



Transforming Lives. Building Community Well-Being.

Network Communication Bulletin #192

To: All Providers
From: Khristine Brewington, MS, LCMHCS, LCAS, CCS, CCJP
VP of Network Management
Date: October 12, 2021
Subject: Important Information from Trillium's Cybersecurity Team, Request for Information Opportunity, The 2021 CIDD Virtual Community Talk Series, Provider Opportunity: Policy Development Process for Clinical Managed Population Specific High Intensity Residential Services for SUD and TBI, Tailored Care Management 101 Webinar Series, Important Reminder for Providers, Joint DMHDDSAS & DHB Update Call for IPS Providers on Medicaid 1915(i) Waiver, Safeguarding PHI Through Email, New Reimbursement Calculator in Provider Direct, North Carolina Standard and Tailored Plan Tobacco Free Policy Requirements and Upcoming Training Opportunity, Important NC TOPPS Information, Parent Leadership Training, Disaster Response Unit Updates, Valued Providers SEAL Program

IMPORTANT INFORMATION FROM TRILLIUM'S CYBERSECURITY TEAM:

Trillium's IT Cybersecurity Team has been made aware that an email phishing campaign has been released that appears to originate from Zix® Secure Email, a solution Trillium uses to send encrypted email to external stakeholders. According to several media and online sources, the cyber attackers disguised their messages as coming from the email encryption provider Zix, a well-known cybersecurity brand. The fake emails utilize some of the design elements from Zix Corp secure email notifications, tricking users into clicking on the link to retrieve the supposed encrypted email.

Trillium is advising our external stakeholder partners to exercise extreme caution and take necessary precautions.

Some recommendations to avoid such attacks:

- 1. Be cautious** - Be on the lookout for signs of spoofing attacks such as grammar errors or suspicious links.
- 2. Check any links** - Hover over links before clicking on them to verify the URL.
- 3. Keep systems protected** - Many antivirus and protection software can protect your systems from spoof emails and other types of email attacks.



Member & Recipient Services Line - 877.685.2415

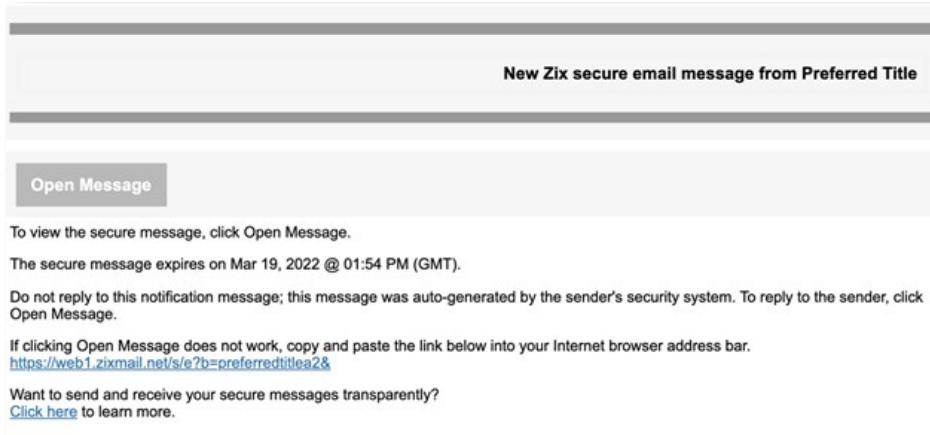
Business & Administrative Matters - 866.998.2597

TrilliumHealthResources.org



- 4. Call to confirm** - If in doubt about any email, call the sender through a known legitimate number, to confirm if the sender sent the email.
- 5. Report** - If you think you have received suspected "phishing email," inform your organization's security team or IT department immediately.

Image of a falsified email, note that the only incorrect item is the hyperlinks used are incorrect:



REQUEST FOR INFORMATION OPPORTUNITY!

Trillium Health Resources (Trillium) is seeking to identify mission-driven organizations that are interested in the development of TCL Peer Support Service/In-Reach Function Services throughout Trillium's catchment area.

This Request for Information (RFI) is open to both in-network and out-of-network providers enrolled in NC Tracks and NC Medicaid who are free of contract sanctions, fraud investigations, and/or current or previous IRS liens. More than one provider may be selected.

Providers interested in providing Peer Support Specialist/In-Reach should provide an application via the link below by November 15, 2021.

