

## May Provider Forum





# Please Engage With Us



Engaging with our Subject Matter Experts. Options to ask questions: 1) raise your hand and we will call on you, 2) unmute and ask your question, and 3) add your question within the Q&A Bubble.



Questions that require more research, we will review them and provide the answer in the Frequently Asked Questions document (FAQ) posted on our website.

Accessibility features – Closed Captions







The use of artificial intelligence (AI) features including, but not limited to, programs, and/or apps to assist with transcription and/or recording during any Trillium WebEx Meeting is not permitted. This meeting includes the following features:



Recording



Transcript/highlights



## Accessing the Q&A feature in WebEx.



#### **May Provider Forum Agenda**



Where to Submit Questions/IT Tickets

02 Healthy Opportunities Pilot

O6 Provider Direct Walkthrough

O3 Provider Staff Education Evidence

- 67 Enrollment and Eligibility
- Locating a Provider Relations & Engagement Coordinator Assignment Listing

## May Provider Forum Agenda

08 Housing

Member Progress Notes

O9 Eastpointe and Sandhills Legacy Systems
Wind-down

Essential Information for Physical Health Providers

Fall 2024 Provider Survey

Resources, Questions & Answers

May 2025 Summer Provider Survey

Welcome and Overview of Trillium and the Tailored Plan

Chauncey Dameron, MBA

Provider Relations and Engagement Manager

#### **About Trillium Health Resources**



- Trillium Health Resources is a Tailored Plan and Managed Care Organization (MCO) that manages serious mental health, substance use, traumatic brain injury, and intellectual/developmental disability services in North Carolina.
- For individuals receiving Medicaid through the Tailored Plan, we cover physical health care and pharmacy services as well.
- We also help uninsured individuals through statefunded services.

## **Regional Information**



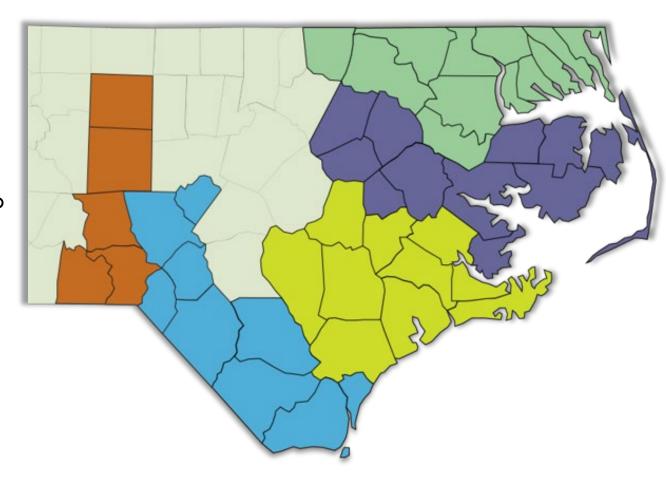
46 Counties

Land mass: 28,977 sq mi

Percentage of land mass in NC: 59.61%

Total Population: 3,152,058

Percentage of NC pop: 30%



#### Network



- Physical health providers: 54,105
- Behavioral health providers: 14,103
- Vision providers: 452
- Pharmacy and medical supplies: 2,788
- Counties covered by providers: 100



# Tailored Plan Partnerships



#### **Trillium's Tailored Plan Partners**

#### **Carolina Complete Health (CCH):**

Trillium's Standard Plan Partner; responsible for our Physical Health Network including Primary Care, Specialty Care, Durable Medical Equipment (DME), Vision, Long-Term Services and Supports (LTSS) Non-Emergency Medical Transportation (NEMT), and Non-Emergency Ambulance Transportation (NEAT).

#### **Centene Vision Services:**

Trillium's Vision partner (formerly Envolve), through our agreement with CCH; responsible for our Optometry Network.

#### **PerformRx:**

Trillium's Pharmacy Benefit Manager partner; responsible for our Pharmacy Network.

#### **Modivcare:**

Trillium's NEMT partner, through our agreement with CCH; responsible for our NEMT Network.

#### **NC Department of Health and Human Services:**

Trillium's oversight entity; responsible for managing the delivery of health and human-related services for all North Carolinians.

2

#### **Healthy Opportunities Pilot**

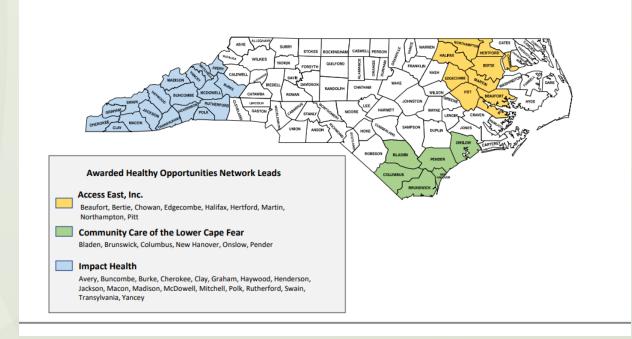
Maegan Veillette

Associate VP of of Member Solutions/HOP



### Healthy Opportunities Pilot Overview

- Comprehensive program to test and evaluate the impact of providing select evidence-based, non-medical interventions related to housing, food, transportation and interpersonal safety and toxic stress to highneds Medicaid enrollees.
- Trillium launched HOP in 15 counties on May 15, 2024.
- Members qualify by:
  - Living in a pilot county
  - Have at least one qualifying physical or behavioral health condition (TCM Eligible)
  - One qualifying social risk factor.



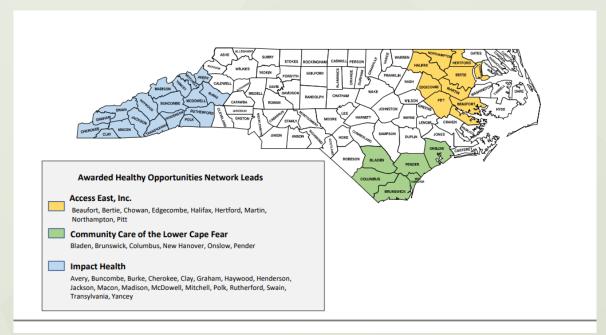
Access East: Beaufort, Bertie, Chowan, Edgecombe, Halifax, Hertford, Martin, Northampton, Pitt

CCLCF: Bladen, Brunswick, Columbus, New Hanover, Onslow, Pender



## Healthy Opportunities Pilot Key Stakeholders

- Key players in the Pilot include Network Leads (NLs) AND Human Service Organizations (HSOs):
  - Trillium is working with Access East, Inc. and Community Care of the Lower Cape Fear as our NLs. Their primary role is overseeing a network of Human Service Organizations (HSOs).
  - Human Service Organization are the entities that provide pilot services to members.
- UniteUs/NCCARE360 is the first statewide coordinated care network to electronically connect those with identified needs to community resources and allow for a closed loop referral.







## **Pilot Services**



#### Housing

- Housing navigation, support and sustaining services
- Housing quality and safety inspections and improvements
- One-time payment for security deposit and first month's rent
- Short-term post hospitalization housing



#### Food

- Linkages to community-based food resources (e.g., SNAP/WIC application support)
- Nutrition and cooking education
- Fruit and vegetable prescriptions and healthy food boxes/meals
- Medically tailored meal delivery



#### **Transportation**

- Linkages to existing transportation resources
- Payment for transportation to support access to pilot services, (e.g., bus passes, taxi vouchers, ridesharing credits)



## Interpersonal Violence (IPV)

- Case management/ advocacy for victims of violence
- Evidence-based parenting support programs
- Evidence-based home visiting services

29 Pilot Services!

To read more about the Pilot Services:

https://www.ncdhhs.gov/healthy-opportunities-pilot-fee-schedule-and-service-definitions/open



## Trillium HOP Data (as of 4/22/2025)

3,000+ Members enrolled in HOP

7,000+ Authorized HOP Services

Most used Services include:

Housing Navigation

Food Box Services

Essential Utility Set up





# Qualifying for HOP & No Wrong Door Referrals

- Trillium members must reside in a Pilot county:
  - Access East: Beaufort, Bertie, Chowan, Edgecombe, Halifax, Hertford, Martin, Northampton, Pitt
  - CCLCF: Bladen, Brunswick, Columbus, New Hanover, Onslow, Pender
- Trillium member must be experiencing insecurities in one or more of the following areas:
  - Food, Transportation, Housing or Toxic Stress
- Trillium member must have at least one qualifying physical or behavioral health condition (TCM Eligible).

