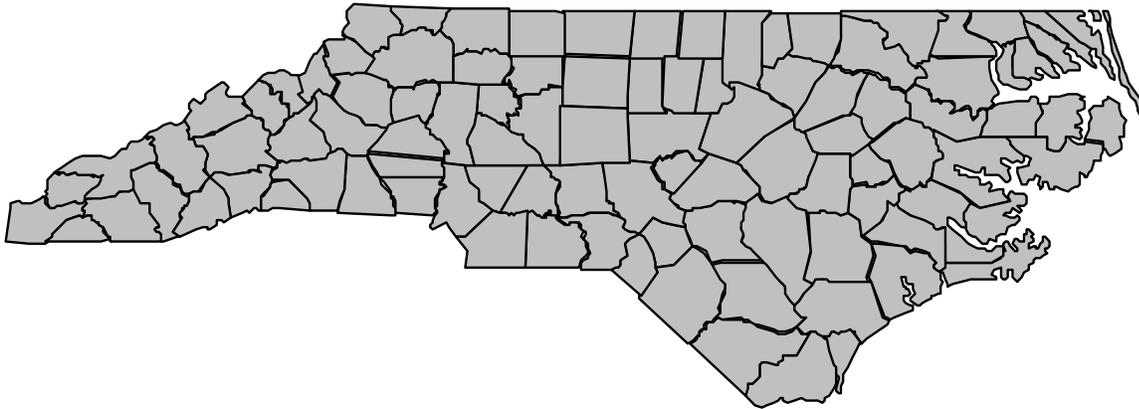


**North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities,  
and Substance Abuse Services**

**SFY 2014 Performance Contract  
With Local Management Entities - Managed Care Organizations  
Report/Data Submission Requirements**

**First Quarter Report  
July 1, 2013 - September 30, 2013**



Prepared by

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Community Policy Management Section  
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services  
North Carolina Department of Health and Human Services



November 2013



SFY 2014 Performance Contract  
Report/Data Submission Requirements  
First Quarter Report  
**Table of Contents**

	<u>Page</u>
Introduction .....	1
Report Schedule .....	2
Summary of LME-MCO Performance .....	3
<b>Report/Data Submission Requirements</b>	
<b>Quarterly Reports</b>	
3. Substance Abuse/Juvenile Justice Initiative Quarterly Report .....	4
4. Work First Initiative Quarterly Reports .....	5
5. Client Data Warehouse (CDW) - Screening Records .....	6
6. Client Data Warehouse (CDW) - Admissions .....	7
7. Client Data Warehouse (CDW) - ICD-9 Diagnosis .....	8
8. Client Data Warehouse (CDW) - Unknown Data (Admissions) .....	9
9. Client Data Warehouse (CDW) - Unknown Data (Discharges) .....	10
10. Client Data Warehouse (CDW) - Identifying and Demographic Records .....	11
11. Client Data Warehouse (CDW) - Drug of Choice .....	12
12. Client Data Warehouse (CDW) - Episode Completion Records (SA Clients) .....	13
14. NC Treatment Outcomes and Program Performance System (Update).....	14
15. NC Support Needs Assessment Profile (NC-SNAP) .....	15
<b>Appendix</b>	
Revisions .....	16

## Introduction

This is the **First Quarter Report** for SFY 2013-2014 under the Performance Contract between the LME-MCOs and NC DHHS.

This report tracks LME-MCO performance (timeliness, completeness, accuracy) in submitting required data/reports to the Division of MH/DD/SAS. Some requirements are quarterly while others are semi-annual or annual requirements. For reasons of economy, only those requirements with a report due in the current quarter are included in this report.

The tables on the following pages list the report schedule, provide the performance requirements, and show LME-MCO performance for the current quarter. Data submission/report requirements that have been met are depicted with a star (★) in the standard met column for each report. If the requirement was not met, this column will be blank, and the element that caused the standard not to be met will be shaded red.

Overall, the LME-MCOs met 90 percent of the two report submission requirements and 84 percent of the nine data submission requirements measured this quarter. Items that are marked "N/A" on the Summary of Performance matrix indicate reports or data submission requirements that do not apply to a specific LME-MCO.

### **Questions or Concerns**

If staff of an LME-MCO have questions about any of the individual requirements or believe that information contained in this report is in error, they should contact their LME-MCO liaison within 30 days of the report date. The LME-MCO liaison will assist in getting answers to questions and/or having errors corrected. The Division will publish a revised report at the time of the next quarterly report if corrections are necessary due to Division errors.

