

# Better Together

## Vaya Partners Merger FAQs: Providers

### General Merger Information:

#### Why are Vaya Health and Partners Health Management merging?

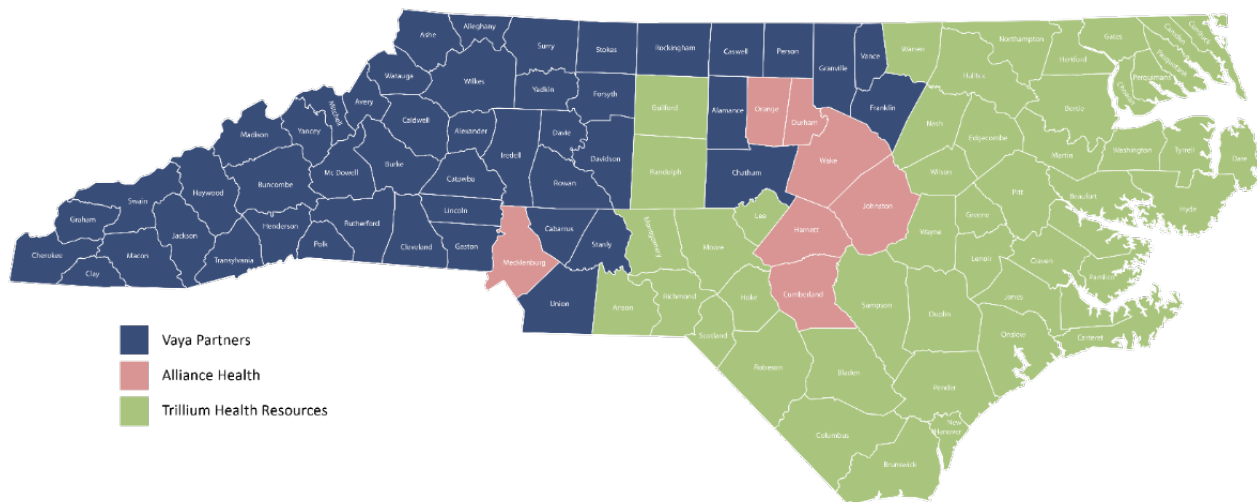
Rooted in a shared belief that we will be stronger, more sustainable, and better positioned to serve members and communities together, Vaya Health and Partners are merging to strengthen North Carolina's public healthcare system and position the combined organization for long-term success.

#### When will the merger be effective and when will changes take place?

The merger will be effective Oct. 1, 2026, at which time the new organization will begin operating under the name Vaya Partners. The merger is effective following the approval of both organizations' Boards of Directors and the Secretary of the North Carolina Department of Health and Human Services (NCDHHS).

#### What counties will Vaya Partners serve?

Vaya Partners will serve 47 counties: Alamance, Alexander, Alleghany, Ashe, Avery, Buncombe, Burke, Cabarrus, Caldwell, Caswell, Catawba, Chatham, Cherokee, Clay, Cleveland, Davidson, Davie, Forsyth, Franklin, Gaston, Graham, Granville, Haywood, Henderson, Iredell, Jackson, Lincoln, Macon, Madison, McDowell, Mitchell, Person, Polk, Rockingham, Rowan, Rutherford, Stanly, Stokes, Surry, Swain, Transylvania, Union, Vance, Watauga, Wilkes, Yadkin, and Yancey.



## Leadership

### Who will lead Vaya Partners?

Vaya Partners will be led by a combined executive leadership team from both Vaya Health and Partners.

- Tracy Hayes will lead the combined organization as Area Director & Chief Executive Officer (CEO). Hayes is the current Area Director & CEO of Vaya Health.
- Libby McCraw will serve as Senior Deputy CEO. McCraw is the current CEO of Partners Health Management.
- Rachel Porter will serve as Deputy CEO. Porter is the current Deputy CEO of Partners Health Management.

Vaya Partners will be governed by a 28-member Board of Directors that includes members from each organization's existing Boards.