- Trillium members can be referred to the Pilot via several avenues:
  - Pilot or Non-Pilot participating HSOs
  - Tailored Care Managers
    - Tailored Care Manager (contracted for HOP) may complete HOP enrollments and refer directly to HOP services once an authorization has been approved.
    - TCMs not contracted for HOP can refer via below form:
      - https://app.smartsheet.com/b/form/dce2e e389a7543b7b6dae0e40c58a788
  - Members can self-referral by calling the Member & Recipient Line \*Member will be redirected back to their TCM if applicable.



## **Helpful HOP Links**

#### **TCM/HOP List:**

- https://www.trilliumhealthresources.org/sites/default/files/docs/TCM-For-Providers/Trillium-TCM-Providers-List.pdf
- https://www.trilliumhealthresources.org/health-related-resources-needs#HOP
- https://accesseast.org/
- https://carelcf.org/
- https://www.ncdhhs.gov/about/department-initiatives/healthy-opportunities
- https://www.ncdhhs.gov/healthy-opportunities-pilot-fee-schedule-andservice-definitions/open



## Please reach out to HOPTCMSupport@TrilliumNC.org with Questions

3

#### **Provider Staff Education Evidence**

Julie Kokocha, M.Ed., BS, AHFI

Associate VP of Network Accountability • Network Management Leadership

## **Recent Monitoring Trend**



- Trillium's Network Auditing Team conducts monitoring reviews to ensure that services provided to members meet rules and regulations.
- Recent monitoring reviews have identified a trend in the provider's submission of staff education documents that are insufficient evidence of education.

- An increase in receipt of education evidence that cannot be validated indicating staff are not qualified to provide a service.
- Providers should be aware that they may receive education verification from a "Diploma Mill".

## **Definition of Diploma Mill**



The Higher Education Opportunity Act of 2008 defines a "diploma mill" as an entity that:

- offers degrees, diplomas, or certificates for a fee
- requires little or no education or coursework to obtain them
- lacks accreditation by a recognized accrediting agency

Offer for a Fee: Diploma mills sell degrees or diplomas for a price.

Little or No Coursework: Don't require significant education or academic work to obtain the credential.

Lack of Accreditation: Aren't recognized by accredited agencies that ensure quality in higher education.

**Purpose:** These credentials are often used to represent that the individual has completed a program of education, even if they haven't.

## **Trillium & Provider Responsibility**



- Verify the education (high school, GED and college diploma) of staff delivering services as required in Clinical Coverage Policy, Service Definition and General Statue.
- Validate evidence of education to ensure authenticity per rules and regulations.
- Reject certain evidence of education when there is sufficient reason to doubt the legitimacy or authenticity of the information and evidence presented.
- When a diploma is not awarded by an accredited body, or the accrediting body is not widely recognized, Trillium and providers may choose to investigate further or may choose to find that the diploma is insufficient evidence of education.

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### **Additional Resources**



#### LME-MCO Communication Bulletin #J319

Date: March 06, 2019

To: Local Management Entities/Managed Care Organizations (LME-MCOs)

From: Deb Goda, Behavioral Health Unit Manager, NC Medicaid, Lisa Haire, Assistant Director,

Quality Management and Operations, DMH/DD/SAS

Subject: Verification of Education

https://www.ncdhhs.gov/documents/files/joint-communication-bulletin-j319-verification-education

#### Trillium Support:

Questions concerning staff/applicant education you can outreach the auditing team at <a href="NetworkMonitoring@TrilliumNC.org">NetworkMonitoring@TrilliumNC.org</a> Please indicate "Provider Staff Education Question" in the subject line.

4

## Locating a Provider Relations & Engagement Coordinator Assignment Listing

Chauncey Dameron, MBA

Provider Relations and Engagement Manager

## Provider Relations and Engagement Coordinators



- All Behavioral Health contracted providers are assigned a Provider Relations and Engagement Coordinator.
- Provider Relations Coordinators are here to support your agency by providing technical assistance, sharing helpful resources, and connecting you with appropriate internal departments for inquires you may have.
- To locate your assigned Provider Relations Coordinator, please visit the Trillium website at

https://www.trilliumhealthresources.org/sites/default/files/docs/Provider-Contact-Info/Trillium-Provider-Relations-Asssigment-Listining.pdf

5

#### **Submitting Provider Questions**

Kimberly Wagner, MBA

Provider Relations and Engagement Manager

## Sending an Email





Emails sent to these addresses, are reviewed by different departments. Some convert to trackable ticket; others are treated as emails.



Those that are tickets are assigned a specific identifier used within Trillium to research and make updates to your inquiry. Follow your inquiry with your assigned ticket number.

NetworkServicesSupport@TrilliumNC.org - ProvNet001234

PDSupport@TrilliumNC.org - ITSD000123

ClaimsSupport@TrilliumNC.org - Claims012345

Contracts.Procurement@TrilliumNC.org - Contracts12345

UM@TrilliumNC.org

RatesFinance@TrilliumNC.org



What types of questions go to which email?

## **Know Before You Email**



#### **Network Services Support**

Request changes: address, key personnel, etc. require a Provider Change Form

Add sites or services to your contract

Special Rate Requests or Enhanced Rate Requests for the entire agency (not a single member)

Individual Placement and Support, Supported Employment, Value-Based Purchasing

#### **Claims Support**

Claim status / denial explanation

Issues submitting claims

Questions related to RA or a credit memo

Claims not paid or paid at correct rate





#### **Provider Direct Support**

Technical issues within Provider Direct

Cannot complete a member search

Cannot complete a claim search

System administration set up or assistance

#### **Contracts**

Non-contracted Single Case Agreements

Memorandum of Agreement (MOA)

Obtain a printed copy of your contract

Hospital contract questions

# Some Department Emails are Monitored Separately



#### **Rates and Finance**

What is the rate for \_\_\_\_\_ service?

Why are my claims not paying at the correct rate?

What is the status of my Special Rate Request?

Questions regarding rate increases for the agency?

#### **Utilization Management**

How to submit a TAR (or other technical assistance) Requesting an update on TAR status

Questions about why a request was not approved or partially approved

How to submit Out of Network requests

How to request a special rate or enhanced rate for a single member (not the entire agency).

#### Information to Include in Your Email



- Make the Subject of the Email Descriptive. What is needed?
- Add as much detail to the body of the email as possible:
  - Who is submitting the request?
    - What is the submitter's Name?
    - What is the name of the organization or agency?
    - What is the name of the Provider?
  - Who needs the task completed: Member, Provider, another employee at the organization?
  - What will be affected a claim, a service

- What needs to be done the Task
- When does it need completed?
  - Provide a date.
  - Is it a critical or urgent need that affects a member/s?
- Are there any circumstance effecting the request or the requestor that are pertinent to the task being completed?
- Who do we contact if there are questions?
  - Point of Contact Name
  - Email Address
  - Telephone Number

### Information to Include in Your Email



- Be as specific as possible even if it seems obvious, add it to the information you are sending. Include any forms or documents needed to .
- Treat the information as what you would need to know in order to complete the task.
- Who? What? Where? When? Why?

