



Provider Communication Bulletin #179 August 20, 2026

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Vaya Partners Merger Updates

Provider Merger Information Sessions

Vaya Health and Partners Health Management are preparing to merge effective Oct. 1, 2026, to form Vaya Partners. Stay informed throughout the transition by attending our weekly Provider Merger Information Sessions, held 2-3 p.m. on Mondays. Join subject matter experts, including utilization management and claims staff, for important updates and answers to common questions. Registration is not required.

Join the next session from 2-3 p.m. Aug. 24, 2026, [on Microsoft Teams](#).

View the [full session schedule, meeting links and recordings](#) on the Vaya Partners website.

Provider Contracting

All network providers contracted with Partners but not Vaya, and who are in good standing with both organizations, should have received contracts by July 31, 2026. If you have not received a contract, email contracts@partnersbhm.org and include the provider's legal name, National Provider Identifier (NPI) number, legal signatory full name, title, email address and phone number. Providers who are currently contracted with Vaya will receive contract amendments in the third and fourth weeks of August.

Website, Provider FAQ Form Available

Vaya and Partners are launching a new website in advance of the two organizations merging on Oct. 1, 2026. To learn more, visit the [Vaya Partners webpage](#) and [Provider FAQ](#). To get answers to your questions, submit our [Provider FAQ form](#).

2026 Perceptions of Care Survey

The 2026 Perception of Care Survey administration period is Aug. 10 – Sept. 18, 2026. Partners is asking all mental health and substance use providers to administer as many surveys as possible to members who received services from July 2025 through June 2026, including Intensive In-Home (IIH), Residential, Assertive Community Treatment Team (ACTT) and substance use disorder (SUD) services.

Members who receive enhanced services are preferred, but providers may survey other eligible members.

[View participation goals, administration options, and survey requirements on our website.](#)

Partners will share reminders and participation updates throughout the survey period. For questions, email Andrew Schrag at ASchrag@PartnersBHM.org.

Physical Health Updates

The Partners Behavioral Health and Intellectual/Developmental Disabilities Tailored Plan collaborates with Carolina Complete Health (CCH) to support physical health providers participating in the Tailored Plan. The [Partners/CCH Special Bulletin](#) offers valuable guidance on enrollment, claims processing, authorizations and compliance requirements.

Policy 10A: Outpatient Specialized Therapy Services

Effective July 1, 2026, NC Medicaid updated the [Clinical Coverage Policy 10A for Outpatient Specialized Therapy \(OST\) Services](#). Key changes include:

- **Telehealth services:** A major change is the addition of occupational therapy (OT), speech therapy (ST), and physical therapy (PT) telehealth services for select Current Procedural Terminology (CPT®) codes. Telehealth eligibility requirements are outlined in Subsection 3.1.1 of CCP 10A, and telehealth-approved CPT codes are listed in Attachment A, Section C.
- **Standard of Care Requirements:** Providers must deliver telehealth services at the same quality and standard as in-person care, and beneficiaries may request in-person services at any time. If a provider cannot deliver the same standard of care through telehealth as they would during an in-person visit or cannot accommodate a member's request for in-person services, the beneficiary must be discharged. Upon discharge, therapists must identify any need for follow-up care or referrals (Subsection 3.2.1.9).
- **Same-Day Service Restrictions:** The policy removes restrictions that previously prohibited specialized therapy services on the same day a local education agency (LEA) provided services. This change aligns with federal regulations (34 CFR 300.154) and IDEA requirements.

Providers should also remember:

- All claims must comply with Medicaid National Correct Coding Initiative (NCCI) requirements.
- Modifier **GT** must be appended to CPT codes when services are delivered via interactive audio-visual telehealth.