## Systems, Claims, and Billing

### Vaya Partners Claims Administration System

Vaya Partners will use Conduent HSP for processing claims. Vaya Health currently uses Conduent HSP. Because Vaya Health and Partners share many of the same providers, they are already loaded into the system and familiar with billing through Conduent.

The provider network teams will identify any Partners providers/sites that are not enrolled in the Vaya Health Conduent system and work to amend their contracts and ensure they are loaded and comfortable using the system before the Oct. 1 merger date.

### Claims and Billing

We do not anticipate interruptions to claims processing following the merger. Our team will diligently monitor the transition to ensure continuity and will promptly address any issues that arise.

Claims will be subject to an 18-month run-out period beginning Oct. 1 to support continued processing of historical claims following the transition. Accordingly, the claims adjustment and run-out period will remain open through March 31, 2028, after which no additional claim adjustments are expected to be processed under the legacy claims environment. Changes affecting all benefits plans will be reflected in NCTracks.

Vaya Partners will continue working to ensure providers have opportunities for technical assistance and clear guidance on the claims and billing process. Guidance and information are forthcoming, and once available, we will provide opportunities for provider education and support.

## Payor ID for Vaya Partners is 13010

All claims for dates of service on or after Oct. 1 must use Payor ID 13010, while legacy billing practices apply for dates before the merger.

## Provider Portal

Vaya Partners providers will use the secure portal currently found on the Vaya Health provider webpage at [providers.vayahealth.com](https://providers.vayahealth.com). Providers new to the Vaya Health Provider Portal and systems will receive a welcome packet with onboarding instructions after they sign their contract. We began offering Live Provider Portal trainings on Sept. 1.

## Portal Access Beyond Oct. 1

You will have access to the portals through March 31, 2028. To meet the timely filing guidelines, see below:

- Medicaid Direct and Tailored Plan claims must be submitted and received within 365 days of the date of service or the date of discharge.
- State Benefit claims must be submitted and received within 90 days of the date of service.

## Which claim form should be used for an Ambulatory Surgery Center (ASC) facility: CMS-1500 or UB-04?

Doctors, therapists, and other individual healthcare professionals use the **CMS-1500 form** to request reimbursement for medical care provided to patients.

Facilities like hospitals, nursing homes, hospices, and rehabilitation centers use the **UB-04 form** to request reimbursement for medical care provided to patients.

ASC facilities will continue to submit claims using the CMS-1500 form.

## Since Oct. 1 falls on a Thursday, should Vaya Partners claims reflect a start date of Oct. 1?

The claim's date of service determines who should be billed. Effective Oct. 1, we will become Vaya Partners for all claims with a date of service on or after Oct. 1, regardless of the billing period.

## Electronic Funds Transfer (EFT) Enrollment

Providers currently enrolled in EFT with both Partners and Vaya Health will not be required to complete a new EFT enrollment process. Vaya Partners will use the Vaya Health Payor ID 13010.

## How will In-Lieu of definitions work after Oct. 1?

Vaya Health and Partners have consolidated their lists of In Lieu of Services (ILOS) and have submitted them to the NCDHHS to become part of Vaya Partners' service array. Impact to providers will be minimal; however, there are some changes noted in a few of the definitions. More communication and training on ILOS will be forthcoming.

## Provider Contracts and Next Steps

Vaya Partners is working to ensure that preventing member disruption and provider abrasion is a priority during the merger process. We feel confident in our provider network and our Statewide Network. The network will remain closed for closed-network services.

**Non-Overlapping Medicaid Providers:** In July, Vaya Health began sending contracts for execution via DocuSign to Partners' network providers who were in good standing as of June 30, 2026. Those contracts went to providers who:

- Are not contracted as a network provider with Vaya Health.
- Were not previously terminated or suspended from the Vaya Health network.

**Overlapping Medicaid Providers:** Providers who are contracted with both Vaya Health and Partners and in good standing with both will receive a contract amendment updating the terms and conditions of the Vaya Health contract to align with changes to the NC Medicaid program requirements since the network contract was last signed or amended. Partners is offering weekly office hours for providers to join and ask questions.