▲ [Submission Link- CLICK HERE](#)

THE 2021 CIDD "VIRTUAL" COMMUNITY TALK SERIES PRESENTS:

"ABLE ACCOUNTS: A Key to Financial Stability for People with Intellectual, Developmental, or other Disabilities"

Presenters will discuss how ABLE accounts help to increase the financial well-being of persons with a disability. They will review ABLE program implementation, a description of ABLE accounts and how they can be used. The presentation and discussion will include examples of use by ABLE account owners, in addition to resources for individuals, service providers and employers.

LEARNING OBJECTIVES:

- 1.** Recognize the opportunity for financial well-being by opening an ABLE account
- 2.** Get an overview of opening and using an ABLE account
- 3.** Review resources that aid in understanding and using ABLE accounts, and informing others about ABLE Accounts as an individual, family member, service provider or employer

Date: WEDNESDAY, OCTOBER 13, 2021, via ZOOM

Time: 6:30PM – 8:00PM

 [Registration](#)

At the time of registration, you will receive a Zoom link to join the Community Talk Series.

Virtual attendance certificates – professional development 1.5 credit hours – are available

Please direct any questions to Debbie Reinhartsen, Ph.D., CCC-SLP at
Debbie.Reinhartsen@cidd.unc.edu

 [More information about October and future Community Events](#)

PROVIDER OPPORTUNITY: POLICY DEVELOPMENT PROCESS FOR CLINICAL MANAGED POPULATION SPECIFIC HIGH INTENSITY RESIDENTIAL SERVICES FOR SUD AND TBI

Below is the information for any interested providers who would like to join the stakeholder group that would like to contribute to the policy development process for Clinical Managed Population Specific High Intensity Residential Services for SUD and TBI. This policy is part of the 1115 SUD Demonstration waiver work being done by DHB and DMHDDSAS.

This will be the first of three stakeholder work groups to review and discuss the Clinically Managed Population Specific High Intensity Residential Service Clinical Coverage Policy for beneficiaries with SUD and TBI.

Attachments will be added closer to the work group date.

MICROSOFT TEAMS MEETING

Join on your computer or mobile app

 [Click here to join the meeting](#)

Join with a video conferencing device

 ncgov@m.webex.com

Video Conference ID: 112 768 042 3

[Alternate VTC instructions](#)

[Learn More | Meeting options](#)

TAILORED CARE MANAGEMENT 101 WEBINAR SERIES

Tailored Care Management will be the predominant care management model for the Behavioral Health and Intellectual/Developmental Disability (I/DD) Tailored Plan population, which includes individuals with significant behavioral health conditions (including serious mental illness, serious emotional disturbances and severe substance use disorders), I/DD and traumatic brain injury (TBI). Tailored Plan members will obtain care management through one of three approaches: through an Advanced Medical Home Plus (AMH+) practice, Care Management Agency (CMA), or a care manager based at a Tailored Plan.

The [Tailored Care Management 101 webinar series](#) was designed to help develop a shared understanding of the model across the North Carolina provider community (including advanced medical homes and behavioral health, I/DD, and TBI providers) and anyone interested.

The webinar series will run from October through mid-December, on Fridays from 12 to 1 p.m., and cover:

DATE	SUBJECT
Oct. 1, 2021	Introduction to Tailored Care Management
Oct. 8, 2021	Becoming an AMH+/CMA
Oct. 15, 2021	Health Information Technology (IT) Requirements and Data Sharing
Oct. 22, 2021	Partnering with a Clinically Integrated Network and Other Partners
Oct. 29, 2021	Delivery of Tailored Care Management
Nov. 5, 2021	Transitional Care Management and Community Inclusion Activities
Nov. 19, 2021	Conflict-Free Care Management and Additional Care Coordination Functions for Members Enrolled in the Innovations or TBI Waiver
Dec. 3, 2021	Billing
Dec. 10, 2021	Oversight and Quality Measurement/Improvement

- ▲ Register for the [webinar series](#).
- ▲ [More information on Tailored Care Management](#)

REGIONAL REFERRAL FORM-IMPORTANT UPDATE

The Division of State Operation Healthcare Facilities (DSOHF) has updated the Regional Referral form. This is effective immediately, the updated form is attached. Take note of the detail below, we still have to issue tracking numbers for admission to ADATCs (Walter B Jones, Julian Keith and RJ Blackley) but we do not have to issue these for State Psychiatric Hospitals (Cherry, Central Regional, Broughton).

