

OVERVIEW OF 2018 LME-MCO STATE AND FEDERALLY-FUNDED MONITORING

APRIL 30, 2018

Introduction

- Welcome
- Housekeeping Details
 - * Webinar is for LME-MCO staff only.
 - * Attendance: If group listening in, email LME.Monitoring@dhhs.nc.gov, subject line: Webinar Attendees; list names of all Attendees in group.
 - Put phones on mute, but not on hold.
 - * Two presentations Programmatic Review and Clinical Services Review.
 - * Please ask any questions via chat
 - Any additional questions can be sent to the LME Monitoring mailbox.
 - * PowerPoint presentation from webinar will be posted on the web ~ 1 week - some tweaks will be made based on today's session.

Federal Programs That Will be Monitored

- SAPTBG \$44.9 Million
 - Adult and Child SUD Treatment
 - **♦5% IV Drug Use**
 - *Women's Set Aside Funding (WSAF)
 - CASAWORKS for Families Residential Initiative
 - *Work First/CPS
 Substance Use Initiative
 - ***JJSAMHP**

- CMHSBG \$11 Million
 - *Adults with SMI; children and youth with SED
- Social Services Block Grant –
- \$7.5 Million
 - **❖Group Living**
 - Supervised Living
- Sample Chosen for SUD/MH Clinical Monitoring

Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

2018 LME-MCO Program Monitoring



Monitoring Team: Barbara Flood, Jeff Howett, Kim Moss, Cynthia Coe

April 30, 2018

Overview of SFY 2018 Program Review

- Collaborate with the program managers for any changes to the review tool and guidelines
- Highlights of What's New or Different
- What documentation needs to be available

SOURCE:

2018 Block Grant Review: Overview of Program and Record Guidelines and Tools

OVERALL CHANGES

- Prevention will not be reviewed by this team
 - Due to the changes LME-MCOs/providers are making
- System of Care High Fidelity Wrap Around and First Episode Psychosis will not be reviewed by this team
 - Community collaborative will be reviewed
 - Both of these programs have developed a program auditing process to ensure that providers are operating in fidelity to both models.

Community Mental Health Services Block Grant – System of Care, Program Monitoring

- System of Care, which includes Community Collaborative and Semi-Annual Report
- Documentation Needed From LME-MCO/Provider:
 - * Evidence of a contract between LME-MCO and provider for services rendered
 - * Intake and screening information
 - * Evidence of signed/current MOA between LME-MCO with provider
 - Flyers or brochures
 - * Applicable Policies and Procedures
 - Evidence of participation by individual and family member(s)
 - Progress notes

Community Mental Health Services Block Grant – System of Care, Program Monitoring

Documentation Needed:

- SOC Coordinator documentation on number of outreach efforts (by system category), number of trainings provided (including Child and Family Team trainings, number of CFTs to whom technical assistance is provided, and number of collaborative meetings that are staffed/supported
- SOC Coordinator documentation regarding outreach, training and technical assistance efforts by family partners or advocates with whom they collaborate
- Quality Management or Care Coordination or SOC staff policy and procedure for submitting SOC semi-annual reports

Community Mental Health Services Block Grant - System of Care, Record Review

- PCP planning process; Referral for Treatment for Trauma, if needed (child only)
- Documentation Needed From LME-MCO/Provider:
 - *Signed release of information
 - *Person-Centered Plan
 - *Progress Notes
 - *Individual's record
 - *Evidence of completed assessment

SAPTBG REVIEW

- Conducted to ensure compliance with 45 CFR Part 96, Subpart I, SAPTBG
- Review includes both program and record review for:
 - * SAPTBG IV Drug
 - SAPTBG Women's Set-Aside Fund
 - SAPTBG CASAWORKS for Families Residential Initiative
 - SAPTBG Work First / Child Protective Services
 Substance Use Initiative
 - *** JJSAMHP**

JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP) PROGRAM MONITORING

- Documentation Needed From LME-MCO/Provider:
 - Plan of Work
 - Required Signatures or evidence there was an attempt to obtain signatures
 - JJSAMHP 5 Domains
 - Screening/Referral
 - Assessment
 - Engagement
 - Evidence-based Treatment
 - Beyond Treatment/Recovery Oriented Systems of Care

JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP) PROGRAM MONITORING

- Documentation Needed From LME-MCO/Provider:
 - Signed Memoranda of Agreement between local team members
 - Juvenile Justice's invitation to participate in the LME-MCO's Gaps and Needs Analysis reporting
 - * JJSAMHP Gaps and Needs identified in the LME-MCO's report
 - * Activities conducted by the Partnership for the fiscal year
 - Evidence of a contract between LME-MCO and provider for services rendered
 - * Provider informed of the Block Grant requirements

JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP) RECORD REVIEW

- Documentation Needed From LME-MCO/Provider:
 - * Approved evidence-based screening tool
 - Evidence of completion of NC-TOPPS within required timeframes
 - Signed authorization to release information to juvenile court and the JJSAMHP
 - Child and family participation in the service planning process
 - Activities within the JJSAMHP 5 Domains included in individual's service record
 - * Participation in the initial Child and Family Team Meeting

SAPTBG IV Program Tool

- No major changes
- Documentation Needed From LME-MCO/Provider:
 - *Evidence of an outreach program for people who use IV drugs
 - *Evidence of priority admission for people who use IV drugs
 - *Evidence of strategies implemented to promote a drugfree workplace, according to policy
 - *Evidence of a contract between LME-MCO and provider for services rendered
 - Evidence provider was informed of the Block Grant requirements

SAPTBG IV Record Review

- No major changes
- Documentation Needed From LME-MCO/Provider:
 - * Evidence of eligibility
 - Evidence of TB Screening
 - Evidence of referral, if TB symptoms were present
 - * Evidence to support ASAM level of care
 - Signed authorization to release information with all the required elements
 - * Evidence of timely admission or appropriate referral
 - Evidence of completion of NC-TOPPS within required timeframes

SAPTBG Women's Set-Aside Program Tool

- No major changes
- Documentation Needed From LME-MCO/Provider:
 - * Written Program Description with all required elements
 - Evidence of priority admission to pregnant women who have substance use disorder diagnosis
 - Evidence of a contract between LME-MCO and provider for services rendered
 - Evidence provider was informed of the Block Grant requirements

SAPTBG Women's Set-Aside Record Review

- No major changes
- Documentation Needed From LME-MCO/Provider:
 - ***Evidence of eligibility**
 - *Needs were addressed, as required
 - ***Evidence to support ASAM level of care**
 - ***Evidence of timely admission for pregnant women**
 - *Evidence of completion of NC-TOPPS within required timeframes

CASAWORKS™ for Families Residential Initiative Program Tool

- No major changes on this tool
- Documentation Needed From LME-MCO/Provider:
 - Evidence of signed/current MOA between provider and county DSS
 - * Evidence of Advisory Group meetings
 - Evidence of a contract between LME-MCO and provider for services rendered
 - Evidence the provider was informed of Block Grant requirements

CASAWORKS™ for Families Residential Initiative Record Review Tool

- No major changes to tool
- Documentation Needed From LME-MCO/Provider:
 - * Evidence of eligibility
 - * Evidence to support ASAM level of care
 - Evidence of current Person-Centered Plan (PCP) or Employment Self-Sufficiency Plan (ESSP)
 - Signed Authorization to Release Information with all required elements
 - Evidence of completion of NC-TOPPS within required timeframes

SAPTBG Work First / Child Protective Services Substance Use Initiative Program Tool

- No major changes
- Documentation Needed From LME-MCO/Provider:
 - *Signed MOA between LME-MCO/provider and each county DSS
 - *Evidence MOA has been reviewed in the past 12 months
 - * Evidence of compliance with required elements

SAPTBG Work First / Child Protective Services Substance Use Initiative Record Review Tool