- Sending the email to multiple addresses may delay a response.
- Internally, if a ticket is generated in the incorrect queue, staff will re-route the ticket to the appropriate location.
- Prior to submitting your question, please review the Q&As on the Provider Forum webpage.

6

### Provider Direct Walkthrough

Stacey Henderson *IT Programs Director* 

## Items to Review



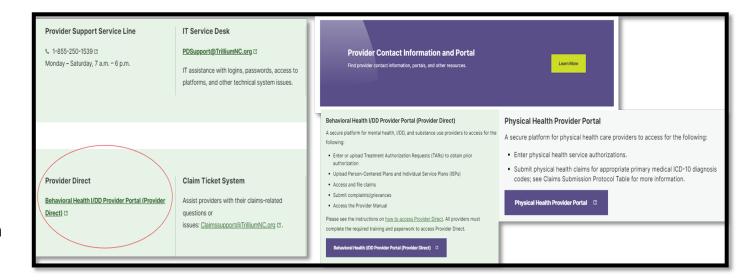
- Accessing and Logging into Provider Direct
- Submitting a claim
- Checking status of claims
- Submitting a TAR
- Checking authorizations
- A Having Issues?

## Accessing the BH I/DD Provider Portal - Provider Direct



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- To access the secure provider portals, please visit trillium's website at <a href="https://www.trilliumhealthresources.org">www.trilliumhealthresources.org</a> and select "For Providers"
- Hyperlink to Provider Direct is displayed midway down on the "For Providers" page OR you can click on "Provider Contact Information and Portal"
- In addition, a direct link to Carolina Complete Health's provider portal is available within each screen within Trillium's Provider Direct portal
- In addition, a direct link to Carolina Complete
  Health's provider portal is available within each
  screen within Trillium's Provider Direct



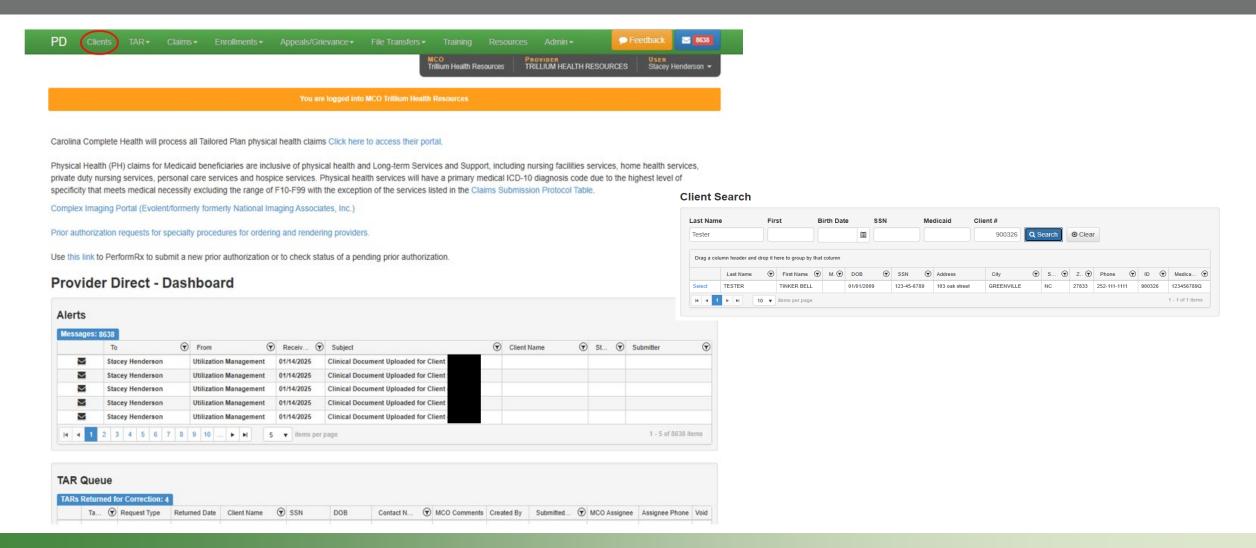
You are logged into MCO Trillium Health Resources

Carolina Complete Health will process all Tailored Plan physical health claims Click here to access their portal.

# Navigating to Client Homepage



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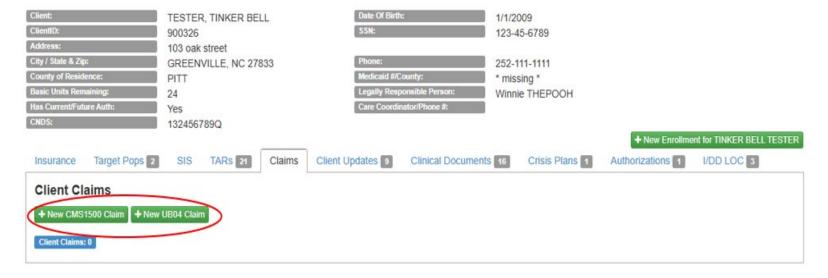


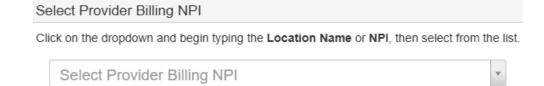
# **Submitting a Claim**



A Claim can be completed within Providers Direct. This can be completed through the client search functionality by going to the claims tab and selecting NEW CMS1500 claims OR New UB04 Claim

#### Client Homepage





# **Submitting a Claim**



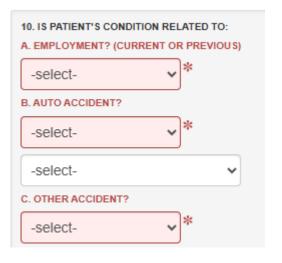
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Create CMS-1500 Claim	0				
	Health Insurance Claim Form - CMS1	500			
Claim # New Pay to Provider Address City / State & Zip Phone (999) 999-9999  To avoid denial, please fill in as much information as you have.	Tax ID				
1. INSURANCE TYPE other	1A. INSURED'S ID #				
one	12545500				
2. PATIENT'S NAME	3. PATIENT'S DATE OF BIRTH / SEX	4. INSURED'S NAME			
TESTER TINKER BELL	01/01/2009 mm / F	TESTER , TINKER BELL			
5. PATIENT'S ADDRESS	6. PATIENT'S RELATION SHIP TO INSURED	7. INSURED'S ADDRESS			
103 oak street	Self	103 oak street			
CITY STATE ZIP	8. PATIENT STATUS	CITY STATE ZIP			
GREENVILLE NC 27833	-select-	GREENVILLE NC 27833			
PHONE	-select-	PHONE			
2521111111	Science	2521111111			
9. OTHER INSURED'S NAME	10. IS PATIENT'S CONDITION RELATED TO:	11. INSURED'S POLICY GROUP OR FECA NUMBER			
Last , First MI	A. EMPLOYMENT? (CURRENT OR PREVIOUS)	900326			
A. OTHER INSURED'S POLICY OR GROUP NUMBER	-select- ✓*	A. INSURED'S DATE OF BIRTH / SEX			
B. OTHER INSURED'S DATE OF BIRTH / SEX	B. AUTO ACCIDENT?  -select-	01/01/2009 mm / F B. EMPLOYER'S NAME OR SCHOOL NAME			



#### Error(s) found

. 10 Error(s) found in the form below.