## SFY 2014 Performance Contract Report Schedule

*The table below shows which requirements will be reported by quarter\**

Requirement	1st Qtr Nov 30	2nd Qtr Feb 30	3rd Qtr May 30	4th Qtr Aug 30
1. Incident Reporting	<b>Report Replaced By NC-IRIS</b>			
2. Quarterly Fiscal Monitoring Reports	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
3. Substance Abuse/Juvenile Justice Initiative Quarterly Report	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
4. Work First Initiative Quarterly Reports	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
5. Client Data Warehouse (CDW) - Screening Record	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
6. Client Data Warehouse (CDW) - Admissions	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
7. Client Data Warehouse (CDW) - ICD-9 Diagnosis	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
8. Client Data Warehouse (CDW) - Unknown Data (Admissions)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
9. Client Data Warehouse (CDW) - Unknown Data (Discharges)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
10. Client Data Warehouse (CDW) - Identifying and Demographic Records	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
11. Client Data Warehouse (CDW) - Drug of Choice	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
12. Client Data Warehouse (CDW) - Episode Completion Record (SA Clients)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
13. NC Treatment Outcomes and Program Performance System (Initial)	<b>Report under revision</b>			
14. NC Treatment Outcomes and Program Performance System (Update)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
15. NC Support Needs Assessment Profile (NC-SNAP)	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>
16. System of Care Report		<b>X</b>		<b>X</b>
17. SAPTBG Compliance Report		<b>X</b>		<b>X</b>
18. National Core Indicators (NCI) Consents, Pre-Surveys, and Mail Surveys				<b>X</b>

\* The dates listed for the quarterly reports are the scheduled dates for the Division to publish the Performance Contract Report. For this to happen, LME-MCO required reports are due to the Division's Report Contact/Requirement Sponsor by the due date indicated on the report (typically the end of the month prior to publishing), and the Report Contact/Requirement Sponsor's reports are due to the Division's Quality Management Team by the 15th of the month indicated above.

**SFY 2014 Performance Contract Report/Data Submission Requirements Summary Of Performance**  
**First Quarter Report**  
**July 1, 2013 - September 30, 2013**

LME-MCO	Report Submission Measures						Data Submission Measures															
	Number of Report Submission Measures Met	Total Number of Report Submission Measures *	Percent of Report Submission Measures Met	2. Quarterly Fiscal Monitoring Report (Current Qtr)	3. SA/JJ Initiative Quarterly Report	4. Work First Initiative Quarterly Report	Number of Data Submission Measures Met	Total Number of Data Submission Measures	Percent of Data Submission Measures Met	5. CDW - Screening Record	7. CDW - ICD-9 Diagnosis	8. CDW - Unknown Data (Admissions)	9. CDW - Unknown Data (Discharges)	10. CDW - Identifying and Demographic Records	11. CDW - Drug of Choice	12. CDW - Episode Completion Records (SA Clients)	13. NC TOPPS - Initial	14. NC TOPPS - Update	15. NC-SNAP			
Alliance Behavioral Healthcare	2	2	100%	This measure is under revision and the results were not reported this quarter.	★	★	5	9	56%	★		★		★	★		This measure is under revision and the results were not reported this quarter.			★		
Cardinal Innovations Healthcare Solutions	1	2	50%					7	8	88%	★	★	★	★	★	★						N/A
CenterPoint Human Services	2	2	100%			★	★	9	9	100%	★	★	★	★	★	★				★	★	★
Coastal Care	2	2	100%			★	★	9	9	100%	★	★	★	★	★	★				★	★	★
East Carolina Behavioral Health	2	2	100%			★	★	8	9	89%	★	★	★	★	★					★	★	★
Eastpointe	2	2	100%			★	★	9	9	100%	★	★	★	★	★	★				★	★	★
MeckLINK Behavioral Healthcare	1	1	100%			N/A	★	8	9	89%	★	★	★	★	★	★				★		
Partners Behavioral Health Management	2	2	100%			★	★	7	9	78%	★	★	★	★	★	★						★
Sandhills Center	2	2	100%			★	★	8	9	89%	★	★	★	★	★	★						★
Smoky Mountain Center	2	2	100%			★	★	5	9	56%	★		★	★	★	★						
Western Highlands Network	2	2	100%			★	★	7	9	78%	★	★	★	★	★	★						★
<b>STATEWIDE - Number</b>			<b>95%</b>			<b>0</b>	<b>9</b>	<b>11</b>	<b>84%</b>	<b>11</b>	<b>9</b>	<b>11</b>	<b>10</b>	<b>11</b>	<b>10</b>	<b>7</b>		<b>0</b>	<b>5</b>	<b>8</b>		
<b>STATEWIDE - Percent</b>						<b>0.0%</b>	<b>90.0%</b>	<b>100.0%</b>		<b>100.0%</b>	<b>81.8%</b>	<b>100.0%</b>	<b>90.9%</b>	<b>100.0%</b>	<b>90.9%</b>	<b>63.6%</b>		<b>0.0%</b>	<b>45.5%</b>	<b>80.0%</b>		

