

NC DHHS, DIVISION OF MH/DD/SAS
OVERVIEW OF 2019 LME-MCO SYSTEMS
REVIEW

June 17, 2019

Introduction

- **Welcome**
- **Housekeeping Details**
 - ❖ Webinar is for LME-MCO staff only.
 - ❖ Attendance: Email LME.Monitoring@dhhs.nc.gov, subject line: Webinar Attendees; list names of all Attendees from your LME-MCO.
 - ❖ Put phones on mute, but not on hold.
 - ❖ Two presentations – Programmatic Review and Clinical Services Review.
 - ❖ Please ask questions during the presentation or you may send them to the lme.monitoring@dhhs.nc.gov
 - ❖ PowerPoint presentation from webinar will be posted on the web in approximately 1 week – some tweaks may be made based on today's session.

SOURCE:

Slide 2

FB1

Flood, Barbara, 5/21/2019

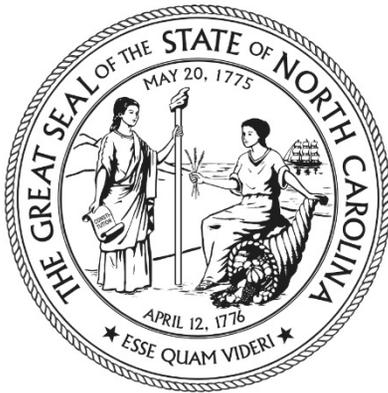
Federal Programs That Will be Monitored

- **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
- **Sample Chosen for SUD/MH Clinical Monitoring**



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

2019 LME-MCO Program Monitoring

Review Team: Barbara Flood, Cynthia Coe, Patricia
McNear

June 17, 2019

Overview of SFY 2019 Program Review

- **Collaboration with the program managers for any changes to the review tool and guidelines**
- **Highlights of changes**
- **What documentation needs to be available**

SOURCE:



2019 Block Grant Review: Overview of Program and Record Guidelines and Tools

SOURCE:

NCDHHS, DMH|DD|SAS | Overview of 2019 LME-MCO Systems Review | June 17, 2019

WHAT TO EXPECT

- **Block Grant Reviewers**
 - 1 Team Lead and 2 Reviewers
- **LME-MCO Staff**
 - A staff person available to assist with providers and program reviews
- **Provider Staff**
 - One provider staff familiar with the area being reviewed
- **Arrive at approximately 8:30 a.m.**
- **Each Reviewer will need a table to sit with provider staff**
- **Each Reviewer will need an electrical outlet**

SAPTBG and CMHSBG REVIEW

- **Conducted to ensure compliance with 45 CFR Part 96, Subpart I, SAPTBG and 42 USC Part B, Subpart I, Block Grants for Community Mental Health Services**
- **Review includes both program and record review for:**
 - ❖ **SAPTBG IV Drug**
 - ❖ **SAPTBG Record Review**
 - ❖ **SAPTBG Women's Set-Aside Fund**
 - ❖ **SAPTBG CASAWORKS for Families Residential Initiative**
 - ❖ **SAPTBG Work First / Child Protective Services Substance Use Initiative (Program Review will be a desk review)**
 - ❖ **JJSAMHP (Program Review will be a desk review)**
 - ❖ **CMHSBG (Program Review will be a desk review)**

SAPTBG IV Program Tool

- **Added a question**
 - **There is evidence of policy or procedure of interim services if admission to clinical treatment services cannot occur within the required time frame.**
- **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 policy or procedure for the provision of interim services**
 - ❖ **Evidence of strategies implemented to promote a drug-free 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 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 completion of NC TOPPS within required timeframes
 - Evidence the LME-MCO contracts with the provider for these services
 - Evidence the LME-MCO notified/informed the provider of the block grant requirements

SAPTBG Women's Set-Aside Program Tool

- **One question added**
 - **There is evidence of policy or procedure for the provision of interim services for pregnant women with SUD within the required timeframe**
- **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 policy or procedure for the provision of interim services for pregnant women with SUD**
 - ❖ **Evidence of established and implemented strategies that promote a drug-free workplace**
 - ❖ **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

- **One question added**
 - If services required for the pregnant woman were not available within 48 hours, there is evidence interim services were offered or provided.
- **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 or a referral for services for pregnant women
 - ❖ Evidence that interim services were offered or provided for pregnant women
 - ❖ Evidence of completion of NC-TOPPS within required timeframes

Acceptable Interim Services for SAPTBG IV AND WSAF

- **Referral for Interim Services**

- **Acceptable Services Include:**

- **Counseling and education about HIV and TB**
 - **Counseling about the risks of needle sharing**
 - **Counseling about the risks of transmission to sexual partners and infants**
 - **Counseling about steps to take to ensure that HIV and TB transmission does not occur**
 - **Referral for HIV or TB treatment services, if necessary**