Policy 1A-20: Sleep Studies and Polysomnography Services

Effective July 1, 2026, [Clinical Coverage Policy 1A-20 \(Sleep Studies and Polysomnography Services\)](#) was updated to expand medical necessity criteria and coverage for sleep studies. Key changes include:

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- Signs and symptoms associated with conditions listed in Section 3.2.1(a)1 now qualify for supervised polysomnography or sleep studies.
- Additional conditions that meet medical necessity criteria include:
 - Restless legs syndrome.
 - Chronic insomnia when criteria in subsection 1.1.1 are met.
 - Snoring accompanied by disturbed sleep patterns, excessive daytime sleepiness, unexplained awake hypercapnia, apneic breathing, cognitive impairment or excessive fatigue.
 - A neuromuscular disorder and unresolved sleep symptoms after evaluation of sleep history, hygiene and diaries.
- Facility-based sleep studies are covered for diagnosing obstructive sleep apnea (OSA) when the beneficiary cannot use home testing equipment or when home equipment is unavailable.
- Prior authorization is no longer required for unattended (unsupervised) home sleep tests.
- Providers must document compliance with Clinical Coverage Policy 1A-20 criteria (Sections 3.1–3.4) in the beneficiary record.

Policy 1E-5: Obstetrical Services

AMA 2027 Maternity CPT Code Transition

Effective **Jan. 1, 2027**, all current maternity CPT codes, including global maternity billing codes, will be removed from the fee schedule and replaced with new maternity billing codes issued by the American Medical Association (AMA). Providers should review the AMA's list of new, revised, and deleted maternity codes in preparation for implementation.

Transition Period, beginning Sept. 1, 2026

To facilitate a smooth transition, NC Medicaid Direct and Managed Care providers are encouraged to bill **Evaluation and Management (E/M) codes 99202–99215 with modifier TH** for prenatal and postpartum services when:

- The beneficiary's first prenatal visit occurs after pregnancy confirmation.
- Antepartum services are provided for pregnancies in which delivery and/or postpartum care is expected to occur **on or after Jan. 1, 2027**.

Providers should also report the appropriate **ICD-10-CM pregnancy diagnosis code and gestational age (weeks of gestation)**. Documentation must support the billed E/M level based on CPT medical decision-making or time requirements.

Services Completed Before Jan. 1, 2027

For pregnancies with a postpartum visit completed **before Jan. 1, 2027**, providers may continue using current maternity billing codes, including global codes and antepartum-only codes **59425** and **59426**. Health plans may not require providers to bill individual E/M codes instead of the existing bundled maternity codes for dates of service before Jan. 1, 2027.

[Clinical Coverage Policy 1E-5: Obstetrical Services](#) is being updated to reflect these maternity coding changes.

Provider Training and Office Hours

Partners and CCH host office hours for Partners Tailored Plan physical health providers on the first Tuesday of each month at noon.

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Providers are encouraged to [register and submit questions in advance](#).

Archived sessions are available on CCH's [Partners Tailored Plan Provider Resources](#) page.

Questions

For more information related to Physical Health Utilization Management, contact PHUMQuestions@PartnersBHM.org.

Pharmacy Updates

Aspirin Coverage for Preeclampsia

Effective July 1, 2026, NC Medicaid began covering prescription aspirin 81 mg for beneficiaries at risk of preeclampsia. Partners uses medical claims and enrollment information to reduce administrative burden, but prior authorization may be required to support the diagnosis.

Aspirin will remain not covered for all other indications, including primary or secondary prophylaxis for cardiovascular disease.

Reducing Prior Authorizations

Partners is working to reduce the administrative burden associated with prior authorizations. Many non-preferred medications have clinically similar preferred alternatives available without prior authorization. In some cases, NC Medicaid prefers the brand-name product over the generic alternative.

To help expedite care, prescribers may include a note asking the pharmacy to fill the brand-name, generic version, or formulation preferred by Medicaid. This may prevent the pharmacy from needing to request prior authorization.

When clinically appropriate, switching members to a preferred medication on the [NC Medicaid Preferred Drug List](#) (PDL), may reduce prior authorizations for prescribers.