\* This column shows the total number of **report submission** measures that are applicable this quarter. Some reports are due quarterly, two are due semi-annually, and one is due annually.

★ Indicates the LME-MCO met the performance standard for the measure.

% Percents that are highlighted green indicate the LME-MCO met the performance standards for at least 65% of the measures in the respective category (e.g. report submission and/or data submission). Meeting the performance standards for at least 65% of the measures is one of the factors considered in LME-MCO monitoring decisions.

N/A Indicates measures that were not applicable this quarter.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

### 3. Substance Abuse/Juvenile Justice Initiative Quarterly Reports

**Performance Requirement:** LME-MCO submits a quarterly SA/Juvenile Justice Initiative Report by the 20th of the month following the end of the quarter (or next workday if the due date is a weekend or holiday).

**SFY 2014 Standard:** All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	1st Qtr Report Due 10/20/13				Standard Met <sup>2</sup>
	Juvenile Detention		JJSAMH Partnership		
	Date Received <sup>1</sup>	Accurate And Complete	Date Received <sup>1</sup>	Accurate And Complete	
Alliance Behavioral Healthcare	10/10/13	Yes	10/10/13	Yes	★
Cardinal Innovations Healthcare Solutions			10/11/13	No	
CenterPoint Human Services	10/9/13	Yes	10/9/13	Yes	★
CoastalCare	10/11/13	Yes	10/14/13	Yes	★
East Carolina Behavioral Health	10/10/13	Yes	10/10/13	Yes	★
Eastpointe			10/9/13	Yes	★
MeckLINK Behavioral Healthcare					N/A
Partners Behavioral Health Management	10/10/13	Yes	10/14/13	Yes	★
Sandhills Center	10/9/13	Yes	10/9/13	Yes	★
Smoky Mountain Center	10/10/13	Yes	N/A	N/A	★
Western Highlands Network	N/A	N/A	10/9/13	Yes	★

Number of Percent of LME-MCOs that Met the SFY2014 Standard:

9 (90%)

**Notes:**

1. Reports that are not complete or that were received >10 days after the due date are shaded red.

Reports with ***Italicized*** dates and yellow shading were received within 10 days after the due date.

2. ★ = Met the Performance Contract Standard. N/A = Not Applicable this quarter.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**4. Work First Initiative Quarterly Reports**

**Performance Requirement:** LME-MCO submits a quarterly Work First Initiative Report by the 20th of the month following the end of the quarter (or next workday if the due date is a weekend or holiday). Reports are accurate and complete.

**SFY 2014 Standard:** All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	1st Qtr Report Due 10/20/13		Standard Met <sup>2</sup>
	Date Received <sup>1</sup>	Accurate And Complete	
Alliance Behavioral Healthcare	10/18/2013	Yes	★
Cardinal Innovations Healthcare Solutions	10/17/2013	Yes	★
CenterPoint Human Services	10/16/2013	Yes	★
CoastalCare	10/17/2013	Yes	★
East Carolina Behavioral Health	10/20/2013	Yes	★
Eastpointe	10/20/2013	Yes	★
MeckLINK Behavioral Healthcare	10/11/2013	Yes	★
Partners Behavioral Health Management	10/18/2013	Yes	★
Sandhills Center	10/14/2013	Yes	★
Smoky Mountain Center	10/16/2013	Yes	★
Western Highlands	10/18/2013	Yes	★

Number and Percent of LME-MCOs that met the SFY 2014 Standard: 11 (100%)

**Notes:**

1. Dates that are shaded red indicate reports received >10 days after the due date.

Dates with yellow shading are within 10 days after the due date.

