



## SPECIAL ANNOUNCEMENT

### Required Update for All HCBS Provider Contact Information

#### Objective

NC Medicaid is enhancing the Home and Community Based Services (HCBS) Database to maintain compliance with the HCBS Final Rule and the Centers for Medicare & Medicaid Services (CMS)-approved HCBS Final Transition Plan. All providers of HCBS in North Carolina must update their contact information to support this initiative. More details regarding the database enhancement project will be provided soon.

#### Action Required by Providers

After December 19, 2025, all providers offering HCBS (including 1915(c) Waivers: Innovations, TBI and Community Alternatives Program for Disabled Adults (CAP/DA) Adult Day Health services) are required to update their contact information for each submitted and approved Provider Self-Assessment site.

**Deadline:** February 28, 2026

#### How to Complete the Update

Your assigned health plan(s) will send you a spreadsheet detailing your approved, validated HCBS sites. Follow these steps:

1. Review columns AF and AG (Contact email and contact number) of the spreadsheet to identify any needed updates.
2. Update the contact information directly in the spreadsheet if changes are necessary.
3. Return the completed and updated spreadsheet to your Health Plan contact.

## Important Notes

- 🌱 Do not update the Provider Self-Assessment in the database directly.
- 🌱 Only use the spreadsheet provided by your assigned Health Plan(s).
- 🌱 Your health plan will provide specific guidance on completing and returning the required updates.
- 🌱 Health plans are responsible for uploading the edited data and submitting it to NC Medicaid.

Please do not respond to this email. Questions should be sent to  
[NetworkManagement@TrilliumNC.org](mailto:NetworkManagement@TrilliumNC.org)