Selected examples include:

Preferred	Non-preferred
Adapalene GEL Differin GEL PUMP Differin LOTION/CREAM	Adapalene CREAM (generic for Differin) Adapalene GEL PUMP (generic for Differin)
Clindamycin LOTION (generic for Cleocin T) Clindamycin phosphate PLEDGET/SOLUTION (generic for Cleocin T)	Cleocin T Lotion Clindacin ETZ Pledget/Kit/P Foam/P Pledget/PAC Kit Clindagel Gel Clindamycin phosphate FOAM (generic for Evoclin foam) Clindamycin phosphate GEL (generic for Clindagel) Evoclin Foam
Clindamycin-benzoyl peroxide GEL (generic for Benzaclin, Neuac)	Clindamycin-benzoyl peroxide GEL PUMP (generic for Acanya, Benzaclin, Onexton) Neuac Gel/Kit

GCQI Seeks MSHU Co-Chair

The Global Continuous Quality Improvement (GCQI) committee is seeking a provider co-chair to represent the mental health and substance use (MSHU) population before its next quarterly meeting at 9:30 a.m. Sept. 4, 2026.

The MSHU co-chair will share responsibility for:

- Setting agenda priorities
- Representing provider perspectives
- Reporting updates to other committees
- Facilitating quarterly GCQI meetings

Co-chairs serve a one-year term that can be renewed for an additional year.

Provider participation helps ensure provider perspectives inform quality initiatives, barriers are identified, and outcomes improve across mental health, substance use, and intellectual/developmental disabilities populations.

During meetings, Partners' Quality Management and Population Health departments provide updates and address quality improvement activities.

Providers interested in participating in GCQI or serving as co-chair should email Tamikka Woods at TWoods@PartnersBHM.org.

NC-TOPPS Updates

Submission Reminder

Providers should submit an initial interview even if the deadline has passed so required update interviews can be completed.

NC-TOPPS has identified a decrease in three-month update interview submissions and continues to monitor provider performance. Partners may contact providers who fall below the submission target to discuss barriers and identify needed support.

Superuser Requirement

Each provider agency location is *required* to have at least one Superuser assigned in NC-TOPPS. Superusers are responsible for adding users to their provider agency location and removing users who are no longer with the agency.

Visit the Training & Resources section of the [Partners NC-TOPPS page](#) for Superuser tools, guidance and training.

Kudos Corner

The NC-TOPPS Kudos Corner has been updated to recognize providers submitted the highest percentage of initial interviews required during the third quarter of fiscal year 2025-26.

The update also includes a new quarterly featured topic with additional information for providers. Visit the [NC-TOPPS Kudos Corner](#) to see the featured providers and review the latest topic.

TEACCH Training Opportunities

Registration is open for the UNC TEACCH Autism Program's fall conference. The hybrid event will explore approaches that honor neurodiversity and promote authentic well-being.

The conference centers lived experience, evidence-informed strategies and collaborative solutions that empower autistic individuals to thrive in classrooms, clinics, workplaces and communities.

Fall Conference

45th UNC TEACCH Autism Program Conference

Thriving with Autism: Strengthening Neuroaffirming Practices

Date: Thursday-Friday, Oct. 15-16, 2026

Time: 8:00 a.m. - 4:15 p.m.

Format: Virtual and in person options available

Location: The William and Ida Friday Center for Continuing Education, 100 Friday Center Drive, Chapel Hill, NC 27517

View [conference details and register](#).

Additional Training

The UNC TEACCH Autism Program offers additional training opportunities, including:

- Autism Diagnostic Observation Schedule, 2nd Edition (ADOS-2)
- Strategies for Success in General Education
- Fundamentals of Structured TEACCHing

View upcoming dates and registration information on the [TEACCH Training Calendar](#).

Claims Information

To help avoid payment delays, duplicate submissions, recoupments and misrouted requests, providers are reminded to review the following claims guidance.

Avoid Claim Delays

Partners has observed an increase in claims status inquiries from clearinghouses. Providers using a clearinghouse for claim reconciliation must ensure that their staff has access to remittance advice. Providers are also reminded to follow these claim submission requirements:

- Submit each benefit plan on separate claims.
- Include all diagnosis codes on claims. Diagnosis codes help Partners measure member health, identify areas of risk and evaluate the quality of care.

