



## Guidance for Durable Medical Equipment (DME) Providers

Under Tailored Plan, Durable Medical Equipment (DME) is considered a physical health benefit. Beginning 7/1/24, instead of submitting DME physical health claims through NCTracks for Trillium Tailored Plan members, providers should now submit their claims and authorizations\* using the methods below.

### Verify Member Eligibility

Possession of a Trillium Tailored Plan insurance card is not a guarantee of coverage.

- Verify member eligibility using NCTracks.
- Please note the Medicaid ID# on the Trillium card is the same Medicaid ID for the member in NCTracks.

201 West First St.  
 Greenville, NC 27858  
[TrilliumHealthResources.org](http://TrilliumHealthResources.org)

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Name: John Doe  
 Medicaid #: 912345678A  
 DOB: 11/01/1995  
 Effective Date: 07/01/2020

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PCP Name: New Hanover Medical Center  
 9176 Maple Ln.  
 Wilmington, NC 27609  
 910-336-1908

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Rx: PerformRx      RxBIN: 019595      PCN: PRX10811

### IMPORTANT CONTACT INFORMATION

<b>For Providers:</b> Authorizations and Pre-Certification: 1-855-250-1539 Pharmacy Prior Authorization: 1-855-662-0277 Out of Network Providers: 1-855-250-1539 Filing Claims: Please visit <a href="http://TrilliumHealthResources.org/providers/provider-documents-forms">TrilliumHealthResources.org/providers/provider-documents-forms</a> and click "Medicaid Direct & Tailored Plan Claims Submission Protocol"	<b>For Members:</b> Member Services and Nurse Line: 1-877-685-2415 (TTY 711) Behavioral Health Crisis Number: 1-888-302-0738 Member Pharmacy: 1-866-245-4954 If you suspect a doctor, clinic, hospital, home health service or any other kind of health provider is committing Medicaid fraud, report it. Call 1-919-881-2320. For a full list of services and benefits available, please visit <a href="http://TrilliumHealthResources.org">TrilliumHealthResources.org</a>
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Trillium Physical Health Claim Submission	Trillium Physical Health Authorization Submission
<p><b>Portal</b>            Providers can access the Trillium Physical Health portal online: <a href="https://provider.trilliumhealthresources.org/">https://provider.trilliumhealthresources.org/</a></p> <p><b>EDI/Clearinghouse</b>            CCH utilizes the clearinghouse Availity. As long as the provider's clearinghouse has a connection to Availity, then the claim can be passed on to CCH. CCH's Medical Payer ID is 68069.</p> <p><b>Mail:</b>            P.O. Box 8003 Farmington, MO 63640-8003</p>	<p><b>Portal (Preferred)</b>            Providers can access the Trillium Physical Health portal online:  <a href="https://provider.trilliumhealthresources.org/">https://provider.trilliumhealthresources.org/</a></p> <p><b>Phone</b></p> <ul style="list-style-type: none"> <li>• Outpatient Requests 855-250-1539</li> </ul> <p><b>Fax</b></p> <ul style="list-style-type: none"> <li>• Use the <a href="#">Trillium PA Fax Form (PDF)</a> and submit outpatient requests to: 833-875-0930</li> </ul>

### Provider Portal Setup

Trillium Physical Health Portal Setup:

- To access the Trillium Physical Health Portal, contracted providers must identify an individual who will serve as the Portal Account Manager.

- The Account Manager should follow the prompts using the portal link to create an account, validate their email, and register the Tax ID Number (TIN)
- After registering, email your assigned [Provider Engagement Administrator](#) email [ProviderEngagement@cch-network.com](mailto:ProviderEngagement@cch-network.com) to request verification of your portal registration request and assignment as Portal Account Manager.

\*Please note: To alleviate provider administrative burden during the launch of Tailored Plans, Trillium will initiate a No Prior Auth period for Medical Services rendered between 7/1/2024 and 1/31/2025.

- For additional details, please review Trillium [Clinical Communication Bulletin 66](#)

### Medical Necessity Guidance

A face-to-face encounter (can be through telehealth) is required, with the referring physician and the member, that is directly related to the reason the member requires the medical equipment (for initiation of the equipment/supplies, not every Prior Auth). The physician must include clinical findings, from the visit, incorporated into a written or electronic document in the member’s medical record. There must be a clinical correlation between the DME and the member’s medical disability. (Source: CMS). Please also refer to the applicable clinical coverage policies for additional details.

Refer to the [Durable Medical Equipment Fee Schedules](#) for the rates associated with the equipment, supplies and services. Additionally, the clinical coverage policies listed can be references for information regarding benefit limitations and additional billing information.

### Clinical Coverage Policies

- [Physical Rehabilitation Equipment and Supplies, 5A-1 \(PDF\)](#)
- [Respiratory Equipment and Supplies, 5A-2 \(PDF\)](#)
- [Nursing Equipment and Supplies, 5A-3 \(PDF\)](#)
- [Orthotics and Prosthetics, 5B \(PDF\)](#)

### Important Contact Information

Trillium Provider Services	1-855-250-1539
Trillium Member Services	1-877-685-2415