- No major changes
- Documentation Needed From LME-MCO/Provider:
 - Signed authorization to release information that includes all required elements
 - SUDDS or pre-approved alternate assessment for Referrals
 - Evidence of participant's disposition after meeting with QPSA, (i.e., communication with DSS)
 - Evidence of a contract between LME-MCO and provider for services rendered
 - Evidence provider was informed of the Block Grant requirements

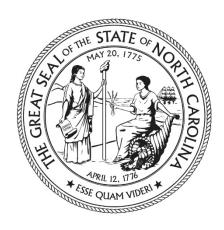
SAMPLE

• UCR

- Sample is pulled from NC Tracks
- * From the sample pulled, 10 records are chosen
- * The sample will be forwarded to the LME-MCO 10 calendar days prior to the scheduled review

NON-UCR (JJSAMHP, Work First, CASAWORKS,)

- * A request has been sent to the LME-MCOs for a list of providers and individuals in the programs above during the fiscal year.
- Submission of requested information due by April 27, 2018
- * Ten records will be randomly chosen from the list
- Ten calendar days prior to the review, the sample will be sent to the LME-MCO



Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

April 30, 2018



Starleen Scott Robbins, MSW, LCSW, Women's Services Coordinator Stacy Smith, LPC-S, LCAS, Adult MH Team Lead Eric Harbour, MPH, LCSW, Child MH Team Lead Mya Lewis, MHA, I/DD & TBI Section Chief

April 30, 2018

- Services/Policies to be included:
 - Adult Substance Use Disorder Services
 - Adult Mental Health Services
 - Child MH & SUD Policies & Procedures
 - Adult I/DD Services

- Funding to be included:
 - State Funds
 - Social Services Block Grant
 - Substance Abuse Prevention & Treatment Block Grant
 - Community Mental Health Services Block Grant

Adult MH/SUD Clinical Monitoring

- Focus of Monitoring: SFY 2018 clinical monitoring will focus on the review of persons identified in the current LME-MCO contract as high priority/high risk populations to determine if those individuals:
 - Received care coordination based on parameters set forth in the current contract,
 - Received referrals to approved follow up services,
 - Met the criteria for the identified DMH/DD/SAS Benefit Plan, and/or
 - Met eligibility criteria for services.

Adult MH/SUD Clinical Monitoring

I. Sample Selection & LME-MCO Record Review for MH and SUD:

- Sample Selection: Adults with a substance use disorder (SUD) or with mental health (MH) disorder who were discharged from a state psychiatric hospital, ADATC, community psychiatric hospital, facility based crisis program, or non-hospital medical detoxication service with paid claims between July 1, 2017 and September 30, 2017.
- Sample Size: Up to 10 LME-MCO records will be reviewed for both MH & SUD, respectively, from NC TRACKS paid claims AND up to 10 LME-MCO records will be reviewed for both MH & SUD, respectively, from HEARTS.

Adult MH/SUD Clinical Monitoring

- LME-MCO-Record Review: The records will be reviewed to determine the outcome for individuals 30 calendar days following discharge.
 - Care coordination during admission and after discharge
 - Follow-up appointments within 7 days of discharge
 - Follow-up for missed appointment within 5 days
 - Service authorizations for approved services
 - Readmission within 30 days of discharge

Adult SUD Clinical Monitoring

- II. Sample Selection & LME-MCO Record Review for SUD:
- Sample <u>Selection</u>: Adults with substance use disorders (SUD) who received SAIOP services with paid claims between July 1, 2017 and February 28, 2018.
- Sample Size: Up to 8 LME-MCO records will be reviewed.
- <u>LME-MCO-Record Review</u>: The records will be reviewed to determine the following:
 - DMH/DD/SAS Benefit Plan Eligibility Criteria
 - ASAM Criteria
 - Service Admission Criteria

Who & What To Expect

- Division Clinical Monitoring Staff: 1 Team Lead & 2 reviewers
- LME-MCO Staff: 3 LME-MCO staff familiar with MH/SUD
- LME-MCO Record Documentation To Be Reviewed:
 - Comprehensive Clinical Assessment (CCA)
 - Psychiatric Evaluation
 - PCP or Service Plan
 - Crisis Plan, when applicable
 - SAR/TARs
 - Care Coordination Plan
 - Care Coordination Notes
 - Discharge Plan for each Inpatient/FBC/Detox stay
 - Any other supporting documentation

Focus of Monitoring

- Review of LME-MCO policies and procedures to determine if those policies and procedures support the identification of eligible children and their access to appropriate services.
- The monitoring will consist of a desk review of relevant LME-MCO policies and procedures. LME-MCOs will submit documentation showing evidence of policy/procedures related to nine identified contractual responsibilities.

