Trillium HEALTH RESOURCES

SPECIAL ANNOUNCEMENT FOR PROVIDERS

EVV Impact of Unified Claims Systems Launch on October 1, 2026

Effective October 1, 2026, Trillium will transition to a unified claims system for Tailored Plan operations. This transition will impact all Tailored Plan providers, including Behavioral Health, Personal Care and Home Health providers of services subject to Electronic Visit Verification.

Claims Submission: All claims currently submitted through HHAeXchange will continue to be submitted through HHAeXchange.

Direct Billing: Direct Billed Home Health claims will be submitted to Trillium via Direct EDI or EDI via Clearinghouse with Payor ID 43072. Direct Billed Home Health claims will continue to pend for 14 days to allow time for EVV visit data submission through HHAeXchange.

EFTs and RA's: Tailored Plan claims payments will be rendered by Trillium. Remittance Advice for Tailored Plan claims will be uploaded to the provider's sFTP site as well Trillium's iTransact portal.

Authorizations and Treatment Plans: Tailored Plan Providers will transition to Trillium's iTransact portal to access member authorizations and treatment plans.

Authorization Issues/Upload Requests: Providers will continue to contact Trillium for these issues.

Behavioral Health providers will continue to collaborate with their member TCMs on authorization issues.

For PCS/Home Health authorization questions and 3051 submissions, please contact Long Term Services Support at LTSS@TrilliumNC.org.

For authorization/member upload requests for HHAeXchange and assistance with Claims, please contact Claims Support at ClaimsSupport@TrilliumNC.org.

Learn More about The Upcoming Changes

Look out for Upcoming iTransact Training!

Training will be made available starting on Tuesday, September 1 to prepare users for the new system, covering topics such as how to navigate the new system, submit authorizations, and submit claims.

These trainings will be available through MyLearning Campus.

Billing staff are highly encouraged to take these trainings.

Upcoming Live Provider Information Sessions

Join us for our upcoming webinars, designed to guide Tailored Plan Behavioral Health and Physical Health providers through changes ahead of the October 1 transition to a unified Tailored Plan claims platform. These sessions bring together subject matter experts across Utilization Management, Claims, Network, IT and Finance to walk you step by step through authorization and claims submission process updates, including clearinghouse setup, split claims processes, interest payments, coordination of benefits, and EFT enrollment. Attendees will gain clarity on required actions for providers to take before October 1, new processes, as well as where to find up to date documentation as changes roll out.

Register Today

- September 8
- September 17
- September 22

Provider Onboarding — Joining the Trillium Claims System

Complete your onboarding to gain access to streamlined payment processing and authorization submissions. This page walks you through what to expect, what you will need, and how to get help along the way. Remember that completing these steps will help ensure payments for Trillium Tailored Plan services to members after October 1!

Access the Provider Onboarding Portal

Before You Begin: Required Training

Attending Trillium's Provider Training for System Administration and iTransact is the first and mandatory step before accessing the enrollment form.

Training prepares your team to manage your agency's access and permissions within Trillium's systems and to navigate the iTransact Provider Portal — the platform you will use for claims submission, payment tracking, and authorization requests after you are approved. Do not begin the enrollment form until training has been completed.

Register for Provider Training at My Learning Campus

Who should complete this training? Each provider organization may designate a Primary System Administrator for iTransact. This individual must be a direct employee of the contracted provider organization. Third-party billers are not eligible to serve in this role. If you currently serve as the organization's Provider Direct System Administrator, you must still complete the separate iTransact training and onboarding pathway.

How It Works

Step 1 — Prepare Your Documents

Gather your Government-Issued Photo ID (front and back), 837 EDI Claim File, NPI, Tax ID, and authorized signatory information before starting the form. The form cannot be saved mid-progress, so all documents must be ready before you begin. Incomplete submissions will delay onboarding. Ensure all documents are legible and all fields are complete before submitting.

Step 2 — Complete the Provider Onboarding Form

The enrollment form has three components, all of which must be fully completed before the form can be submitted.

Provider — Enter your agency's legal name, Employer Identification Number (EIN), full service address, Tailored Care Management (TCM) status, and your Agency Contact Person's name, title, email address, and phone number.

Agreement — Review and acknowledge the Trading Partner Agreement, which governs the exchange of HIPAA-compliant Electronic Data Interchange (EDI) transactions between your agency and Trillium Health Resources. Read this agreement carefully before proceeding.

Accounts — Designate your System Administrator and provide your Clearinghouse and EDI connection details. Your System Administrator will manage your agency's access to the iTransact Portal on an ongoing basis.

Incomplete submissions are not allowed. The form must be fully submitted to begin the authorization review.

The form takes approximately 15 minutes to complete when all documents are prepared in advance.

Step 3 — Submit and Await Authorization

After submitting the form, our authorization team will review your application within one to two business days. You will be notified by email of the outcome. If any items need clarification or correction, you will receive a detailed notification specifying exactly what is missing or incorrect.

Step 4 — Receive iTransact Portal Access

Upon approval, you will receive the iTransact Provider Portal URL and your unique Access Code by email within one to two business days. iTransact enables electronic claims submission, payment tracking, and authorization requests.

Step 5 — Ongoing Support

Our Provider Onboarding Support team is available throughout the entire process by email during business hours. Responses are provided within one business day.

DO NOT respond to this email. To ask questions about this matter, send a message using the questions form linked form linked to our webpage. We will collect all questions to post in an FAQ.
