Trillium HEALTH RESOURCES
Transforming Lives. Building Community Well-Being.

Network Communication Bulletin #439

To: All Providers

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Date: November 7, 2025

Subject: Mobile Crisis is Live!; Roadmap 2 Ready: November 2025; NC Tracks Quick Links; 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; TCL Housing Process Updates; Update to Provider Permission Matrix for Taxonomy; Provider Accreditation Requirement; Culturally & Linguistically Competent Care-Training Alerts & Updates; Medicaid Rebase Rate Reductions; Upcoming Supporting Children Early Simulations November and December; Provider My Learning Campus Reminder; Need to Report Fraud, Waste, and Abuse?

NEW

MOBILE CRISIS IS LIVE!

Trillium in partnership with Integrated Family Services, Daymark, and Southeastern Integrated Care has expanded State funded, Medicaid Tailored Plan, and Medicaid Direct Mobile Crisis Management (MCM) services into Robeson, Scotland, Hoke, Lee, Moore, Anson, Richmond, Montgomery, Randolph and Guilford counties.

Mobile Crisis Management involves all support, services and treatments necessary to provide integrated crisis response, crisis stabilization interventions, and crisis prevention activities. MCM services are available at all times, 24-hours-a-day, 7-days-a-week, 365-days-a-year.

Crisis response provides an immediate evaluation, triage and access to acute mental health, intellectual/developmental disabilities, or substance abuse services, treatment, and supports to effect symptom reduction, harm reduction, or to safely transition persons in acute crises to appropriate crisis stabilization and detoxification supports or services. These services include immediate telephonic or telehealth response to assess the crisis and determine the risk, mental status, medical stability, and appropriate response.

ROADMAP 2 READY: NOVEMBER 2025

Each month we will cover a topic that is a part of the Centers for Medicare & Medicaid Services Emergency Preparedness Rule. In October we covered resources about International ShakeOut Day. Interested to see what we covered, click here?

According to 911.gov- Most counties have a 911 addressing coordinator who is responsible for updating information regarding address changes, resolving address issues, and updating a business's contact information. If contact information for the 911 addressing coordinator cannot be found on your county's website, you may contact the **non-emergency number**. This is important to assist 911 know who to contact in emergencies after hours, know approximately how many people could be on site, if there are any mobility issues etc. This information helps first responders know who and how they can better respond in any emergency you may have.

Please be sure that you contact the non-emergency number for your county unless there is a true emergency. In your preferred search engine, search the key words "emergency communications center non-emergency number" and include the names of the city or town, state, and county in your search. One of the first few search results will generally be the correct one.

Did you know some counties can receive text 911? Interested in learning more about 911?

- Check out the FAQ

NCTRACKS QUICK LINKS

- Ensuring Person-Centered Care for Children with Autism Spectrum Disorder in the NC Medicaid Program
- NCDHHS and First Lady Anna Stein Unveil FACT Teams to Improve Outcomes for People Whose Mental Illness Bring Frequent Interactions with Criminal Justice System
- Now Available! North Carolina Justice Reentry & Recovery Pocket Guides
- Reminders About Required Provider Disclosures

REMINDERS

FEE SCHEDULE UPDATE AND CLAIM REPROCESSING ANNOUNCEMENT

Trillium Health Resources has published an updated fee schedule 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.
- 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 Request Opportunities 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
- 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 OTP Waiver 2026. 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
- 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.

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.
- 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 Trillium-Emergency Housing Funds Request Form
- 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.
- 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.
- 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 Housing.Navigators@TrilliumNC.org.
- 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. Provider Reporting Tracker.
  - 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 NC Medicaid Clinical Coverage Policies and State-funded Service Definitions. Contact the Network Team with any questions by emailing NetworkMonitoring@TrilliumNC.org

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 NCTracks for more information. CSRA Call Center: 1-800-688-6696; or email NCTracks staff.

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.

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 click here 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: Provider Questions-Rate Reductions.

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

UPCOMING SUPPORTING CHILDREN EARLY SIMULATIONS NOVEMBER AND DECEMBER!

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

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

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.