- Contract areas to be reviewed with DMH LME/MCO contract source reference in parentheses:
 - Analysis of data (Section 4.5)
 - Website (Section 4.7)
 - Access, Screening, Triage, and Referral (Section 7.0)
 - Service/Benefit Design and Priority Populations (Section 8.2)
 - Service Definitions (Section 8.3)
 - Care Coordination functions (Section 9.1)
 - Assignment for high risk/high cost children with SED (Section 9.3)
 - Community Relationships and Prevention Efforts (Section 11.1)
 - Natural and Community Supports (Section 11.3)

- Applicable LME/MCO documentation:
 - Policy and procedures
 - Plans, processes, survey results
 - Staff handbooks
 - Staff orientation and training curriculum

- LME-MCOs should use the monitoring tool (attached to the LME-MCO Memo) as a guide to complete the audit.
- Submit documentation in Word, Excel, or PDF format via email to Eric Harbour at <u>Eric.Harbour@dhhs.nc.gov</u> no later than <u>June 1</u>, 2018.

Adult I/DD Clinical Monitoring

- Sample Selection & LME-MCO Record Review for I/DD
 - <u>Sample Selection</u>: Adults who received all levels of Supervised Living and Group Living services funded by SSBG and/or State dollars will be reviewed.
 - <u>LME-MCO Record Review</u>: Records will be monitored based the approved DMH/DD/SAS Benefit Plan and service definition eligibility criteria.

I/DD Benefit Plan & Service Eligibility Monitoring Review

- The Division will generate a sample of paid claims for the expenditure of State and Social Services Block Grant funds for service provision:
 - Supervised Living
 - Initial authorization OR
 - Concurrent authorization
 - Group Living
 - · Initial authorization OR
 - Concurrent authorization

I/DD Benefit Plan & Service Eligibility Monitoring Review

- The sample to be reviewed will include up to 8 claims across all of the services paid for with SSBG or state funds.
- The LME-MCO must ensure that sufficient documentation to adequately respond to the questions on the LME-MCO Clinical Monitoring tool is present at the review site.
- The LME-MCO may have paper or electronic records available for review.

What To Expect

- Documentation for Benefit Plan & Service Eligibility Review:
 - SAR/TARs
 - NC SNAP and/or SIS
 - Psychological Evaluation
 - Level of Care Form
 - PCP or Service Plans
 - Comprehensive Clinical Assessment (CCA), when applicable
 - Progress notes
 - Crisis plan, when applicable
 - Behavior Intervention Plans, when applicable
 - Any other supporting documents

Who To Expect

- Division I/DD Clinical Monitoring Staff:
 - 1 Team Lead
 - 2 Reviewers
- LME-MCO Staff: 2 LME-MCO Staff familiar with I/DD services & records

Pre-Site Visit Call Information

- The LME-MCO will receive the MH, SUD, SAIOP and I/DD claims samples 10 calendar days prior to the agreed upon onsite review date.
- Pre-Site Visit Conference Calls:
 - -4-5 days prior to onsite visit
 - Lead LME-MCO Clinical Monitoring Staff and all others
 - Any questions or concerns related to the monitoring or process
 - Any housekeeping issues (i.e. location, space, staffing, timeframes, etc.)

Clinical Monitoring Questions

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MH, SUD & SAIOP Clinical Monitoring

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I/DD Benefit Plan & Service Eligibility Monitoring

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Contact Information

Claims Sample Questions:

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