This communication informed providers of temporary exemptions from the unsupervised take-home medication requirements.

The Substance Abuse and Mental Health Services Administration (SAMHSA) has granted a temporary exemption from the unsupervised take-home medication requirements of 42 C.F.R. § 8.12(i). These exemptions allow:

- △ Dispense up to seven unsupervised take-home doses of methadone for a patient in treatment 0–14 days
- Up to 14 unsupervised take-home doses for a patient in treatment days 15–30; and
- ♣ Up to 28 unsupervised take-home doses of methadone may be provided to the patient from 31 days in treatment, if the Opioid Treatment Program (OTP) believes the patient can safely handle the amount of take-home medication, with applicable conditions.

What Providers Need to Do

- Providers need to send OTP Renewal Requests for Letters of Support with their Attestation to NetworkServicesSupport@TrilliumNC.org.
- Trillium will process the request and issue a Letter of Support to the provider
- A Providers must send signed waivers to DHSR's Mental Health Licensure and Certification Section. Please refer to the DHSR Provider Alert for OTP providers on October 13, 2025.

Who to Contact with Questions?

- Contact your assigned Provider Relations Coordinator or email NetworkServicesSupport@TrilliumNC.org
- Call the Provider Support Service Line at 1-855-250-1539

NCTRACKS QUICK LINKS

- Medicaid Bulletin Update: NC Medicaid Rate Reductions
- New Peer Respite Mental Health Center Opens in Henderson County
- NCDHHS Seeks Feedback on Olmstead Plan
- NCDHHS Marks One Year of Progress Toward an Age-Inclusive Future with "All Ages, All Stages NC"
- Registration is Now Open for the Opioid and Prescription Drug Abuse Advisory Committee (OPDAAC) Meeting
- DMH/DD/SUS Director Kelly Crosbie to Speak at GreenTree's Grand Reopening
- Side by Side with DMH/DD/SUS Strengthening North Carolina's MH,SU,IDD & TBI Workforce Innovations in Recruitment, Training, and Traumatic Brain Injury (TBI)
- A North Carolina's Peer Support Program Community Resilience Through Crisis

REMINDERS

TCL HOUSING PROCESS UPDATES

Due to the absence of State budget for SFY 2025–26 from the NC General Assembly, the TCL Program is operating under SFY 2024 funding levels. There is a funding shortfall that will impact TCL housing subsidies through the end of the current state fiscal year.

To address this situation, we are implementing an interim TCL housing mitigation plan effective October 15, 2025, which includes:

- Continuing housing efforts for individuals already in the setup/pre-leasing/leasing phases.
- A Pausing new entries into the TCL housing pipeline for most populations, with the exception of individuals being discharged from State Psychiatric Hospitals, who will be reviewed on a case-by-case basis
- Restricting waivers for units above 120% Fair Market Rate or for more units with more than one bedroom unless medically necessary
- Exempting placements through federal voucher programs and the Targeting/Key program (through December 31, 2025) from these restrictions

NCDHHS remains fully committed to ensuring that individuals currently in TCL housing are able to stay housed and provide TCL housing to the maximum number of people that the current budget can support. If a new state budget including additional TCL funding is enacted, NCDHHS will reassess the TCL housing mitigation process and communicate any updates regarding expanded support and flexibility.

WHAT DOES THIS MEAN FOR PROVIDERS SUPPORTING TCL MEMBERS?

- Providers who are currently contracted to make Emergency Housing Funds (EHF) transactions must follow the new process to request the use of this fund. To request the use of EHF <u>Trillium-Emergency Housing Funds Request Form</u>
- As a reminder of the email Finance sent out regarding EHF, we ask you to please submit any outstanding invoices no later than October 31st. Failure to submit documentation within this time frame could result in slower processing times or risk of non-reimbursement for expenditures.
- A Providers shall accurately complete and submit the Emergency Housing Funds Form, for the prior month's expenditures by the 10th of each month to Trillium

Health Resources, Attention: TCL Accounts Payable RemittanceNoReply@TrilliumNC.org or mail to: 144 Community College Road, Ahoskie, NC. 27910. Provider shall submit copies of all receipts signed by the Tenancy Component Service (ACTT, CST, and/or TMS) designated staff member and the individual served. Failure to submit documentation within this time frame could result in slower processing times or risk of non-reimbursement for expenditures.