Back to Search	Edit Claim	Submit Claim	Price Preview			

# Checking the status of a claim



Target Pops Claims 8 Client Updates Clinical Documents 2 Crisis Plans Authorizations 3 I/DD LOC TARs 1 Insurance Client Claims + New CMS1500 Claim + New UB04 Claim CI Claim Nu... Status PD Claim Nu... Type Select CMS1500 Unsubmitted 837P Processed 10 ▼ items per page 1 - 8 of 8 items

## Checking the status of a claim



Client Updates Clinical Documents 2 Crisis Plans I/DD LOC Target Pops TARS 1 Claims 8 Authorizations 3 Insurance Client Claims → New CMS1500 Claim + New UB04 Claim • PD Claim Nu... CI Claim Nu... Type Status Select CMS1500 Unsubmitted 21071485 837P Processed Service Code From To Claimed Amt Pd Amt Check Number Check Date Check Amt Status T1017 12/11/2024 12/11/2024 \$343.97 \$343.97 Paid & with held \$343.97 12/11/2024 12/11/2024 \$79.73 T1017 \$79.73 Paid & with held \$79.73 1 - 2 of 2 item 837P Processed 837P Processed 837P Processed 837P Processed 837P Processed 837P Processed 10 ▼ items per page 1 - 8 of 8 item

## Checking the status of a claim

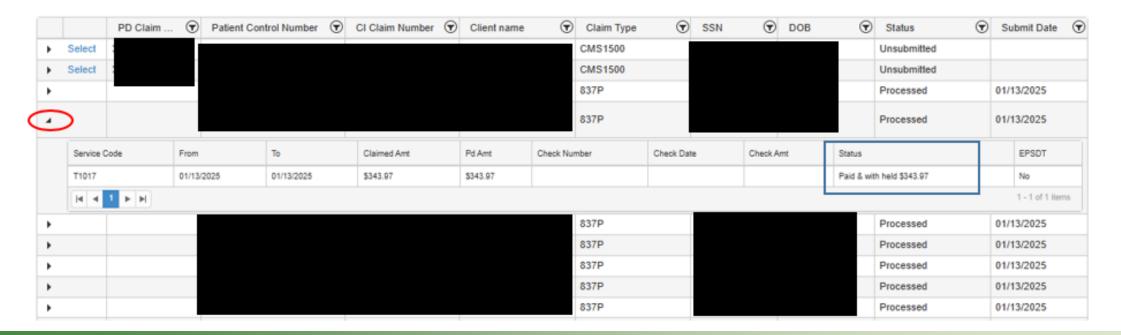




Navigate to Claims → Search Claims



#### **Claims Search**

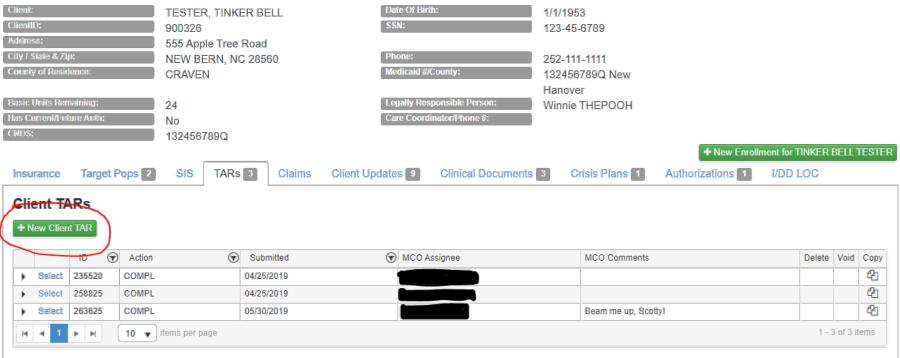


# Prior Approval Process: Submitting a Treatment Authorization Request (TAR)



- A Treatment Authorization Request (TAR) can be completed within Providers Direct to request an authorization for service for a member.
- This can be completed through the client search functionality by going to the TARs tab.

#### Client Homepage



### Prior Approval Process: Submitting a Treatment Authorization Request (TAR)



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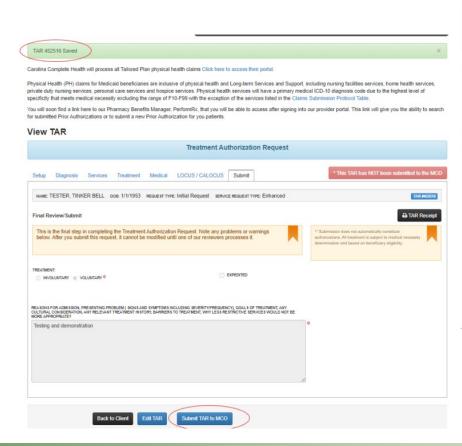
IRST NAME:	M.I:	LAST NAME:	SSN:	DATE OF BIRTH:	CLIENT ID:			
TINKER BELL	MJ:	TESTER	123-45-6789	01/01/1953				
THE STATE OF THE S		1201211	720 40 0100	0110111000				
ADDRESS:	555 Apple Tree Ro NEW BERN, NC 2							
CLIENT SPECIALTY:	O DEVELOPMENTA	L DISABILITIES   MENTAL HE	ALTH O SUBSTANCE ABUSE *			s with a red * must be		
REQUEST TYPE:	O DISCHARGE	INITIAL REQUEST   REAUT	THORIZATION *			before moving on to ep in the TAR process		
SERVICE REQUEST TYPE:	○ ACUTE ● ENH	ANCED   INNOVATIONS IDD	OUTPATIENT O TCM	re info				
	F DIRECTION: AGENCY WITH CHOICE EMPLOYER OF RECORD ® N/A More info							
IDD SELF DIRECTION:			above. Move your mouse ov		urther examples	/definitions, where provided.		
					urther examples	/definitions, where provided.		
Note: Please choose th					urther examples	/definitions, where provided.		
Note: Please choose the	e most appropriate r				urther examples	/definitions, where provided.		
Note: Please choose the Provider Information	e most appropriate r				urther examples	/definitions, where provided.		
Note: Please choose the Provider Information Provider: TRILLIUM HEALTH RE	e most appropriate r	esponse for the questions	above. Move your mouse ov	er "More Info" for 1	urther examples	/definitions, where provided.		

# Reviewing, Saving, and Submitting the TAR



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On the final tab, will indicate if this is involuntary, voluntary treatment and if this request needs to be expedited. In addition, you will be required to add a synopsis of the reason for the request. After you hit "Save & Continue" a TAR number will be populated and indicated in a green bar at the top of this screen. This has SAVED the TAR, but has not submitted it to Trillium. You must click on "Submit TAR to MCO" for the TAR to be submitted for review by Trillium Utilization Management staff.



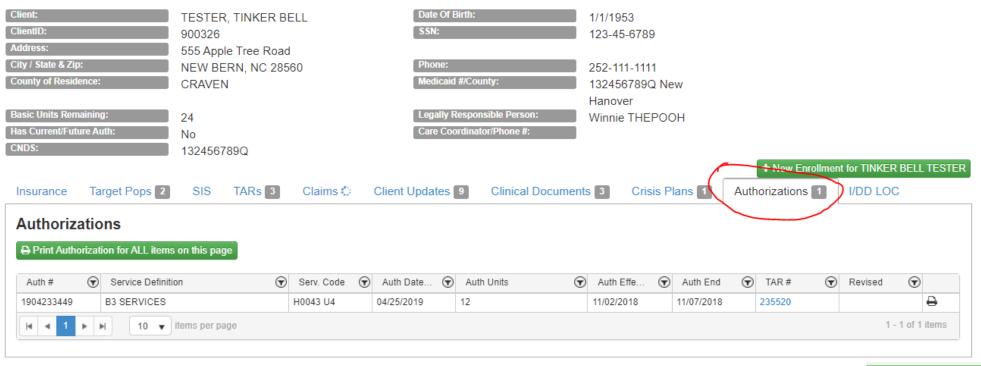
TAR successi	fully submitted					×
Physical Health private duty nurs	sing services, personal ca	beneficiaries are inclus re services and hospic	ive of physical health a e services. Physical he	and Long-term Servi	ces and Support, in ve a primary medic	ncluding nursing facilities services, home health services, cal ICD-10 diagnosis code due to the highest level of Submission Protocol Table.
	d a link here to our Pharn ior Authorizations or to su				after signing into	our provider portal. This link will give you the ability to search
View TAF	2					
			Treatment A	uthorization R	equest	
Setup Dia	gnosis Services T	reatment Medical	LOCUS / CALOCUS	Review		This TAR has been submitted to MCO
NAME: TESTE	ER, TINKER BELL DOB:	1/1/1953 REQUEST TYP	e: Initial Request sex	VICE REQUEST TYPE: EI	nhanced	TAR MISSSIE
Final Review	/Submit					□ TAR Receipt
	nal step in completing the you submit this request, i				s	** Submission does not automatically constitute authorizations. All treatment is subject to medical necessity determination and based on beneficiary eligibility.
TREATMENT:	RY ® VOLUNTARY*			EXPEDITED		
REASONS FOR AD CULTURAL CONSI MORE APPROPRIA	MISSION, PRESENTING PROBLE DERATION, ANY RELEVANT TRE	EM ( SIGNS AND SYMPTOMS II ATMENT HISTORY, BARRIERS	NCLUDING SEVERITY/FREQU TO TREATMENT, WHY LESS	ENCY), GOALS OF TREAT RESTRICTIVE SERVICES	MENT, ANY WOULD NOT BE	
Additional Co					6	
Status / Cor	mments					
SOURCE	DATE / TIME	BY	COMMENTS			
Provider	5/29/2024 4:16:11 PM	Henderson, Stacey	Testing and demonstral	ion		