- **Additional interim services for pregnant women**

- **Counseling on the effects of alcohol and drug use on the fetus**
 - **Referral for prenatal care**

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 that all the required elements of the CASAWORKS for Families Model have been implemented, contracted for and/or a current MOA is in place.**
 - ❖ **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 a Person-Centered Plan (PCP) was initiated upon admission to the program**
 - ❖ **Evidence of current (PCP) or Employment Self-Sufficiency Plan (ESSP) was reviewed monthly**
 - ❖ **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 with all required elements**
 - ❖ **Evidence MOA has been reviewed in the past 12 months**
 - ❖ **Evidence the LME-MCO contracted with the provider for these services**
 - ❖ **Evidence the LME-MCO notified/informed the provider of the Block Grant requirements**

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 Work First 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**

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**

Community Mental Health Services Block Grant (CMHSBG) –Program Monitoring

- Homeless youth, youth in rural communities, children and youth in military families were added to target population
- Documentation Needed From LME-MCO/Provider:
 - ❖ There is that funds are used to provide access to mental health services to target populations.
 - ❖ There is evidence that services are provided to adults with Serious Mental Illness (SMI) regardless of ability to pay.
 - ❖ There is evidence that services are provided to children with Severe Emotional Disturbance (SED) regardless of ability to pay.
 - ❖ There is evidence of a system in place to prevent inappropriate disclosure of individual records.
 - ❖ There is evidence that the LME-MCO supports and promotes evidenced-based treatment
 - ❖ There is evidence of recipient and family member in the community mental health system of care.
 - ❖ There is evidence of activities to increase and diversify participation of youth and families in the local System of Care (SOC) community collaborative. (Child Only)
 - ❖ There is evidence the LME-MCO has a process for gathering and submitting SOC Coordinator activity data.

Community Mental Health Services Block Grant, Record Review

- **Homeless youth, youth in rural communities, children and youth in military families were added to target population**
- **Documentation Needed From LME-MCO/Provider:**
 - ❖ **Evidence the person meets eligibility**
 - ❖ **Evidence of individual and/or family involvement in treatment planning**
 - ❖ **Evidence NC TOPPS was completed within required timelines**
 - ❖ **Evidence there is a signed release with all required elements**
 - ❖ **Evidence informal/natural support persons were identified**
 - ❖ **Evidence of treatment for trauma (referral and service transition)**

GUIDELINES

- **Will be Posted on the Division Web Site**
- **Provides examples of acceptable documentation for each question**
- **Provides citations for each question**

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 business days prior to the scheduled review**

- **NON-UCR (JJSAMHP, Work First, CASAWORKS,)**
 - ❖ **A request was sent to the LME-MCOs for a list of providers and individuals in the programs above during the fiscal year.**
 - ❖ **Ten records will be randomly chosen from the list**
 - ❖ **Ten business days prior to the review, the sample will be sent to the LME-MCO**

SAMPLE (con't)

- **The following program reviews will be desk reviews. Requested information is to be submitted by July 1, 2019 to barbara.flood@dhhs.nc.gov**
 - **Work First Program**
 - **JJSAMHP Program**
 - **CMHSBG Program**



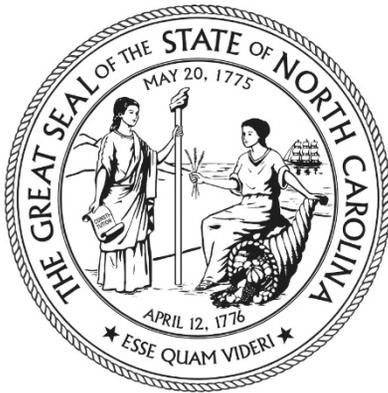
Program Monitoring and Program Sample Questions
Barbara Flood, LME-MCO Systems Review Coordinator

barbara.flood@dhhs.nc.gov

919-218-3872



- **QUESTIONS??**



2019 LME-MCO Clinical Monitoring

**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

LaToya Chancey, LPC-A, I/DD Team Lead

June 17, 2019

LME-MCO Clinical Monitoring

Services/Policies to be included:

- Adult Mental Health Services
- Adult Substance Use Disorder Services
- Child MH & SUD Policies & Procedures
- Adult and Child I/DD Services

LME-MCO Clinical Monitoring

Funding to be included:

- State Funds
- Substance Abuse Prevention & Treatment Block Grant
- Community Mental Health Services Block Grant
- Social Services Block Grant

Adult MH/SUD Clinical Monitoring

Focus of Monitoring:

- I. SFY 2019 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.
 - Follow-up within 30 days of discharge.

- II. Review of policies, procedures and/or protocols submitted in response to SFY 18 clinical monitoring POC and/or TA to verify implementation & determine if policies, procedures & protocols effectively addressed the compliance issue.