- A Providers should not assist members to apply for housing units that will be subsidized by the TCL Voucher (TCLV).
- Providers can, however, assist members with applying for Section 8, Rural Development, VASH, etc. If you are unsure which subsidy vouchers are appropriate submit the question via <a href="https://example.com/however/howeve
- Transition Coordinators and Housing Development Coordinators will be assisting members to apply for Targeted properties
- We are requesting providers increase intensity of member engagement for those currently in TCL housing to support housing stabilization.
- We require providers to complete if you identify any issues that may impact the individual's housing. <u>Provider Reporting Tracker</u>
 - ▲ BH/SU Crisis
 - ▲ Change in Medical Status
 - ▲ Changes to Service(s)
 - Criminal activity
 - ▲ Death
 - ▲ Eviction/Notice to Vacate
 - ▲ Financial Need
 - ▲ Hospitalization
 - ▲ Lease Violation
 - ▲ Tenancy Concern
 - ▲ Walk Throughs-member is not allowing provider to enter the unit and/or conduct a walkthrough of the unit

- ▲ Other-concerns that may impact the members tenancy that do not fall under the above listed categories
- Providers should not discuss or initiate initial housing or rehousing options with members. If there is a need to house or rehouse the member the provider should notify the assigned TCC. All housing efforts must be approved by Trillium.
- Any lease signings that occur without approval from Trillium may result in the member being responsible for 100% of the expenses incurred. (This includes but is not limited to, security deposits, portion of the rent, movers, etc.)
- Providers should not discuss the option of Bridge (hotel) placement with members. The provider should seek other temporary housing options for the member. If there are no other temporary housing options, the provider will contact the assigned TCC. Trillium must review all requests for bridge due to funding limitations and approval is not guaranteed.

UPDATE TO PROVIDER PERMISSION MATRIX FOR TAXONOMY

N.C.Gen.Stat. § 108C-3(g)(6) identifies "prospective (newly enrolling) agencies providing nonbehavioral health home- or community-based services pursuant to waivers authorized by the federal Centers for Medicare and Medicaid Services under 42 U.S.C. § 1396n(c)" as high categorical risk, and revalidating agencies as moderate categorical risk, requiring a federal site visit and/or fingerprinting as appropriate.

Additionally, the credential requirement for taxonomy 261QA0600X, Adult Day Care, is changing to require an Adult Day Care/Day Health Center Certificate from the NC Division of Aging instead of national accreditation. Providers selecting taxonomy 261QA0600X, Adult Day Care are no longer required to be nationally accredited.

As a result, the NCTracks Provider Permission Matrix (PPM) has been updated to reflect these changes. The PPM for taxonomy 261QA0600X Adult Day Care became effective Oct. 6, 2025, and displays:

- Risk Level (RISK-LEVEL-IND): HIGH
- Federal Site Visit Required (FEDERAL-SITE-VISIT-RQRD): YES
- Fingerprinting Required (FINGERPRINTING-REQUIRED): YES
- Certification Required (CERTIFICATION-RQRD): YES

- Certification Type (CERTIFICATION-TYPE):ADULT DAY CARE/DAY HEALTH CENTER
- Certifying Entity (CERTIFICATION AGENCY): NC DIVISION OF AGING
- Accreditation Required (ACCREDITATION-RQRD): NO
- Accreditation Type (ACCREDITATION TYPE): BLANK

This change applies to all providers classified under HEALTH-PLAN: Medicaid.

Providers currently enrolled with taxonomy 261QA0600X, Adult Day Care will be evaluated for the additional screening requirements and may receive notification to complete the additional screenings as applicable. For site visit, the notification would originate from Public Consulting Group (PCG). For fingerprinting, the notification will originate from CSRA and be sent to the provider's NCTracks Provider Message Inbox. Providers are encouraged to regularly monitor their NCTracks Provider Message Inbox for important notifications regarding their NCDHHS program participation.

PROVIDER ACCREDITATION REQUIREMENT

Providers are required to achieve and maintain national accreditation through one of the designated accrediting agencies, as specified in certain NC Medicaid Clinical Coverage Policies and State-funded Service Definitions. Compliance with these accreditation requirements is a contractual obligation. Trillium conducts routine audits to verify that providers required to hold accreditation are meeting and maintaining this standard. Failure to achieve or maintain accreditation may result in corrective action, suspension of referrals, recoupment of payments, termination of the provider's contract or other enforcement actions deemed appropriate.

