



PROVIDER DIRECT CHANGE IN DEFAULT END DATE

ATTENTION: Trillium will be implementing a change in the Provider Direct system which will allow the end date of the Adult State Benefit Plans to default to a 12/31/2099 date. The projected implementation date of this change is April 6, 2017.

This change will apply to any new Adult State Benefit Plans that are entered in the Provider Direct system for both New Enrollments and Client Updates. Upon implementation, the end date will automatically populate to the 12/31/2099 end date rather than the current ten (10) year end date.

For additional information or questions, please contact the Trillium Eligibility and Enrollment Unit.

ATTENTION INNOVATION WAIVER SERVICE PROVIDERS - SIGNATURE OF SERVICE PROVIDERS IS REQUIRED

ATTENTION INNOVATION WAIVER SERVICE PROVIDERS:

As outlined in [Network NewsBreak #66](#) and [Clinical Coverage Policy 8P](#) (page 10), signatures of service providers are required on the Individual Support Plan (ISP) / Revision.

Once the individual / legally responsible person signs the ISP / Revision, an appropriate representative from each of the provider agencies identified on the plan must also sign the ISP / Revision. In an effort to avoid possible disruption to the services an individual receives, it is imperative that signatures are obtained in a timely manner.

The IDD Care Coordinator will supply the provider agency with a draft copy of the ISP / Revision, along with a PDF signature page. Please note that signatures may be electronic or handwritten using this PDF signature page. If the signature is completed electronically, instructions will display automatically on how the provider agency can set up and maintain a Digital ID.

If the ISP / Revision is signed / date stamped electronically, it is permissible to type in the date that the document is electronically signed. The provider agency may also print out the PDF signature page and affix a handwritten signature. If the ISP / Revision is signed manually, it is required that the date is handwritten as well.

For further details surrounding signatures, please refer to [Network NewsBreak #66](#), [Clinical Coverage Policy 8P](#) (11/1/16), and the [Records Management and Documentation Manual](#) (APSM 45-2) effective 12/1/16.

UPCOMING RFP POSTINGS - APRIL 3, 2017

The following Request for Proposals (RFPs) will be available for review on our website beginning Monday, April 3, 2017.

- Child and Adolescent Day Treatment
- Substance Abuse Comprehensive Outpatient Treatment
- Substance Abuse Intensive Outpatient Program

Visit our [RFP/RFA/ RFI Opportunities](#) web page on Monday for more information.

Important Reminders for Providers

ALL QIPs DUE ON OR BEFORE JULY 31

Quality Improvement Projects (QIPs) are due on or before 7/31/17. Any fully contracted provider agency with a state contract is required to submit three QIPs for fiscal year 2016-2017. A recommended template and scoring tool can be found on the Trillium website (For Providers - Provider documents).

Please submit QIPs to Qminfo@TrilliumNC.org

QUALITY IMPROVEMENT PROJECT PEER REVIEW OPPORTUNITY

Trillium's Global Quality Improvement Committee offers the option for providers to request a review of their Quality Improvement Projects (QIPs) through a blinded peer review. As part of the review process, the committee will provide feedback regarding how the provider may more fully meet the expectations outlined by Trillium and improve their scores with the next submission. Prior to the committee receiving the QIP for review, Trillium will remove all identifying provider information to ensure the committee does not know who the provider is and to enable the committee to review the QIP impartially.

Any providers wishing to participate in the blind peer review, please contact Krissy Vestal at krissy.vestal@TrilliumNC.org. All QIPs will need to be submitted by 3/31 to be included in the blind peer review.

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