HERE IS THE MESSAGE WE RECEIVED RELATED TO THIS CHANGE:

It was brought to DSOHFs attention that with the adoption of Medicaid Transformation that the Regional Referral Form (RRF) needed modifications to eliminate confusion with Prepaid Health Plans (PHPs) for patients enrolled in a standard plan. The revised RRF is attached and modifications are outlined below.

Please be sure to update your files with the revised RRF and that you also share with other referral sources as appropriate. The DSOHF Webmaster will be making the change on the DSOHF/facility websites.

MODIFICATIONS TO THE REGIONAL REFERRAL FORM (RRF)

Referral sources will continue to use the Regional Referral Form (RRF) to make referrals to the State Psychiatric Hospitals (SPHs) and Alcohol and Drug Abuse Treatment Centers (ADATCs). There have been a few modifications to the section historically used by LME/MCOs to provide an authorization number:

- ▲ PHPs are NOT expected to submit an "authorization number" for the RRF
- ▲ Referral sources do not need to contact PHPs for an "authorization number"
- ▲ If PHP is asked by a member how to be referred they should tell them to go to local ED, Crisis Center, therapy or medication management provider for evaluation
- ▲ The MCOs no longer need to provide an authorization number for SPH referrals
- ▲ The authorization section is only required for LME/MCOs to complete for referrals of LME/MCO members to an ADATC (*this number is required from the LME/MCO to track ADATC appropriation funding*)

SEE EXCERPT FROM REVISED RRF:

Page 3:

- ▲ Expanded Crisis/Detox/Inpatient Rehab options for ADATC beds
- ▲ Clarified authorization section - only for referrals for LME/MCO members - NOT required for PHPs
- ▲ Clarified referring and responsible county section - only for ADATC use by the LME/MCOs for the tracking of those appropriations

SERVICE REQUESTED:

Hospital Beds	ADATC Beds
<input type="checkbox"/> Adult Admissions	<input type="checkbox"/> Crisis
<input type="checkbox"/> Adults Long-Term	<input type="checkbox"/> Detox
<input type="checkbox"/> Geriatric Admissions	<input type="checkbox"/> Inpatient Rehab
<input type="checkbox"/> Adolescent Admissions	
<input type="checkbox"/> Child Admissions	

LME/MCO TO COMPLETE ONLY FOR REFERRAL OF LME/MCO MEMBERS TO ADATC (PHPs DO NOT COMPLETE)

Referring County: _____	Phone #: _____	Responsible County: _____	Phone #: _____
Authorization #: _____	From: _____ To*: _____	Authorization #: _____	From: _____ To*: _____
		*Day not covered	

FOR ADATC USE ONLY - IF NO AUTHORIZATION INFORMATION IS PROVIDED BY THE LME:

Referring County: _____	Phone #: _____	Responsible County: _____	Phone #: _____
ADATC Staff Making Phone Call: _____		ADATC Staff Making Phone Call: _____	
<input type="checkbox"/> No Response Within 1 Hour of Call		<input type="checkbox"/> No Response Within 1 Hour of Call	
If Response – Person Authorizing Days: _____		If Response – Person Authorizing Days: _____	

▲ [See the complete form](#)

IMPORTANT REMINDERS FOR PROVIDERS

Providers who have questions related to claims, should call the Provider Support Service Line (PSSL) at 1-855-250-1539.

All Provider's delivering services to individuals in the Trillium catchment area must be enrolled in NCTracks, maintain a Provider Status of "01-Active", and have the correct affiliations. Failure to meet all of these requirements will cause claims to deny and may lead to the Contract being terminated. Trillium strongly encourages all providers to periodically review and compare their information in Provider Direct with NCTracks to ensure the contracted NPI number(s), Medicaid Health Plan(s), and Taxonomy(ies) remain active.

To review your information in NCTracks visit www.nctracks.nc.gov.

For a full list of Taxonomy codes visit www.nucc.org.

JOINT DMHDDSS & DHB UPDATE CALLS FOR IPS PROVIDERS AND CONSUMERS & FAMILIES ON MEDICAID 1915(I) WAIVER

With the 1915(b)(3) waiver set to expire July 1, 2022, NC Medicaid is partnering with DMHDDSS to apply to CMS for a 1915(i) waiver. This process will have multiple opportunities for stakeholder education and participation on the process and the services that will be part of the new 1915(i) waiver. If you provide IPS services, it is in your agency's and team's best interest to ensure that you have staff able to attend the upcoming stakeholder engagement meetings. The first several meetings will provide you with a high level overview of the process, and following meetings will be focused on developing a Medicaid Clinical Coverage Policy for IPS.