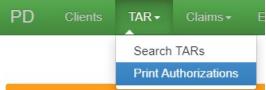
# Prior Approval Process: Checking Authorizations



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#### **Client Homepage**





### **Resources and Assistance**



C	Clients TAR → Claims → Enrollments → Appeals/Grievance →	File Transfers •	Training Resources Admin - Feedback
Select	Copy TAR Training	11 minutes	Training Materials can be found
Select	Treatment Authorization Request TAR Training	27 minutes	within Provider Direct for quick
Select	Client SIS, Clinical Documents & Crisis Plans Training	13 minutes	access
Select	Client Update Training	12 minutes	Training resources are available for many Provider Direct functionalities.
Select	Dashboard Training	20 minutes	If you need technical assistance, you
Select	Discharge TAR Training	12 minutes	can reach out to PD Support via the FEEDBACK button within Provider
Select	Enrollment Training	31 minutes	Direct or email
Select	File Transfers Training	7 minutes	PDSupport@TrilliumNC.org.
Select	System Administrator Training	56 minutes	
elect	Authorizations Training	11 minutes	

7

### **Eligibility and Enrollment**

Jamie Dew Eligibility and Enrollment Manager

# Eligibility and Enrollment Overview



E&E processes new enrollments, clinical updates and assists with questions and concerns regarding member eligibility.

### **Provider Direct**



- To look up a member or recipient, click on the "Client" tab
- Minimum search requirements are:
  - SSN alone
  - Last Name and Client ID
  - Medicaid # and Last Name
  - Last Name, First Name, and Birth Date combined

# Search Member/Recipient



PD Clients TAR ← Claims ← Enrollments ← Appeals/Grievance ← File Transfers ← Training Resources Admin ← Feedback ✓ 4222

MCO
Trillium Health Resources TRILLIUM HEALTH RESOURCES Jamie Dew ←

Minimum search requirements are by SSN alone, Last Name and Client ID, Medicaid # and Last Name, or Last Name, First Name, and Birth Date combined.

Carolina Complete Health will process all Tailored Plan physical health claims Click here to access their portal.

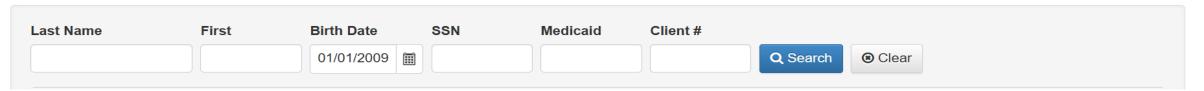
Physical Health (PH) claims for Medicaid beneficiaries are inclusive of physical health and Long-term Services and Support, including nursing facilities services, home health services, private duty nursing services, personal care services and hospice services. Physical health services will have a primary medical ICD-10 diagnosis code due to the highest level of specificity that meets medical necessity excluding the range of F10-F99 with the exception of the services listed in the Claims Submission Protocol Table.

Complex Imaging Portal (Evolent/formerly formerly National Imaging Associates, Inc.)

Prior authorization requests for specialty procedures for ordering and rendering providers.

Use this link to PerformRx to submit a new prior authorization or to check status of a pending prior authorization.

#### **Client Search**



# Search Member/Recipient



PD Clients TAR▼ Claims▼ Enrollments▼ Appeals/Grievance▼ File Transfers▼ Training Resources Admin▼ Feedback 4222

MCO
Trillium Health Resources TRILLIUM HEALTH RESOURCES Jamie Dew ▼

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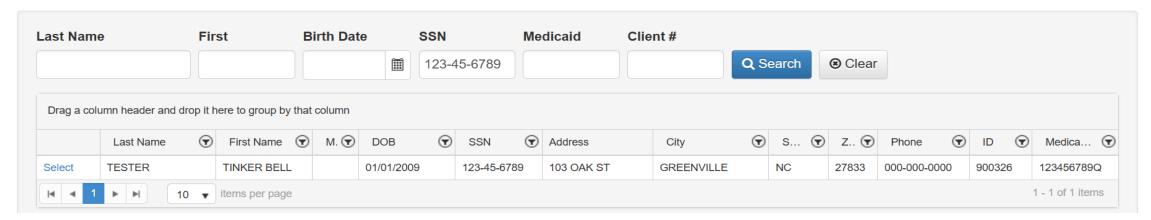
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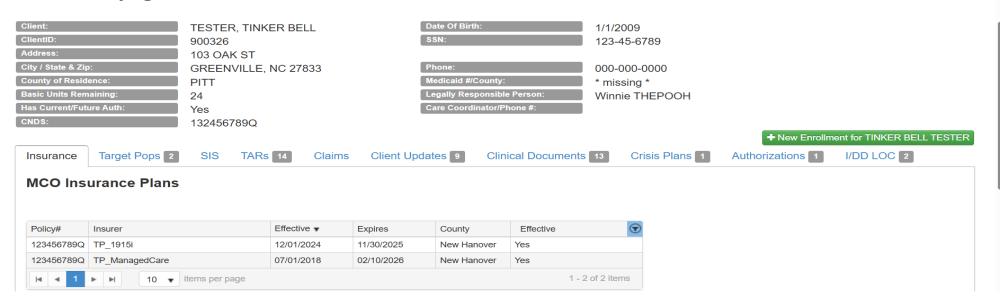
#### **Client Search**