Providers are responsible for reviewing the "Provider Qualifications" section of the Clinical Coverage Policy or State-funded Service Definition to determine accreditation requirements.

Accreditation requirements are outlined in <u>NC Medicaid Clinical Coverage Policies</u> and <u>State-funded Service Definitions</u>. Contact the Network Team with any questions by emailing <u>NetworkMonitoring@TrilliumNC.org</u>

Providers are encourage to visit NCTRACKS website: **User Guides and Fact Sheet** and search for: *How to Add or Update Accreditation on the Provider Profile* in <u>NCTracks</u> for more information. CSRA Call Center: 1-800-688-6696; or email <u>NCTracks staff</u>.

PROVIDER TRAINING NEEDS ASSESSMENT SURVEY



The Trillium Annual Provider Training Needs Assessment Survey gathers input to develop relevant, accessible training that provider performance, clinical strengthens quality, compliance. Your feedback helps tailor learning resources to support excellence in care delivery and readiness for Tailored Plan implementation. The Needs Assessment Survey opened Monday, October 13, 2025.

CULTURALLY & LINGUISTICALLY COMPETENT CARE— TRAINING ALERTS & UPDATES

Trillium is committed to equitable, person-centered care. Review the latest cultural competency training opportunities and recently updated, NC DHHS-approved trainings.

View current trainings and updates here.

ROADMAP 2 READY: OCTOBER 2025

Each month we will cover a topic that is a part of the Centers for Medicare & Services Medicaid Preparedness Rule. In September we covered resources about how calculate the supplies you may need in case of an emergency. Interested to see what is covered? Click here.



Major earthquakes are unusual in North Carolina, but they can happen. In August 2020, a 5.1 magnitude earthquake was centered near Sparta, NC and caused significant damage. Many people in North Carolina felt the 5.8 magnitude quake centered near Louisa, Virginia in August 2011.

This year's International ShakeOut Day is October 16, when millions of people worldwide will participate in earthquake drills at work, school, or home! At 10:16 a.m. (local time) on 10/16, you can join millions of people across the world practicing earthquake safety.

Your ShakeOut Drill can meet the training and plan testing requirements of the CMS Rule:

- ▲ Training: Conduct and document initial and annual training on your emergency preparedness policies and procedures to all staff, participants, volunteers, and contractors;
- Exercises: Must conduct and document two exercises annually:
- One must be a community-based CMS Defined Full-Scale Exercise;
- The other exercise can be a second Full-Scale or Tabletop Exercise.

For more information on how to register and host the drill at your facility or place of business please visit: <u>How to Participate</u> webpage.

UPDATED 1915(I) ASSESSMENT REMINDER

Please be reminded that as of October 1, 2025, the updated 1915(i) assessment must be utilized for all new and reassessment eligibility reviews. Please share with your providers.

The <u>NC Medicaid 1915(i) Assessment</u> form, available on NC Medicaid's website, identifies a beneficiary's needed services and supports and informs the independent evaluation of 1915(i) eligibility determination and development of the Care Plan or Individual Support Plan.

The updated form includes new fields for the "Date Individual Requested 1915(i) Service" and the "Date 1915(i) Assessment Completed." Effective October 1, 2025, the revised NC Medicaid 1915(i) Assessment must be completed for a beneficiary requesting a 1915(i) service and for eligibility reassessments. Previous versions of the NC Medicaid 1915(i) Assessment published prior to August 1, 2025, will not be processed and returned marked as "unable to process."

MEDICAID REBASE RATE REDUCTIONS

The North Carolina Division of Health Benefits (DHB) provided official notification to Trillium Health Resources regarding changes to NC Medicaid fee schedule rates effective October 1, 2025. Trillium will be implementing the Medicaid rate cuts as directed by NC Medicaid on November 1, 2025; however, the implementation will be retroactive to the NC Medicaid effective date of October 1, 2025.

Any claims submitted for dates of services in October of 2025 but paid at the previous rates will be recouped and paid at the October 1, 2025, Medicaid rates. Rate decreases will be applicable to all Medicaid rates per NC Medicaid guidance including client-specific and other enhanced rates.