The initial meeting will be taking place during the below listed Provider Call:

JOINT DMHDDSAS & DHB UPDATE CALL:

- ▲ **Providers**

Thursday, October 7 from 3 - 4 pm

Links are distributed to listserv members closer to the date of the call. If you would like to be on our listserv please email the CE&E Team at: CEandE.staff@dhhs.nc.gov

SAFEGUARDING PHI THROUGH EMAIL

Providers are responsible for safeguarding a member's protected health information ("PHI") when transmitting PHI. A secure method of transmittal should be utilized when sending PHI electronically which can be accomplished through encryption software. Your agency may have a specific software platform or Trillium offers Providers the opportunity to create and securely send emails by accessing Zixmail in the Provider Portal on Trillium's website ([Zixmail Link](#)). Zixmail will encrypt the contents and attachments of the email. It does not however, encrypt information in the subject line. No form of PHI should be visible in the subject line of an email. When sending PHI to Trillium or other agencies through email or ticket submission, please ensure you are utilizing a secure method of transmittal to eliminate any potential confidentiality concerns.

NEW REIMBURSEMENT CALCULATOR IN PROVIDER DIRECT

Trillium would like to announce that effective October 28th, 2021, providers will now have the capability to utilize a Reimbursement Calculator and receive an estimated payment amount when creating and submitting a CMS 1500 in Provider Direct.

After the provider creates a CMS 1500 in Provider Direct they would:

- ▲ Click 'Save & Continue'
- ▲ The claim will then show an available option to click on 'Pricing Preview' in order to view the estimated pricing details
- ▲ The Pricing Preview will open up in a separate window

Once the separate window opens up, providers will be able to see a display of claim details with projected payment information.

Payment information is built from the member, clinician, contract, rate, etc. This is just an anticipated preview and does not guarantee payment as the claim will still have to run through all system edits.

For any technical questions with the Reimbursement Calculator, please contact Provider Direct Support through the feedback tab of the Provider Direct website. For any questions regarding the calculation of the estimated payment, please contact the Claims Department at claims2@trilliumnc.org.

NORTH CAROLINA STANDARD & TAILORED PLAN TOBACCO-FREE POLICY REQUIREMENTS AND UPCOMING TRAINING OPPORTUNITY

BREATHE EASY NC: BECOMING TOBACCO FREE

1-Day Virtual Training

8.75 CME hours

November 17, 2021, 12:00-5:00pm EST

This training will assist behavioral health leaders and practitioners to make behavioral health facilities 100% tobacco free and with improving their skills to provide evidence-based tobacco use treatment concurrently with mental health and substance use disorder treatment. Providers will receive the information and skills they need to prepare for the NC Medicaid tobacco-free policy requirement that goes into effect July 1, 2022.

Participants will learn about FDA approved tobacco treatment medication with behavioral interventions and how to deploy them in behavioral health settings. Participants will engage with professional ethics and learn how they fit with tobacco use treatment, as well as trauma-informed tobacco use treatment and policies. Then, through experiential training methods, participants will develop policy planning and implementation skills as well as quality improvement skills to integrate tobacco treatment into the behavioral health system.

COURSE SCHEDULE

Part 1: Prerecorded Video Modules on Tobacco Treatment and Control and Standard of Care Evidence-Based Tobacco Treatment (available online; approximately 4 hours):

- ▲ Why Here/Why This/Why Now?
- ▲ Combination Strategies for Tobacco Treatment
- ▲ Pharmacotherapy Agents
- ▲ Assessments
- ▲ Cognitive Behavioral Therapy
- ▲ Motivational Interviewing
- ▲ Foundational Behavioral Therapy in Special Populations
- ▲ The Roadmap to Successful Change

Part 2: Live, virtual course session (via Zoom), November 17, 2021, 12:00-5:00pm:

- ▲ Welcome and introductions
- ▲ An Ethical Approach to Tobacco Treatment in Mental Health and Substance Use Disorder Settings