# Client Homepage



**Client Homepage** 



#### **Third Party Insurance Plans**

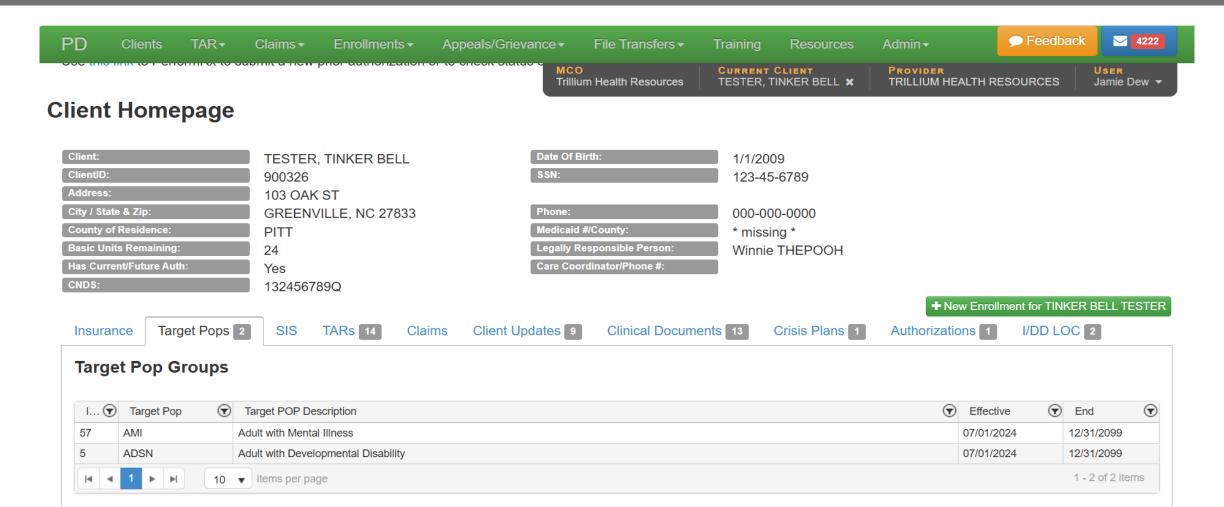
+ Add Third Party Insurance



# **State Benefit Plans (Target Pops)**



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# **Client Updates**



Feedback 4222 PD TAR **▼** File Transfers ▼ Clients Claims -Appeals/Grievance ▼ Resources Admin -Enrollments **▼** MCO **CURRENT CLIENT** PROVIDER USER Trillium Health Resources TESTER, TINKER BELL X TRILLIUM HEALTH RESOURCES Jamie Dew ▼

#### **Client Homepage**



### **Enrollments**



Feedback 4238 PD Enrollments **▼** Clients TAR-Claims **▼** File Transfers ▼ Admin **→** MCO **PROVIDER** USER New Enrollment Trillium Health Resources TRILLIUM HEALTH RESOURCES Jamie Dew • Search Enrollments You are logged into MCO Trillium Health Resources

Carolina Complete Health will process all Tailored Plan physical health claims Click here to access their portal.

Physical Health (PH) claims for Medicaid beneficiaries are inclusive of physical health and Long-term Services and Support, including nursing facilities services, home health services, private duty nursing services, personal care services and hospice services. Physical health services will have a primary medical ICD-10 diagnosis code due to the highest level of specificity that meets medical necessity excluding the range of F10-F99 with the exception of the services listed in the Claims Submission Protocol Table.

Complex Imaging Portal (Evolent/formerly formerly National Imaging Associates, Inc.)

Prior authorization requests for specialty procedures for ordering and rendering providers.

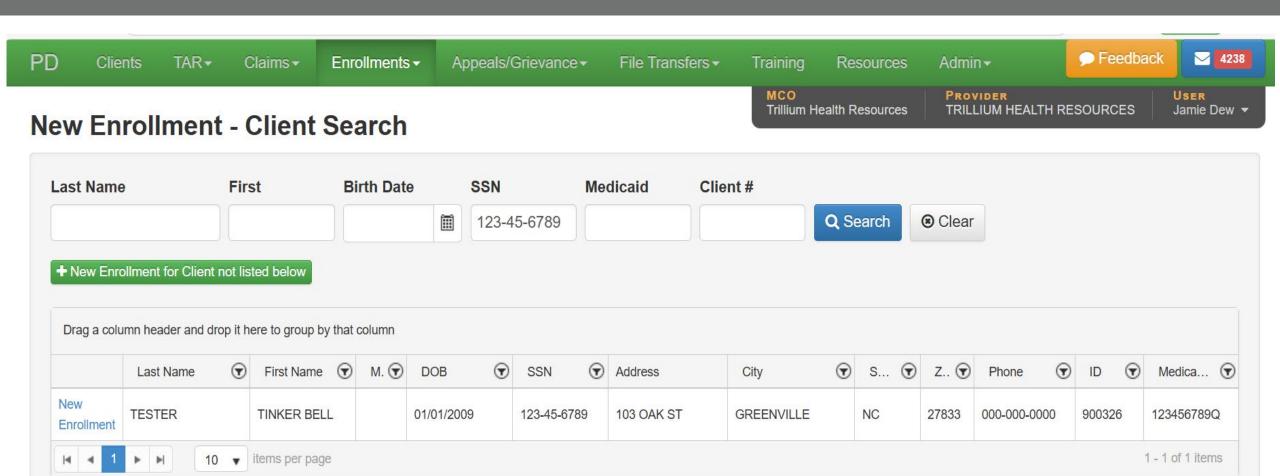
Use this link to PerformRx to submit a new prior authorization or to check status of a pending prior authorization.

#### **Client Search**



### **Enrollments**





# **Provider Direct Trainings**



- In Provider Direct, click on the "Training" tab
- Under Training Materials, you will find the Client Update and Enrollment Trainings
- Click on the "Select" hyperlink to view the training

P	D	Clients	TAR▼	Claims <b>→</b>	Enrollments <b>▼</b>	Appeals/Grievance <del>-</del>	File Transfers •	Training F	Resources Adr	min→	Feedback
	Select	Client Update	Training				12 minutes	Online	01/26/2015	Training is BOTH Po	C & MAC
	Select	Enrollment Tr	aining				31 minutes	Online	01/26/2015	Training is BOTH PC compatible	& MAC

# Eligibility & Enrollment Contact Information



Eligibility questions can be submitted to EnrollmentandEligibility@TrilliumNC.org 8

#### Housing

Talaika Williams, BS

Head of HUD • Housing

# **Trillium Housing Department**



- Administers federal housing grants.
- Seeks new funding to support an increase in affordable housing.
- Builds and maintains relationships with Public Housing Authorities and other organizations that offer affordable housing resources.
- Connects community agencies/organizations to Fair Housing and Requests for Reasonable Accommodations/Modifications Training.
- Promotes positive relationships with landlords and acts as a mediator, when needed, between landlord and tenant.
- Participates in Continuums of Care throughout catchment area.

### **Continuum of Care**



- Coordinates activities to meet the needs of individuals and families who are experiencing homelessness.
- A mechanism for agencies to apply for federal funds.
- Promotes communitywide commitment to the goal of ending homelessness by providing funding for efforts by nonprofit providers and State and local governments.
- Promotes access to and effect utilization of mainstream programs by homeless individuals and families.

### **Trillium and Continuums of Care**



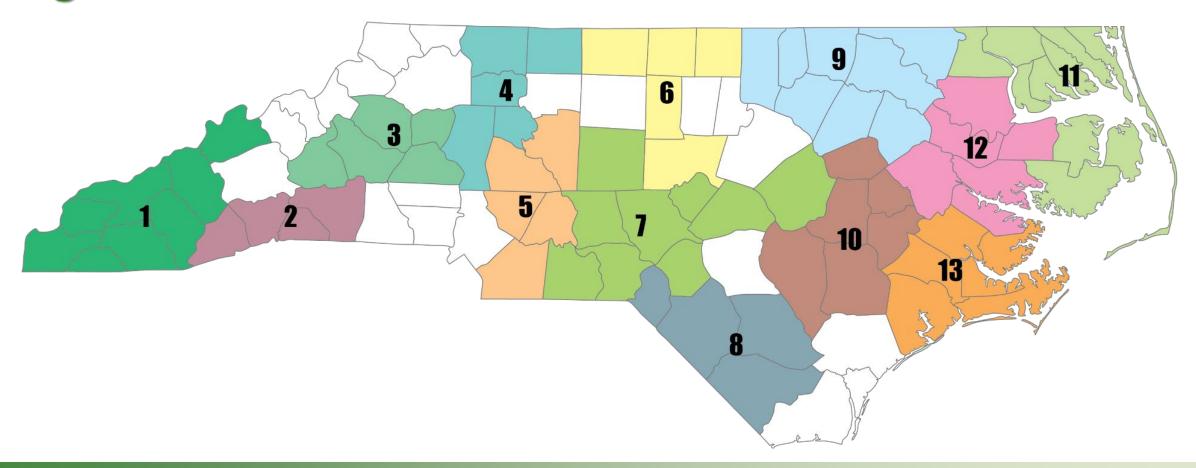
- The majority of Trillium's catchment area (42 counties) falls under the Balance of State CoC (BoS)
  - All of Trillium's current housing programs are under the BoS.