**State-funded Providers:** More information will be forthcoming on state-funded contracting plans in the next several weeks. Vaya Health and Partners will send amendments to ensure continuity of services for recipients and to support network adequacy.

## Providers with both Vaya and Partners Contracts

Vaya Partners will use the existing Vaya Health contracts for providers contracted with both Vaya Health and Partners. Provider contracts will be amended to add sites or services not included in the Vaya Health Pre-Merger/Contract. This will be done to ensure those sites and services are in place for the merged entity – Vaya Partners.

Where both parties have an existing contract with a provider, unless specifically assigned to Vaya Health before the merger date, Partners' provider contracts will terminate on the merger date for dates of service after the merger date.

Providers who are contracted with both Vaya Health and Partners and in good standing with both should have received a contract amendment in late August or will receive one during

September. This contract will update the terms and conditions of the Vaya Health contract to align with changes to the NC Medicaid program requirements since the network contract was last signed or amended.

### **Providers Contracted with Partners Only**

Contracts for Partners providers who are not contracted with Vaya, but are in good standing with both entities, were received via DocuSign in July 2026.

All Partners providers who are in good standing and who are not already contracted with Vaya Health will receive a contract before Oct. 1. The sites and services will be loaded into the claims system. For questions that are not in the Provider FAQs, contact your current contract manager with Partners.

If any provider in good standing in the Partners' network is not contracted with Vaya Health by the merger date, Vaya Partners will accept an assignment of the Partners' provider contract to ensure continuity of care. The assignment will be in place until Vaya Partners has executed a new agreement with the provider.

### **Providers Contracted with Vaya Health Only**

Providers with existing accounts with Vaya Health in the Vaya Health Provider Portal will continue to use this account and will not need a new account.

### **Provider Rates and Fee Schedules**

We are evaluating all rates through an approach that will yield a blended result as rates vary between the two organizations. You can find rates published in our fee schedules on the [vayapartners.org](https://vayapartners.org) website. Rates will not be included in contract amendments.

Both organizations are committed to keeping providers up to date on merger-related decisions and updates. From now until Oct. 1, Vaya Health and Partners will send timely communications through usual communication channels.

### **Providers Contracted for Different Services between Vaya Health and Partners**

The sites and services that you currently have will continue with Vaya Partners. The Provider Network departments of both Vaya Health and Partners are working to ensure this information is in the system.

### **Data Transfer Process**

Vaya Partners is committed to working with providers to ensure a data transfer process that provides the least amount of provider abrasion.

## Member Impacts and Transitions

### Member Coverage Changes

Members' coverage will automatically switch to Vaya Partners on Oct. 1, and members will not need to do anything to ensure their enrollment. Members will receive a mailed Welcome Packet with the Member Handbook. Tailored Plan Members will also receive Medicaid ID cards.

Tips for members:

1. Update your Medicaid contact information so that Vaya Partners has the correct mailing address for you.
2. Confirm your Primary Care Physician (PCP) and Tailored Care Management (TCM) providers are correct on the ID card, and contact Member Services at 888-235-4673 (HOPE) if you need to make any changes.

### Non-Emergency Medical Transportation (NEMT) for Members

Both Partners and Vaya Health use ModivCare for NEMT. There will be no disruption to member services. All existing orders and reservations will be carried over to Vaya Partners automatically. Members can now request reservations using the Vaya Partners reservation line: 1-855-397-3614.

## Credential, Compliance and Training

### Will Partners Network Providers who are in network with Partners but not Vaya need to be credentialed with Vaya?

NCDHHS will continue to perform the credentialing process through NCTracks. [Click here](#) for the state provider credentialing site.

### Critical Access Behavioral Health Agency (CABHA) certification

CABHA certification is required for Day Treatment, Community Support Team, and Intensive In-Home. [Click here](#) to read the statute.