Adult MH/SUD Clinical Monitoring

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

I. 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 February 1, 2019 and May 31, 2019.

Sample Size:

5 LME-MCO records will be reviewed for both MH & SUD, respectively, from NC TRACKS paid claims

AND

5 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
- Follow-up after discharge

Adult MH/SUD Clinical Monitoring

- II. Review of policies, procedures and/or protocols submitted in response to SFY 18 clinical monitoring POC and/or TA to verify implementation & determine if policies, procedures & protocols effectively addressed the compliance issue.**

Evidence of Implementation:

- **Staff training**
- **New software to identify care coordination function and needs**
- **Updated/revised job descriptions**
- **Minutes from clinical and/or management meetings re: care coordination policy/procedure/protocol implementation**
- **Other LME-MCO documentation that indicates implementation of POC**

Implementation Verification:

LME-MCO Care Coordination record review

Who & What To Expect

- ❑ **Division Adult MH/SUD 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**

Child & Adolescent MH/SUD Clinical Monitoring

Purpose of Monitoring:

The purpose of clinical monitoring for child services is to verify if the LME-MCO followed its established written policies and procedures in the execution of the access, screening, triage and referral function.

Child & Adolescent MH/SUD Clinical Monitoring

Sample Selection & LME-MCO Record Review for Child/Youth MH and SUD:

Sample Selection:

- LME-MCOs will send a list of uninsured child/youth who called STR and were served during the period of 7/1/18-3/30/19 by May 31, 2019.

Sample Size: a sample of 8 STR calls from what was sent (3 of which will be complaints – if there were no complaints – we will take the full 8 from the regular STR calls)

Child & Adolescent MH/SUD Clinical Monitoring

Informational Questions (not part of clinical monitoring):

- How is your LME-MCO preparing for the impact of the DSS Families First federal legislation on your child service system?
- How is your LME-MCO preparing for the impact of the Juvenile Justice Raise the Age legislation on your child service system?

- Please submit a narrative response via email to Eric Harbour at Eric.Harbour@dhhs.nc.gov by May 31, 2019.

Who & What To Expect

- ❑ **Division Clinical Monitoring Staff:**
 - **1 Team Lead & 1 reviewer**
- ❑ **LME-MCO Staff:**
 - **2 LME-MCO staff familiar with MH/SUD Child/Youth STR Encounters**
- ❑ **LME-MCO Record Documentation To Be Reviewed:**
 - **STR Policies, Procedures & Protocols (effective date: 7/1/18-3/30/19)**
 - **LME-MCO case notes, summaries, and dispositions for uninsured child/youth related consumer calls to STR**
 - **Any other supporting documentation provided by the LME-MCO**

I/DD Clinical Monitoring

Focus of Monitoring:

- Adults and children who received the following services funded by Social Service Block Grant (SSBG) and/or State dollars under the ADSN and CDSN benefit plans will be reviewed:**
 - **Supported Employment**
 - **Long Term Vocational Supports**
 - **Developmental Day**
 - **Day Activity**
 - **Day Supports**
 - **CAET-Community Activity and Employment Transitions (if applicable)**

I/DD Benefit Plan & Service Eligibility Monitoring Review

Sample Selection & LME-MCO Record Review for I/DD:

- DMH/DD/SAS will generate a sample of paid claims between 3/1/18-02/28/19 for expenditures of State-funded and Social Services Block Grant (SSBG) funds reviewing the following for all services:
 - Benefit Plan Eligibility Criteria
 - Initial Service Criteria or Concurrent Service Criteria

- LME-MCO Record Review: Records will be monitored based on the approved DMH/DD/SAS Benefit Plan and service definition eligibility criteria.

I/DD Benefit Plan & Service Eligibility Monitoring Review

Sample Selection & LME-MCO Record Review for I/DD:

- ❑ 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.**

I/DD Benefit Plan & Service Eligibility Monitoring Review

Sample Selection & LME-MCO Record Review for I/DD:

- Any services that eligibility was only verified by the LME-MCO during the post-payment review will require the following:
 - Copy of the most recent LME-MCO post-payment review policy
 - Copy of the most recent LME-MCO post-payment review of the specific service (e.g., supported employment) and
 - The service records or sufficient documentation to adequately respond to the questions on the LME Clinical Monitoring tool available on-site for review.

Who To Expect

- ❑ **Division I/DD Clinical Monitoring Staff:**
 - **1 Team Lead & 2 Reviewers**

- ❑ **LME-MCO Staff:**
 - **3 LME-MCO Staff familiar with I/DD services & records**

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**

Pre-Site Visit Call Information

- The LME-MCO will receive the MH, SUD, SAIOP and I/DD claims samples 10 business 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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919-715-2415

➤ **Adult MH & SUD Clinical Monitoring**

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➤ **I/DD Benefit Plan & Service Eligibility Monitoring**

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Child & Youth MH/SUD Clinical Monitoring

Contact Information

Claims Sample Questions:

LME.Monitoring@dhhs.nc.gov