- ▲ Motivational Interviewing w/interactive discussion about ethics
- ▲ Moderated panel presentation
 - Dr. Susan Saik-Peebles, Medical Director, Office for Behavioral Health and IDD, NCDHHS
 - Mary Ward, President, McLeod Addictive Disease Center
 - Brian Coon, Director of Clinical Programs, Pavillion
- ▲ Tobacco Free Policy – The Roadmap Demystified: An Interactive Session
- ▲ Deeper Dive into What Works: Integrating Policy and Treatment in Diverse Behavioral Health Settings
- ▲ How QuitlineNC works/How to do referrals to QuitlineNC
- ▲ Practical Approaches and Cases
- ▲ Summary and Conclusion

The cost for the training is **\$150 for NC healthcare professionals** (\$300 for participants outside of NC) and includes all course materials, application processing, access to the online course site, and the live, virtual session. Scholarships for healthcare professionals who serve North Carolina are sponsored by the NC Division of Public Health.

Anyone, regardless of geographic region, is eligible to participate in the course. Some content is designed specifically to assist NC behavioral health facilities go tobacco free; however, the majority of the course content is applicable across many settings.

Course fees are payable by credit card only. Please register via our website at www.dukeunctts.com.

Have more questions about this training?

Contact us at cttsprogram@duke.edu or 919-668-5042.

- ▲ [Register here](#)

TOBACCO-RELATED POLICY REQUIREMENTS GO INTO EFFECT ON JULY 1, 2022

Tobacco-related policy requirements for Standard Plans and Tailored Plans contracted medical, behavioral health, intellectual/developmental disabilities (IDD), and traumatic brain injury (TBI) service providers will go into effect on July 1, 2022. These requirements will apply to both Medicaid and state-funded service providers. The Department will work with the Standard Plans and Tailored Plans to include these requirements, as appropriate, in advance of July 1, 2022.

Secondhand smoke is a well-documented danger to health. No one should be exposed to secondhand smoke when they access care or on the job. Research shows that most people who use tobacco want to quit. An environment free from triggers to use tobacco products is necessary to support service recipients whose goal is to become tobacco free. People with behavioral health

disorders die disproportionately from tobacco-related illness. Among people who try to become tobacco free, only a small minority receive evidence-based care to assist them.

Therefore, starting July 1, 2022, NC Medicaid Managed Care Standard plans and Tailored Plans will require contracted providers, not including retail pharmacies, and with the exception of the residential provider facilities noted below, to implement a tobacco-free policy covering any portion of the property on which the participating provider operates that is under its control as owner or lessee, to include buildings, grounds, and vehicles.

A tobacco-free policy includes a prohibition on smoking combustible tobacco products and the use of non-combustible tobacco products, including electronic, heated and smokeless tobacco products, and/or nicotine products that are not approved by the FDA as tobacco treatment medications, as well as, prohibiting participating providers from purchasing, accepting as donations, and/or distributing tobacco products to the individuals they serve.

Intermediate care facilities for individuals with intellectual disabilities (ICF-IID) and IDD residential services subject to the Home and Community Based Services (HCBS) Final Rule are exempt from this requirement. However, starting July 1, 2022, the following policies shall be required in these settings:

- 1.** Indoor use of tobacco products shall be prohibited in all provider owned/operated contracted settings.
- 2.** For outdoor areas of campus, providers shall:
 - ▲ Ensure access to common outdoor space(s) that are free from exposure to tobacco use; and
 - ▲ Prohibit staff/employees from using tobacco products anywhere on campus

As part of policy implementation, Standard Plan and Tailored Plan contracted service providers should integrate tobacco use treatment and support into all settings. Evidence-based tobacco use treatment is defined as a combination of FDA approved medications and counseling.

To support this policy change, the North Carolina Division of Public Health Tobacco Prevention and Control Branch partners with the Division of Mental Health/Developmental Disabilities/ Substance Abuse Services and the Division of Health Benefits to coordinate [Breathe Easy NC: Becoming Tobacco Free.](#)

Breathe Easy NC: Becoming Tobacco Free is a statewide initiative to support people with behavioral health conditions and IDD/TBI in becoming tobacco free, by working with service providers to integrate tobacco use treatment and make campuses tobacco free.

- ▲ Standard Plan and Tailored plan contracted service providers should make use of this resource to ensure they have a transparent, well-organized, and evidence-based tobacco-free policy and tobacco use treatment implementation process.

