



JOINT COMMUNICATION BULLETIN 226 - PROCESS FOR ADDING SERVICE LOCATIONS

ATTENTION PROVIDERS

Trillium has received communication from the Department of Health and Human Services, regarding the process for adding service locations and the organizational impact it may have on our providers.

It is important to note that any change(s) to service location or information related to the service location can trigger an onsite review by Public Consulting Group (PCG), the contracted vendor for the Division of Medical Assistance. The cost of the review is paid for by the provider. Please note that Trillium has no control over this process as it is a DMA vendor.

As a valued partner, Trillium is committed to working with our providers and keeping them informed of critical occurrences like this. We continue to work hard in evaluating and implementing processes that minimize impact to our providers.

Should you have additional questions or concerns, please contact your Network Liaison.

- [VIEW JCB 226](#)

ATTENTION PROVIDERS SUBMITTING 837 INSTITUTIONAL FILES - 837 INSTITUTIONAL CLAIMS REJECTIONS

Trillium has corrected the issue where providers were receiving rejected claims when submitting 837 Institutional files for reason "Present on admission indicator is required for this diagnosis". Any claim that has been rejected will need to be resubmitted to Trillium for reprocessing.

If you have any questions, please contact your Claims Specialist.

- [VIEW CLAIMS SPECIALIST CASELOAD](#)



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