Prevent Duplicate Claims

Partners has recently observed an increase in duplicate claims. To help prevent duplicate submissions, providers should:

- Check claim status before resubmitting.
- Allow enough processing time to avoid premature resubmissions.
- Submit corrections correctly using the proper frequency code.

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- Review denial reasons and fix issues before resubmitting.
- Use claim tracking tools to monitor status and next steps.

Submit Physical Health Paper Claims

Physical Health paper claims should be mailed to:

Partners Health Management
Attn: Claims
PO Box 8002
Farmington, MO 63640-8002

Respond to EOB Requests

Partners requests copies of Explanation of Benefits (EOB) documents for members/claims submitted with Coordination of Benefits. Requests will be sent by email from Partners Claims staff. When an EOB is requested:

- Submit the information by secure email before the date specified in the request.
- If a response is not received, the original claim payment will be recouped.

Follow the Claims Reconsideration Process

Partners has seen an increase in claims reconsideration requests sent to the Provider Dispute email inbox, which may delay processing. To ensure requests are handled quickly and correctly, providers should follow the Claims Reconsideration Process outlined on the Partners website. Providers should:

- Not send reconsideration requests to the dispute inbox.
- Follow the steps listed under the “Claims Reconsideration Process” section on the Claims and Rates Information page.
- Access Availability® in ProviderCONNECT under the “Physical Health Claims” Quick Links box for Physical Health claims.

For all claims-related questions, providers should contact the Claims Department at ClaimsDepartment@PartnersBHM.org. To avoid delays in receiving a response, do not contact individual claims staff directly.

Check Eligibility and Enrollment

For eligibility and enrollment questions, providers are encouraged to contact the Eligibility and Enrollment Department at EligibilityEnrollment@PartnersBHM.org.

To request enrollment, providers should visit Alpha+ Home Page > Enrollments. For guidance, refer to University > Provider Portal Handbook > Enrollments.

If additional enrollment training is needed, email EligibilityEnrollment@PartnersBHM.org to schedule one-on-one training. Providers must have Microsoft Teams screen-sharing capabilities for more specific and in-depth training.

Request State Benefit Health Plans

Providers now have the option to request appropriate State Benefit Health Plans (AMI, ASTER, etc.) with a future date. Providers may request this 60 days prior to the current end date.

IRIS Incident Reporting Reminders

All providers of publicly funded services are required to submit Level II and Level III incident reports in the [North Carolina Incident Response Improvement Center](#) (IRIS) within 72 hours of becoming aware of the event. This applies to:

- **Category A Providers:** Providers of publicly funded services licensed under NC General Statutes 122C, except hospitals.
- **Category B Providers:** Providers of publicly funded non-licensed periodic or community-based mental health, developmentally disabled and/or substance abuse services.

Level III Incident Notifications

- All Level III incidents must be reported to Partners immediately. For Partners members, notifications should be emailed to IRIS@PartnersBHM.org.

IRIS Training

Partners offers an on-demand [Incident Response Improvement System Demonstration](#) training for providers.

For additional technical assistance related to IRIS, please email IRIS@PartnersBHM.org.

[Read the full requirements and access the trainings here.](#)

Clinical Coverage Policies

Utilization Management uses clinical coverage policies to administer benefits and determine medical necessity. Service definitions and clinical policies guide when and how services are covered for physical health, behavioral health, substance use disorders (SUD) and intellectual/developmental disabilities (I/DD). Read more on the [Service Definitions](#) page on the Partners Provider Knowledge Base. For questions, email UMQuestions@PartnersBHM.org.

Recent Provider Alerts

- **Aug. 19, 2026:** [NCDHHS Extends Deadline for Direct Care Worker Survey](#)
- **Aug. 12, 2026:** [NC Direct Care Worker Wage and Rate Analysis Provider Cost & Wage Survey](#)
- **Aug. 6, 2026:** [Research Based Behavioral Health Treatment \(RB-BHT\) Clinical Coverage Policy 8F Update](#)
- **July 31, 2026:** [Partners Pauses New Contracting Requests](#)
- **July 31, 2026:** [Provider Contracting Updates](#)

Training Resource and Collaborative (TRAC)

TRAC offers a centralized cross-functional selection of required training, collaboratives and events. TRAC provides a centralized hub for cross-functional required training, collaboratives and events. Please note: the way you register for TRAC trainings and meetings has recently changed. [Click here to view what is coming up and register.](#)

Community Training

All Trainings are Virtual via Zoom and are two hours unless otherwise specified. Participants may not be admitted to the training if joining more than 15 minutes after the training begins. Participants who request a certificate will need to be on camera during the training. For more information, contact: Amber Matthews, AMatthews@PartnersBHM.org.

