

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

KODY H. KINSLEY • Deputy Secretary for Behavioral Health & IDD

VICTOR ARMSTRONG • Director

LME-MCO Joint Communication Bulletin # J373

Date: 09/02/2020

To: Local Management Entities-Managed Care Organizations (LME-MCOs)

From: Renee Rader, Assistant Director for Policy and Programs, DMH/DD/SAS

Deb Goda, Behavioral Health Unit Manager, NC Medicaid

Subject: Assertive Community Treatment (ACT) and Individual Placement and Support (IPS) Fidelity Evaluation Protocol Update

Effective Jan. 1, 2020, DMH/DD/SAS staff no longer participate as fidelity evaluators for Assertive Community Treatment (ACT) and Individual Placement and Support (IPS) fidelity evaluations. DMH/DD/SAS has outlined guidance for fidelity evaluators and LME-MCOs. The <u>ACT</u> and attached IPS service definitions are to be referenced for policy and procedures with this communication serving as additional guidance effective immediately.

Effective Jan. 1, 2020, The UNC Institute for Best Practices assumed the lead on scheduling and facilitating all fidelity evaluations. In the event that an ACT or IPS team requests a postponement of a scheduled fidelity evaluation, ACT providers should contact Margaret Herring at margaret.herring@dhhs.nc.gov, and IPS providers should contact Tara Alley at tara.alley@dhhs.nc.gov who will contact the representative LME-MCO(s) to notify them of the request. The LME-MCO has the authority to approve or deny any requests.

The following are examples of acceptable reasons for submitting a request:

- Staff member passes away;
- Staff member on unexpected, extended medical leave;
- Natural disasters and public health crises;
- Several concurrent evaluations for an agency with multiple ACT or IPS teams.

LME-MCOs can initiate targeted monitoring at any time. Situations that necessitate targeted monitoring include:

- Essential staff vacancies lasting six months or longer
 - For ACT, these positions include the psychiatric care provider, nurse, team lead, and specialist team positions (peer support specialist, employment specialist, and cooccurring disorders specialist)

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF MENTAL HEALTH, DEVELOPMENTAL DISABILITIES AND SUBSTANCE ABUSE SERVICES

- For IPS, these positions include team lead, an employment support professional and an employment peer mentor
- Excessive staff turnover over an extended period of time, defined as:
 - ACT/small or medium team- 6 or more staff resigning in 24 months
 - ACT/large team- 12 or more staff resigning in 24 months
 - IPS teams- 3 or more staff resigning in 12 months
- o An IPS provider is not contracted with the Division of Vocational Rehabilitation
- A history of low scores across consecutive fidelity evaluations (includes overall scores and individual items)
 - An ACT provider scores a 1 on four or more items
 - An ACT provider scores between 3.0 and 3.6 on two consecutive evaluations
 - An IPS provider scores a 1 on two or more items
 - An IPS provider scores 74 89 on two consecutive reviews
- Practices not in line with the ACT and IPS models or with person-centered, recovery-focused services (i.e., excessive drug screening, higher percentage of people in congregate living settings, continually low frequency of contact, unaccountable billing procedures)

LME-MCOs will receive a request to participate in/observe the on-site fidelity evaluation when:

- o An ACT or IPS team is requesting a re-evaluation
- o An ACT or IPS team has a history of low scores over two consecutive evaluations
- A team that doesn't fully engage in pre-fidelity preparation (i.e., not responding to scheduling emails, completing and sharing pre-fidelity data forms, meeting established deadlines for prefidelity data) and post-fidelity communication regarding the reconsideration process (i.e., not responding to contesting emails by identified deadlines.)

If an agency seeks legal action against DHHS or DHHS' contractor(s) resulting from a fidelity evaluation, DMH/DD/SAS will inform any LME-MCO that holds a contract with that agency of the legal action.

If you have questions, please contact Stacy A. Smith at 984-236-5052 or stacy.smith@dhhs.nc.gov.

Previous bulletins can be accessed at: www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins.

Attachment: State-Funded IPS Service Definition

cc: Kody Kinsley, Behavioral Health & I/DD

Dave Richard, NC Medicaid Jay Ludlam, NC Medicaid Helen Wolstenholme, DSOHF NC Medicaid Leadership Team DMH/DD/SAS Leadership Team