



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

**ROY COOPER** • Governor  
**KODY H. KINSLEY** • Secretary  
**MARK T. BENTON** • Deputy Secretary for Health  
**DAVE RICHARD** • Deputy Secretary for NC Medicaid

**LME/MCO Joint Communication Bulletin #J431**

**DATE:** September 2, 2022

**TO:** Local Management Entities/Managed Care Organizations (LME/MCOs)

**FROM:** Renee Rader, Assistant Director, Policy and Programs, DMH/DD/SAS  
Deb Goda, Associate Director, Behavioral Health and I/DD, NC Medicaid

**SUBJECT:** Update to Assertive Community Treatment (ACT) – Tool for Measurement of Assertive Community Treatment (TMACT) fidelity evaluations

This bulletin amends [Joint Communication Bulletin #J393](#), distributed May 17, 2021, regarding the timeline and process for TMACT fidelity evaluations and highlights recent updates to the fidelity evaluation process. The updates will:

- Reduce the amount of time the fidelity evaluators spend on-site with providers;
- Transition to the electronic fidelity evaluation program (**eTMACT**) which is a secure web-based software as a service (SaaS) designed to expediate the fidelity evaluation process and enhance rater accuracy and reliability; and
- Allow for a more careful review of the documentation submitted in advance of the on-site visit through a remote chart review.

The specific changes made to the fidelity evaluation process include:

- The amount of time spent on-site for the fidelity evaluation has been reduced from two full days to one and a half days.
- Teams are now required to submit pre-visit data and documentation into the eTMACT Provider Portal no later than two weeks prior to the on-site fidelity evaluation.
- The on-site chart review will now be conducted remotely.
  - This will be held prior to the on-site evaluation.
  - The orientation letter that the provider receives will include instructions on how to submit chart data through a HIPAA secure folder.
  - The deadline for submitting chart data will be no later than five business days prior to the on-site fidelity evaluation.
  - The team will be responsible for deleting access to the secure folder following the fidelity evaluation.

**NC DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**NC MEDICAID • DIVISION OF HEALTH BENEFITS**

LOCATION: 1985 Umstead Drive, Kirby Building, Raleigh, NC 27603  
MAILING ADDRESS: 2501 Mail Service Center, Raleigh, NC 27699-2001  
www.ncdhhs.gov • TEL: 919-855-4100 • FAX: 919-715-9451

**DIVISION OF MENTAL HEALTH, DEVELOPMENTAL  
DISABILITIES AND SUBSTANCE ABUSE SERVICES**

MAILING ADDRESS: 3001 Mail Service Center, Raleigh, NC 27699-3001  
www.ncdhhs.gov • TEL: 984-236-5000 • FAX: 919-508-0951

- A virtual debriefing session will be held following the receipt of the finalized evaluation report to provide feedback on strengths and recommendations for future training and improvement.

For fidelity evaluations to be completed in a timely and accurate manner, fidelity evaluators must have access to data both prior to, and if requested, after the on-site fidelity evaluation. Where noted, timelines involving days are business days as opposed to calendar days. It is expected that LME/MCOs and ACT providers adhere to this timeline:

| Step or Function   | Timeframe for Completion/Submission  | Responsible Party                         |
|--|--|---|
| ACT team is notified of upcoming fidelity evaluation; orientation letter is sent to team   | 6-7 weeks before the on-site fidelity evaluation is scheduled  | Fidelity Evaluation team                  |
| Pre-visit data and spreadsheets are completed in the eTMACT Provider Portal  | No later than 2 weeks before the on-site fidelity evaluation   | ACT team                                  |
| Chart data submitted to the Fidelity Evaluation team via secure folder   | No later than 5 days before the on-site fidelity evaluation  | ACT team                                  |
| On-site Fidelity Evaluation  | 1.5 days on-site evaluation  | ACT provider and Fidelity Evaluation team |
| ACT preliminary fidelity score and report are provided to the ACT team*  | 8 weeks after the completion of the on-site evaluation   | Fidelity Evaluation team                  |
| ACT team reviews draft TMACT fidelity evaluation report and option to contest up to 3 items. Refer to reconsideration process below. | The team has 10 days after receipt of the draft ACT fidelity evaluation report to review the report and the option to submit up to three (3) items for reconsideration | ACT team                                  |
| If applicable, fidelity evaluators review documentation submitted by team for up to 3 items for reconsideration.                     | 14 days to review documentation and finalize consensus rating and evaluation report  | Fidelity Evaluation team                  |
| Final evaluation report with recommendations is sent to the ACT team.  | Up to 4 weeks to complete final evaluation report with recommendations and send to ACT team  | Fidelity Evaluation team                  |
| Full fidelity evaluation report with recommendations will be sent to the LME/MCO.  | At the time the final evaluation is sent to the ACT team   | DMH/DD/SAS AMH team staff                 |