Non-Suicidal Self-Injury Lunch and Learn

Sept. 1, 2026 | 10 a.m. – noon ([Register](#))

Learn about Non-Suicidal Self-Injury, what causes people to injure themselves, warning indicators and what we can do when we encounter someone who self-injures.

Substance Use: Overview, Recovery & Resources

Sept. 2, 2026 | 10 a.m. – noon ([Register](#))

This training explains substance use disorder, its health impacts and effects of common substances. Participants learn how to recognize signs, support recovery and connect people with helpful local and online resources.

Risk and Resiliency: Buffering Toxic Stress Modules 1-5

Sept. 3, 2026 | 10 a.m. – noon ([Register](#))

Risk and Resilience: Buffering Toxic Stress Modules 1-3 – This introductory training provides information about how early childhood stress and trauma can result in negative lifelong outcomes in learning, behavior and health. We discuss interventions to buffer the impact of toxic stress.

Risk and Resilience: Buffering Toxic Stress Modules 4-5 – This is a follow-up to Modules 1-3. Module 4, Limbic Calming, teaches how to help children calm their limbic systems. In Module 5, Cortical Coping, we will learn about healing the cortical brain to develop active coping skills such as impulse control and problem solving.

Wellness and Wellbeing

Sept 3, 2026 | 2 – 4 p.m. ([Register](#))

Let's get together and talk about developing habits that support a healthier, more balanced life. This interactive training touches on mindfulness, resilience, stress-reduction techniques, and self-care strategies. We will discuss practical tools to improve daily functioning and long-term wellbeing.

Nutritional Impact on Mental Health

Sept. 4, 2026 | 10 a.m. – noon ([Register](#))

Join us for an insightful training on the intricate relationship between eating behaviors and mental health. This interactive training will explore how our dietary choices and habits can profoundly influence our mental well-being, emphasizing the crucial connection between nutrition and mental health.

Darkness to Light: Child Safety Foundations

The Darkness to Light training provides education about child sexual abuse and the steps you can take to prevent, recognize and react responsibly to child sexual abuse; participants learn proactive steps to protect children from this significant risk.

From Bystanders to Upstanders

Sept. 4, 2026 | noon – 1 p.m. ([Register](#))

Learn to become an upstander who chooses to act when they see warning signs, boundary violations or moments where children may be vulnerable. This training teaches participants practical skills for protecting children. *This training is one hour.*

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Preventing Child Sex Trafficking

Sept. 11, 2026 | 10 a.m. – noon ([Register](#))

Child sex trafficking, also known as commercial sexual exploitation of children (CSEC), is any sexual activity involving a child for which something of value is given or promised. This training teaches participants about the root cause of CSEC and why preventing sexual abuse is important to reducing the risk of children being sexually trafficked. *This training is for 1.5 hours.*

Salud Mental 101

Sept. 4, 2026 | 6:30 – 8:30 p.m. ([Register](#))

Aprenda sobre el bienestar mental, los posibles signos y síntomas de los desafíos de salud mental, y algunos de los trastornos de salud conductual más comunes. El entrenamiento también incluye información sobre el tratamiento y qué hacer en caso de una crisis.

Hypertension

Sept. 8, 2026 | 2 – 4 p.m. ([Register](#))

This training provides an overview of high blood pressure, including prevention, early detection, risk factors and complications. Participants learn self-management strategies and how to use community and online resources to support heart health.

Women's Health

Sept. 9, 2026 | 10 a.m. – noon ([Register](#))

During this training we will discuss women's health topics across the lifespan from adolescent to senior years. The focus of this training is to highlight the cumulative experience of reproductive, physical and mental health for women.