Trillium is still in the process of determining the impact to In Lieu of Service rates based on an assessment of cost effectiveness.

Please <u>click here</u> for additional information related to the reduction amounts by service category, Trillium understands the challenges this creates for our provider community, and we will continue to advocate to reverse this decision. We will strive to make this process as seamless as possible for providers. Any questions related to this communication can be submitted using this link: <u>Provider Questions-Rate Reductions</u>.

Thank you for all that you do to support Trillium members!

TAILORED PLAN/PIHP PROVIDER MANUAL

Trillium Health Resources has updated the Tailored Plan/PIHP Provider Manual. A redline version has been posted on our website under "Provider Documents & Forms" for your review. Click here to view the manual.

ROOT CAUSE ANALYSIS (RCA) IN TRANSITIONS TO COMMUNITY LIVING (TCL) HOUSING

As part of Trillium's commitment to the Olmstead Settlement Agreement, a top priority is ensuring that members with disabilities are fully integrated into their communities and supported in maintaining permanent housing. To achieve this goal, Trillium has established a policy to carefully review housing separations for TCL members when they occur due to significant negative events.

This review takes place through the Root Cause Analysis (RCA) process, which helps identify underlying issues, develop action plans, and implement strategies to prevent future disruptions in housing stability. The RCA process ensures that each separation is fully examined, keeping members' long-term stability at the center of care.

EVENTS THAT TRIGGER AN RCA

For TCL members, an RCA is conducted when any of the following occur:

Housing separation due to member death

- A Housing separation due to Level 3 incident
- Loss of housing resulting in homelessness
- Return to or new admission to an Adult Care Home (ACH)

THE RCA PROCESS

- Initiation: When a significant negative event occurs, Trillium TCL staff complete an internal report and notify Trillium's Quality Management (QM) Department, initiating the RCA process.
- Review: For events involving death or Level 3 incidents, QM retrieves and reviews the IRIS report. For homelessness or admission to an ACH, QM will email the provider and request completion of the Provider Event Reporting Form within 3 business days. (These events typically do not require IRIS reports.)
- Provider Role: Provider feedback through either the IRIS report or Provider Event Reporting Form is critical. It gives valuable perspective on the circumstances surrounding the housing separation and helps inform Trillium's review.

By working together in this structured process, we can reduce the likelihood of housing disruptions and strengthen long-term community integration for TCL members.

For questions about the RCA process, please contact RCA@TrilliumNC.org .

TAXONOMY VERIFICATION

We would like to bring your attention to several updates regarding the Provider Permission Matrix. Please note that Taxonomy Code 261QR0401X has been removed from the Provider Permission Matrix, and Taxonomy Code 261QM0850X is only a Statefunded allowable code. Medicaid has been removed.

It is the responsibility of the Provider to ensure an Active Allowable Taxonomy is in NC Tracks under the Provider NPI(s) Service Site Location(s).

NC Tracks posts updated Taxonomy Code Changes in the Provider Permission Matrix. Please ensure to review this periodically to ensure there will be no claims payment interruptions.

The Provider Permission Matrix, as well as a Provider Permission Matrix Instructions job aid are available on the <u>NCTracks Provider Enrollment</u> webpage.

PROVIDER DIRECTORY AND NCTRACKS DATA

Trillium encourages all provider agencies to regularly review and update their provider information in NCTracks. The data in NCTracks is used to populate Trillium's Provider Directory, which is a vital resource for members, families, and stakeholders.

Thank you for your continued commitment to maintaining accurate and up-to-date information on the Directory. For any questions related to Trillium's Provider Directory, please contact <u>TrilliumProviderDirectory@TrilliumNC.org</u>.

UPCOMING TRILLIUM REENTRY AND SUPPORTING CHILDREN EARLY SIMULATIONS NOVEMBER AND DECEMBER!

Supporting Children Early Simulation opportunities being offered from September through December!

These events are free and open for anyone to attend. Please share the information with your contacts!

RE-ENTRY SIMULATIONS:

Dare County—November 5, 2025

SUPPORTING CHILDREN EARLY SIMULATIONS:

- Sampson County—November 13, 2025
- Edgecombe County—December 4, 2025

PROVIDER MY LEARNING CAMPUS REMINDER

To find updated and current Provider Trainings, please visit:

Provider My Learning Campus or this list of provider trainings.

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.