- The other 2 CoC's in Trillium's catchment area:
  - Guilford County CoC
  - Cape Fear Homeless CoC (New Hanover, Brunswick and Pender)

### **Balance of State CoC**



### **Regional Committees**



# **Trillium Housing Programs**



- All programs in the housing department are federal grants funded from the Department of Housing and Urban Development (HUD).
- One of Trillium's grants has been in continuous operation for 25 years!
- All Trillium housing programs follow the Housing First Model and are only accessible through the Coordinated Entry Process.

- The programs that Trillium administers are:
  - Permanent Supportive Housing (PSH), formerly Shelter Plus Care
  - Rapid Re-Housing (RRH)
  - Back@Home-Balance of State (B@H-BoS)
  - Coordinated Entry (CE)

### **Homeless Definition**



Criteria for ALL HUD Continuum of Care Housing Programs are, the person must meet the HUD definition of homelessness which is:

- Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
  - 1. Has a primary nighttime residence that is a public or private place not meant for human habitation; or
  - 2. Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
  - 3. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Note: An individual or family only needs to meet one of the above three subcategories to qualify as Homeless Category 1: Literally Homeless.

#### <u>OR</u>

- Any individual or family who meets the DV definition:
  - 1. Is fleeing, or is attempting to flee, domestic violence;
  - 2. Has no other residence; and
  - 3. Lacks the resources or support networks to obtain other permanent housing

#### Who Does Not Meet the Definition



- Staying with friends or family
- Staying in a hotel paid for by anyone other than a charitable organization or government agency
- Received an eviction notice but still living in the unit

# **Housing First**



- A Housing First Ends Homelessness
- A national best practice model, not a program
- Quickly and successfully connects individuals and families to permanent housing
- No preconditions such as sobriety, treatment compliance and service and/or income requirement
- Offers supportive services to maximize health stability to prevent returns to homelessness rather than meeting arbitrary benchmarks to permanent housing entry
- Housing First is cost effective

# **Permanent Supportive Housing**



- Permanent Supportive Housing (PSH) is a voucher program similar to Section 8/Housing Choice Vouchers funded by the Department of Housing and Urban Development.
- Participants must be chronically homeless, have a disability, low to no income.
- It provides rent and utility assistance based on income.
- Scattered site housing in the unit and community of their choice
- Services are encouraged but are not required to participate in the program.

- Housing Case Management through the housing department
- Permanent with no time limit.
- Currently in program: 175 Households, 300 Individuals (224 Adults and 76 Children)
- Available in most of Trillium's catchment but not administered by Trillium in:
  - Guildford, Pender, Brunswick, New Hanover, Anson, Montgomery, Moore, Lee, Richmond or Hoke Counties

# Rapid Re-Housing



- Very similar to PSH:
- Does not require chronic homelessness
- Only HUD homeless definition
- Time limited assistance up to 24 months
- Currently in Program: 11Households, 18 Individuals (12 Adults and 6 Children)
- Available in most of Trillium's catchment, administered by Trillium in:
  - Onslow
  - Carteret
  - Jones
  - Pamlico
  - Craven

### Back@Home-BoS



- Combines Permanent Supportive Housing and Rapid Re-Housing
- Adds Street Outreach
- Three-year grant, 10/23-09/26 subgrantee of the NC Office of Resiliency and Recovery
- Includes all counties in the BoS CoC, rural specific grant

- Currently in Program: 124 Households, 246 Individuals (148 Adults and 98 Children)
- Trillium's program covers:
  - Beaufort, Bertie, Bladen, Camden, Carteret, Chowan, Columbus, Craven, Currituck, Dare, Gates, Halifax, Hertford, Hyde, Jones, Martin, Nash, Northampton, Onslow, Pamlico, Pasquotank, Perquimans, Pitt, Tyrrell, Warren, Washington

# **Coordinated Entry**



- Coordinated Entry (CE) increases the efficiency in homeless services by standardizing how people access programs and coordinating referrals
- # HUD requires all CoCs to implement coordinated entry
- The Balance of State uses a decentralized coordinated entry system, with each regional committee selecting the model that best fits its resources and community needs
  - NC BoS Homeless Assessment and Referral Tool (HART)
    - Assesses the vulnerability of the individual or family if they continue to be unhoused
- Guilford County and Cape Fear Homeless CoCs use a centralized model
  - These CoCs use the Vulnerability Index Service Prioritization Decision Assistant Tool (VI-SPDAT)
    - Essentially does the same thing as the HART

### How to Access Housing Programs



Email: HousingServices@TrilliumNC.org

Please include the following information:

- Name of head of household
- Current living situation
- City and county they are located
- Contact information of person submitting the referral

Someone from the Housing Department will follow up with you regarding next steps. This will depend on where the individual/family is located.

#### **More Information**



- Trillium's Housing Department is separate from the Transitions to Community Living (TCL) Department
- We do not have any emergency funding or housing

- We do not provide hotel stays
- We only work with independent community-based housing and not group homes, adult care homes, etc.
- Questions?



#### Eastpointe and Sandhills Legacy Systems Winddown

Sara Hodges, IT Project Analyst IT Project Analyst

### Alpha+ and iTransact Decommissioning



- Access to Eastpointe and Sandhills claims systems for Behavioral Health/IDD providers will end at midnight on Monday, 6/30. This includes Eastpointe Alpha+, Eastpointe iTransact, and Sandhills Alpha+.
- Access to the Eastpointe and Sandhills FTP sites will also end on 6/30, as integrations with claims clearinghouses and vendor partners for legacy claims be decommissioned. This includes, but is not limited to, Change Healthcare and HHAeXchange.
- Providers are encouraged to submit retro Medicaid claims for dates of service January 31, 2024, and before for Eastpointe and Sandhills, as well as to export any documents such as Remittance Advice (RAs).
- As of 7/1, providers must reach out to ClaimsSupport@trilliumnc.org to submit claims for legacy Eastpointe and Sandhills. Submissions through claims clearinghouses will not be accepted after this date.
- A No changes will be made to current processes for Trillium claims.

#### Fall 2024 Provider Survey and Results

Linda Hawley Isbell, MA, Cl

Associate VP of Provider Relations and Engagement and Provider Support Services

#### **Provider Forums**



During the fall of 2024 we conducted a survey to collect data on the topics that you, our provider network would like to receive technical assistance and education on.

#### Top 7 Topics

- 1. Claims Denials Refer to February Forum Recording
- 2. Review of the Trillium Tailored Plan Refer to February Forum Recording
- 3. How to Add or Remove Services- Refer to February Forum Recording
- 4. Personal Care Services Refer to February Forum Recording
- 5. Provider Direct Set Up
- 6. Questions about the Physical Health Portal through Carolina Complete Health Refer to February Forum Recording
- 7. A Demo of the Provider Directory

There are many other topics that were identified in the survey that we would include in upcoming forums along with other hot topics as they come up.

#### **New Summer 2025 Provider Survey**

Linda Hawley Isbell, MA, Cl Associate VP of Provider Relations and Engagement and Provider Support Services

# May 2025 Summer Provider Survey HEALTH RESOURCES

Our May 2025 Trillium Provider Network Survey for Technical Assistance, Education, and Training Topics is now available.

The Trillium Network Management team wants to continue to ensure that we provide technical assistance and education on a variety of topics that are relevant and important to our Provider Network. Since February 2025, we have been conducting monthly Provider Forums and addressing items that our providers identified in the Fall 2024 provider survey.

This new survey will run through the first week of June to give our provider network plenty of opportunity to participate.

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 continuing to develop and providing technical assistance on topics that are relevant for you and your organization. Also, our goal is to improve our customer service.