Question, Persuade, Refer (QPR) Suicide Prevention

Sept. 9, 2026 | 2 – 4 p.m. ([Register](#))

This evidence-based training teaches the skills to recognize warning signs of suicide and intervene in a suicide crisis. "Ask a question, save a life." *Disponible en Español.

Active Listening/De-escalation

Sept. 15, 2026 | 2 – 4 p.m. ([Register](#))

This training focuses on active listening skills, empathy and habits to keep yourself and other people safe. There will be discussion about how our own experiences impact our ability to assist others in high-stress situations.

Emotional Intelligence (EQ) Essentials

Sept. 16, 2026 | 10 a.m. – noon ([Register](#))

This training introduces the core components of emotional intelligence and teaches practical skills to manage emotions, improve communication and build strong relationships in daily life and work.

Diabetes 101

Sept. 17, 2026 | 10 a.m. – noon ([Register](#))

Diabetes 101 training provides a comprehensive overview of diabetes, including its types, signs, symptoms, risk factors and potential complications. Participants will gain knowledge about diabetes prevention, self-management strategies and valuable resources to support those affected by the condition.

De-influencing Social Media: Connected, Not Consumed

Sept. 18, 2026 | 10 a.m. – noon ([Register](#))

This training explores how social media influences mental health, relationships, communication, and community well-

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being. Participants will examine the positive and negative impacts of social media use, including misinformation, comparison culture, polarization, and emotional regulation, along with practical strategies for healthier engagement.

Human Trafficking

Sept. 21, 2026 | 2 – 4 p.m. ([Register](#))

Human Trafficking is a global problem, even in the United States. Children may be susceptible to online predators. Learn about trafficking around the world and resources to keep our children safe.

Internet Safety

Sept. 22, 2026 | 10 a.m. – noon ([Register](#))

Children are spending more time online than ever before – learning, gaming, and connecting with friends. This training equips parents and caregivers with practical tools and knowledge to help children learn to navigate the internet safely and responsibly. Participants will learn about online risks, including inappropriate content, sextortion, and cyberbullying, as well as strategies for setting healthy digital boundaries.

Caring for the Caregiver

Sept. 22, 2026 | 2 – 4 p.m. ([Register](#))

Caring for a loved one can be meaningful, but it can also be physically and emotionally exhausting. This training explores the signs and symptoms of burnout, common stressors and the impact of prolonged stress on overall well-being. Participants will gain practical tools for setting healthy boundaries, managing stress and sustaining themselves while continuing to care for others.

Community Café

Sept. 23, 2026 | 10 – 11 a.m. ([Register](#))

September's topic is "Shared Strength: The Role of Peers in Recovery." What is a peer? How does someone become a peer? How can peers help with recovery? Learn about who can be a peer and what the process is. We will hear from peers in a variety of settings.

Maternal Mental Health

Sept. 24, 2026 | 2 p.m. – 4 p.m. ([Register](#))

This training delves into the nuances of maternal mental health, perinatal mood disorders, and practical tools for support. Explore the essential intersection of mental health, pregnancy/postpartum care, and social determinants of health while gaining insights that contribute to creating a nurturing environment for mothers.

Mental Health 101

Sept. 28, 2026 | 2 – 4 p.m. ([Register](#))

Learn about mental wellness, potential signs and symptoms of mental health challenges and some of the common behavioral health disorders. The training also includes information about treatment and what to do in a crisis.

Introduction to Child and Family Team (CFT) Training (Part 1)

Nov. 3, 2026, and Nov. 4, 2026 | 9 a.m. – 4 p.m. ([Register](#))

Rowan-Cabarrus Community College Advance Technology Center
525 John Snow Road
Kannapolis, NC 28081

This System of Care training is a two-day, 11-hour experiential training. Child and Family Team training provides an overview from the family's perspective. The training seeks to reinforce the idea of "one family, one plan" by addressing CFT through the lens of multiple systems. *Offered quarterly either virtually or in-person.*