|                            |  |   |
|----------------------------|--|---|
| Virtual debriefing meeting | Following receipt of the final evaluation report | The ACT team, agency administrators, fidelity evaluators, LME/MCO representative(s), DMH/DD/SAS and DHB |
|----------------------------|--|---|

\*If a fidelity evaluation team finds they need additional information after the on-site evaluation has been completed, the ACT team has five (5) business days after the information is requested to submit it to the lead evaluator. This process can lengthen the time to receive the preliminary score and final fidelity evaluation report.

**Reconsideration Process:**

If the ACT team scores 3.0 or higher, they are limited to contest no more than three items. If the ACT team scores less than 3.0, they may contest more than three items.

- ACT teams scoring 3.0 or higher will be provided 10 business days to review their fidelity evaluation report and have the opportunity to contest no more than three items with objective data.
- ACT teams scoring 2.9 and lower will be provided 10 business days to review their fidelity evaluation report and are not held to a maximum number of items to contest.
- If an ACT team scoring 3.0 or higher submits more than three items for reconsideration, only the first three items received will be reconsidered.
- When contesting an item, note that only concrete data that were current at the time of the fidelity evaluation will be considered. Examples include: Specific and descriptive examples, ideally tied to care delivered to an ACT service recipient, that reflect best practice; documentation showing staffing hours, and attendance at daily team meetings.
- Any data to support contested scoring items must be submitted by the end of the 10-business day review. If no information is submitted during this time frame, the fidelity score will be finalized.
- If a team contests any items, it will add 15 days to the receipt of the final evaluation report.

It is ultimately the ACT team’s responsibility to ensure that the fidelity evaluation team has timely access to all data required and requested. If fidelity evaluators do not have access to the above listed data sets in the timeframes identified, the fidelity evaluation team will complete their scoring based on the information they have. Please note that the Timeframe for Completion/Submission is a requirement, not a recommendation.

Please refer to the TMACT protocol I for more information:

[https://www.med.unc.edu/psych/cecmh/files/2020/11/TMACT-Protocol-Part-I-1.0rev3\\_2018\\_final-posted.pdf](https://www.med.unc.edu/psych/cecmh/files/2020/11/TMACT-Protocol-Part-I-1.0rev3_2018_final-posted.pdf)

If you have any questions, please contact Margaret Herring at [Margaret.herring@dhhs.nc.gov](mailto:Margaret.herring@dhhs.nc.gov), 984-236-5057 or Justin Turner at [justin.turner@dhhs.nc.gov](mailto:justin.turner@dhhs.nc.gov) or 984-236-5055.

Previous bulletins can be accessed at: [www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins](http://www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins)

cc: Kody Kinsley, NC DHHS  
 Dave Richard, NC Medicaid  
 Jay Ludlam, NC Medicaid  
 Karen Burkes, DSOHF  
 NC Medicaid Leadership Team  
 DMH/DD/SAS Leadership Team  
 Julie Cronin, DHHS Office of General Counsel  
 Pam Scott, DHHS Office of General Counsel  
 Marti Knisley, Technical Assistance Collaborative  
 Sam Hedrick, DHHS Office for ADA and Olmstead