**May 2005 Summer Provider Survey** 

#### Member Progress Notes Guidance

Kimberly Wagner, MBA

Provider Relations and Engagement Manager

### **Progress Note Documentation Guidance**



- Requested topic from the last survey.
- Review the Clinical Coverage Policies on the guidance for the type of note required <a href="https://medicaid.ncdhhs.gov/providers/program-specific-clinical-coverage-policies">https://medicaid.ncdhhs.gov/providers/program-specific-clinical-coverage-policies</a>
- Review the Records Management and Documentation

  Manual <a href="https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-use-services/records-management-and-documentation-manual">https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-use-services/records-management-and-documentation-manual</a> for guidance.

## **Essential Information for Physical Health Providers**

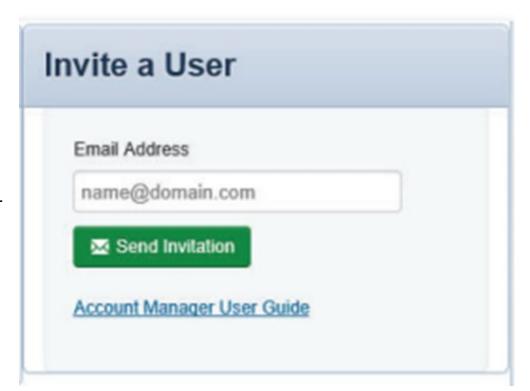
Jesse Hardin, CCH Senior Director, Communications and Training

### **Portal Access for Third-party Billers**



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- Third-party billing entities supporting Trillium providers third-party have accounts to the Secure Provider Portal when validated by the practice's **Portal Account Manager.**
- The Account Manager should Invite a User by sending an invitation to the email address for the third-party biller.
- This generates an email link to the Trillium PH Secure Provider Portal.
- User should continue to Create an Account, verifying their email, then returning to enter TIN, Phone, and Fax.
- After this point, the third-party biller should contact the Portal Administrator at the practice to verify their account request.
- Upon verification, the user will be able to login to the portal and have functionality to submit and view claims.





### Claim Denial Trends

REQUIRES PRIMARY EOB; AUTH REQ'D FOR EPSDT CONSIDERATION	The provider must submit a primary Explanation of Benefits (EOB), or obtain prior authorization for the service to be considered under EPSDT.	DENY-BILL NPI+TAXONOMY NOT ON MEDICAID FILE OR NOT ACTIVE ON SVC DATES	Please ensure your provider data has active credentialing status with NC Tracks and the data on the claim matches what is in NC Tracks.  Missing rendering and/or missing billing taxonomy is a common cause of claim processing delays and denials.  Taxonomy numbers must also align with your provider data in NCTracks. Please also advise your Clearinghouse to make sure the changes made to taxonomy placement are permanent on your account going forward. Provider Guide: <a href="https://network.carolinacompletehealth.com/content/dam/centene/carolinacompletehealth/pdfs/CCH-Prvr-Taxonomy-Guide.pdf">https://network.carolinacompletehealth/pdfs/CCH-Prvr-Taxonomy-Guide.pdf</a>
DENY: BILL PRIMARY INSURER 1STRESUBMIT WITH EOB	of Benefits Walkthrough (PDF) for guidance on submitting COB claims in the Trillium Physical Health Portal.  Providers should verify other health insurance on the Trillium		
NON- ELIGIBLE/NON- REIMBURSABLE SERVICE PER PLAN OR REGULATORY GUIDELINES	The service is not eligible for reimbursement based on members benefit plan or regulatory guidelines. For clarification contact Provider Services.	REFERRING PROV NPI NOT ON MEDICAID FILE/NOT ACTIVE ON SVC DATE	Please ensure your provider data has active credentialing status with NC Tracks and the data on the claim matches what is in NC Tracks.  Provider Guide: <a href="https://network.carolinacompletehealth.com/content/dam/centene/carolinacompletehealth/pdfs/CCH-Prvr-Taxonomy-Guide.pdf">https://network.carolinacompletehealth/pdfs/CCH-Prvr-Taxonomy-Guide.pdf</a>

### **Up-Front Claim Rejections**



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- A Providers reporting that claims are not in the system, but the provider has a tracking number for the claims:
  - This is most likely due to the claim rejecting.
  - Each claim reject has a rejection reason code with details that they would receive upon claim submission in both the Trillium portal and clearinghouse. A provider must resubmit the claim with corrections to resolve the rejection.
  - Rejection letters are also mailed to the provider including a claim rejection number along with a reject code and reject reason whether submitted directly on the Trillium portal or through a clearinghouse
  - A provider can't submit a corrected claim on front end rejections. A
    provider must review the claim submission and submit a new claim
    to resolve the rejection.
- For common causes of up-front rejections, see our <u>Claims Submission</u>

  <u>Reminder Guide (PDF)</u>

#### **Common Causes of Up Front Rejections**

- Unreadable Information
- Missing Enrollee Date of Birth
- Missing Enrollee Name or Identification Number
- . Missing Provider Name, Tax ID, or NPI Number
- Missing Medicaid Number
- The Date of Service on the Claim is Not Prior to Receipt Date of the Claim
- Dates Are Missing from Required Fields
- Invalid or Missing Type of Bill
- Missing, Invalid or Incomplete Diagnosis Code
- Missing Service Line Detail
- . Enrollee Not Effective on The Date of Service
- Admission Type is Missing
- Missing Patient Status
- . Missing or Invalid Occurrence Code or Date
- Missing or Invalid Revenue Code
- Missing or Invalid CPT/Procedure Code
- Incorrect Form Type
- Claims submitted with handwritten data or black and white forms



### Stay Connected!

- Sign Up for Important Updates and Communications!
  - Visit our webpage
     https://network.carolinacomplete
     health.com/provider updates/cchn-bulletins-and newsletters.html
  - Complete the sign-up form here <u>https://www.surveymonkey.com/r</u>
     /JLR2G6GCCH

- Provider Orientation for New Physical Health Providers
  - Occurs the Fourth Tuesday of every month at Noon
  - Register Here

#### Resources, Questions and Answers

Kimberly Wagner, MBA

Provider Relations and Engagement Manager

#### **Previous Forum Information**



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#### https://www.trilliumhealthresources.org/

#### **For Providers**

Overview

#### CLINICAL

Behavioral Health Screening Programs

Benefit Plans | Service Definitions

Billing Codes & Rates | Check Write Schedule

Clinical Practice Guidelines

**Developmental Centers** 

**EPSDT** 

Evidence-Based Practices

**HEDIS Resources** 

NC-TOPPS

Prior Authorization Services Instructions

Tailored Care Management for Providers

Tailored Plan Medicaid Providers Pharmacy Benefits

Value-Based Care

#### RESOURCES

Communications

Contracting with Trillium

Electronic Health Records - Health Information

Exchange

Electronic Visit Verification (EVV)

Network Participation Opportunities

Provider Council

Provider Directory

Provider Documents & Forms

Provider Self-Audits

Trillium Funding Opportunities

#### PROVIDER INFORMATION

Contact Information and Provider Portals

How do I...?

My Learning Campus Providers

Provider Forum

#### TAILORED PLANS - INFORMATION FOR PROVIDERS

Tailored Plans - Information for Providers

Provider Tailored Plan Contracting Reminders

Tailored Plan Trillium Training

NCDHHS Information





**Provider Forum Questions & Answers Coming Soon** 

**Provider Forum Presentation** 

Provider Forum Recording

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### Thank you for your participation.



### **Connect With Us**

- Trillium Health Resources
- Trillium Direct Connect for Enrichment
- Trillium Direct Connect for Recovery
- X Trillium Health Resources
- Trillium Health Resources



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Member & Recipient Service Line 1-877-685-2415

Provider Support Service Line 1-855-250-1539

Administrative & Business Matters 1-866-998-2597