- ▲ Making an organization's campus tobacco-free is a process that should involve all organization stakeholders: service recipients or clients, leadership, and staff. Implementing a tobacco-free policy can take 3-6 months, occasionally longer.
- ▲ Providers should integrate tobacco use treatment or referrals to tobacco use treatment resources, such as QuitlineNC, prior to policy implementation.

Providers can visit BreatheEasyNC.org for technical assistance and training on tobacco-free policy implementation and evidence-based tobacco use treatment or contact their county's [regional or local tobacco control staff](#) directly. They can assist with every step of this process.

If you have any questions, check out these Frequently Asked Questions (FAQ) webpages from Breathe Easy NC:

- ▲ [NC Standard and Tailored Plan Tobacco-Free Requirement FAQ for Behavioral Health & Medical Provider Agencies](#)
- ▲ [NC Standard and Tailored Plan Tobacco Related Policies FAQ for Organizations that Serve People with IDD or TBI](#)
- ▲ [NC Standard and Tailored Plan Tobacco-Free Requirement FAQ for Clients, Families and Staff](#)

For additional questions, please contact Stephanie Gans at stephanie.gans@dhhs.nc.gov.

IMPORTANT NC TOPPS INFORMATION

Any members that transitioned from Trillium to a Standard Plan no longer need NC TOPPS updates. These members that are no longer receiving services through the LME/MCO will need to have an episode completion done in NC TOPPS as soon as possible.

Please see the [updated NC TOPPS Guidelines](#), pages 7 and 11 for additional information.

PARENT LEADERSHIP TRAINING

Trillium and the Division of Public Health, children and youth branch will be providing "Parent Leadership Training" which includes selectable modules to match the leadership interests and needs of your families of children with special needs groups. The modules are taught in 1.5 hour modules by trained, peer parents in small group formats.

- ▲ See [flyer for more information](#).

DISASTER RESPONSE UNIT UPDATES

HURRICANE PREPAREDNESS TIP #6

FEMA encourages everyone to be aware of what disasters and hazards can occur within your community. Whether it's flooding, hurricanes or another disaster, technology can make it easier to prepare for disasters. Review this [FEMA webpage](#) to be tech ready.



Trillium Health Resources is focused on preparing members and provider agencies for Hurricane Season during the COVID-19 pandemic. Disasters can happen anytime, but proactive measures can help reduce their impact. To help develop your disaster plan for hurricanes, please refer to our webpage [here](#). Our Roadmap2Ready campaign was developed by our Community Crisis and Disaster Response team with the intention of connecting members and providers to reliable resources that assist with preparing for a hurricane. Our team collaborates with state, county, and community programs within our 26 county catchment area to identify gaps and needs related to inclusive disaster response.

Please inform Trillium of any service provision or operational changes as a result of a tropical storm or hurricane by completing the **Changes to Provider Operations form**. This form is located on the [Community Crisis and Disaster Response webpage](#) under the "Provider" tab when a storm is approaching. Our goal is to stay up to date about changes to service provision and to assist with continuing to best serve members.

VALUED PROVIDERS SEAL PROGRAM

The image features the Trillium Health Resources Valued Providers Seal Program logo, which consists of several circular seals stacked together. The top seal is gold and says "INTEGRATED CARE PROVIDER SEAL PROGRAM". Below it are four smaller colored seals (green, blue, purple, red) with the word "SEAL" repeated. To the right, a photograph shows an elderly man and a younger woman smiling and laughing together. A green banner at the bottom right contains the text: "Apply today to receive your seal in Trillium's Valued Providers Program".

www.TrilliumHealthResources.org

Visit the [Valued Providers Seal Program](#) web page for more information about the Contracted, Comprehensive Behavioral Health, Large Agency, Evidenced-Based Treatment, Comprehensive I/DD and Integrated Care Provider Seals.

After receiving this recognition, sharing such dedication and innovative care should be as easy as possible. The [Valued Providers Seal Program Tool Kit](#) is designed for just that. This resource provides tips for sharing news of provider seals on websites, social media, newsletters, and emails, along with pre-written posts and messages.

Trillium can see the impact providers make on our members and communities. We hope the tool kit serves to ensure those members and communities can see it as well.

Contact us at SealProgram@TrilliumNC.org for questions about the Valued Providers Seal Program. Providers can apply for one or multiple seals!

Any questions about this Communication Bulletin *that does not already have an email listed for questions from that specific section*, may be sent to the following email: NetworkManagement@TrilliumNC.org. These questions will be answered in a Q&A format and published on Trillium's website.