### Residential Services Accreditation

If the Clinical Coverage Policy (CCP) for the residential service requires National Accreditation, then National Accreditation is required. Review the CCP for the requested or rendered service to ensure that your agency complies with the CCP.

## Retaking New Provider Orientation Training

Providers with documentation of completion of the required New Provider Orientation modules with another network (Vaya Health, Partners Health, or another LME/MCO) will not need to retake New Provider Orientation Modules.

## Who is the contact to help address outstanding claims?

Claims sent to Partners with dates of service before Oct. 1 should be directed to [ClaimsDepartment@PartnersBHM.org](mailto:ClaimsDepartment@PartnersBHM.org). For dates of service before Oct. 1, providers should submit through the process that you use today.

## Clinical Operations

### Utilization Management

Once finalized, Vaya Partners will publish the benefits coverage for the merged entity. This will include State-Funded Services and In Lieu of Services (ILOS), as examples.

## Will Alpha still be used for enrollments?

Alpha+ will only be used for enrollments related to dates of service through Sept. 30. All enrollments for dates of service on or after Oct. 1 will go through the Vaya HSP platform.

## Prior Authorizations

Changes to Prior Authorizations (PAs) from the plan you currently have are likely. There will be 90-day flexibilities in place. Providers will have the opportunity to request retro authorizations during the flexibility period.

All previously authorized service requests that are approved will be ingested into the Vaya Partners system. Therefore, if an authorization crosses Oct. 1, it will be ingested into the Guiding Care system through the Transitions of Care (TOC) process.

### Important notes about PAs:

- All current authorizations crossing over the Oct. 1 merger date will be honored.
- No PAs for physical health services or behavioral health (BH) services will be required for 90 days following the merger.
- For intellectual/developmental disabilities (I/DD) services currently requiring authorization, retrospective requests will be allowed for 90 days following the Oct. 1 implementation date.
- Services that require Electronic Visit Verification (EVV) will require PA for providers to schedule visits for billing.
- Providers will receive communications at least 30 days in advance of any changes to PA requirements.

Vaya Partners will provide instructions to providers for the Prior Authorization process of the merged entity. This will include, but not be limited to, client-specific information, 1915(i), transition of care, etc.

### **Service Authorization Requests**

We will honor your authorization. A Service Authorization Request (SAR) is not required during the flexibility period. Providers will be required to submit SARs after the flexibility period ends on Dec. 29.

### **Relative as a Direct Support Employee (RADSE) Data**

Partners and Vaya Health will share RADSE data.

### **Employer of Record (EOR) Audit/Reviews during the Merger Process**

Vaya Health and Partners will continue to conduct EOR reviews as required by NCDHHS and the North Carolina Innovations Waiver.

### **Will our Partners' provider representative remain the same, or will our Vaya provider representatives become our sole contacts?**

We are currently reviewing our Provider Network staffing and will update providers as to who their representative is/will be when these decisions have been made.

## **Provider Support and Contact Information**

### **Will email addresses change for our Vaya Health and Partners contacts?**

Yes, all email addresses will change. We will share new email addresses before Oct. 1 through Provider Communication Bulletins, Provider Touchpoint webinars, and the upcoming Vaya Partners Provider Operations Manual.

### **Provider Support and Resources**

As additional details are gathered, updates will be shared with providers. Leadership from both organizations will work closely with NCDHHS, as well as state and local partners, to ensure continuity of care and a successful transition.

Vaya Health and Partners will provide merger-related information on their respective websites. Links to updates will be shared once available. Information will also be shared on the combined Vaya Partners website: [VayaPartners.org](https://VayaPartners.org).

Providers should sign up to receive Provider Communication Bulletins and attend Provider Touchpoints for up-to-date information.

Provider Support Services are available to assist with your questions Monday through Saturday, from 7 a.m. to 6 p.m.

You can also submit merger-related questions to our [Provider FAQ form](#).

Vaya Health

[vayahealth.com](http://vayahealth.com)

1-866-990-9712

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Partners Health Management

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