2. ★ = Met the Performance Contract Standard.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**5. Client Data Warehouse (CDW)  
 Screening Records**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Consumers who are screened by the LME-MCO's Access Unit and determined to have a mh/dd/sa problem will have a completed cross-reference to the Common Name Data Service (CNDS) in CDW within 30 days of the initial contact.

The table below shows the percentage of consumers screened by the LME-MCO's Access Unit during the prior quarter (April 1, 2013 - June 30, 2013) with a cross-reference to the CNDS completed within 30 days of initial contact.

SFY 2014 Standard: 90% of consumers screened by the LME-MCO's Access Unit who are determined to have a mh/dd/sa problem have a completed cross-reference to the CNDS within 30 days of initial contact.

LME-MCO	Number Screened With A MH/DD/SA Problem	Number Missing CNDS Cross-reference	Number Completed within 30 days	Percent With Records Completed Within 30 Days	Standard Met <sup>2</sup>
Alliance Behavioral Healthcare	438	3	435	99%	★
Cardinal Innovations Healthcare Solution	2,185	107	2,078	95%	★
CenterPoint Human Services	874	3	871	100%	★
CoastalCare	850	7	843	99%	★
East Carolina Behavioral Health	1,247	21	1,226	98%	★
Eastpointe	5,165	12	5,153	100%	★
MeckLINK Behavioral Healthcare	55	1	54	98%	★
Partners Behavioral Health Management	1,298	83	1,215	94%	★
Sandhills Center	547	14	533	97%	★
Smoky Mountain Center	583	50	533	91%	★
Western Highlands Network	2,716	0	2,716	100%	★
<b>TOTAL</b>	<b>15,958</b>	<b>301</b>	<b>15,657</b>	<b>98%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2014 Performance Standard:

11 (100%)

Notes:

1. Percentages less than 90% are shaded red.

2. ★ = Met the Performance Contract Standard.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**6. Client Data Warehouse (CDW)  
 Admissions**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Submitted admission records (record type 11) are complete and accurate.

The table below shows the number of admissions for which data was submitted to the CDW as of October 31, 2013.

LME-MCO	Facility Code	JUL	AUG	SEP	First Quarter Adm SFY2014	First Quarter Adm SFY2013	Monthly Average SFY2014	Monthly Average SFY2013
Alliance Behavioral Healthcare	23141	279	99	265	643	1,986	214	662
CenterPoint Human Services	23021	327	256	226	809	893	270	298
CoastalCare	43141	223	232	182	637	1,025	212	342
East Carolina Behavioral Health	43071	962	653	456	2,071	3,075	690	1,025
Eastpointe	43081	389	123	614	1,126	310	375	103
MeckLINK Behavioral Healthcare	13102	275	284	183	742	866	247	289
Partners Behavioral Health Management	13114	618	594	167	1,379	1,980	460	660
Cardinal Innovations Healthcare Solutions	13121	1,947	791	0	2,738	5,462	913	1,821
Sandhills Center	33031	1,394	1,308	1,010	3,712	2,949	1,237	983
Smoky Mountain Center	13010	462	220	312	994	473	331	158
Western Highlands Network	13131	648	769	680	2,097	2,145	699	715
<b>TOTAL ADMISSIONS</b>		<b>7,524</b>	<b>5,329</b>	<b>4,095</b>	<b>16,948</b>	<b>21,164</b>	<b>5,649</b>	<b>7,055</b>

Data that are shaded are incomplete or appear to be inaccurate (e.g. <100 or <40% of the prior year's quarter total).

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**7. Client Data Warehouse (CDW)  
 Diagnosis Records**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Open clients who are enrolled in a target population and receive a billable service will have a completed diagnosis in CDW within 30 days of the beginning date of service (1 quarter lag time is allowed for submission). A missing diagnosis is defined as DHHS not being able to secure a diagnosis from a service claim (IPRS or Medicaid) or a Record Type 13.

The table below shows the percentage of clients admitted during the prior quarter (April 1, 2013 - June 30, 2013) with a diagnosis completed within 30 days of beginning date of service.

SFY 2014 Standard: 90% of open clients who are enrolled in a target population and receive a billable service have a diagnosis in CDW within 30 days of beginning service.

LME-MCO	Number of Admissions	Number Missing Diagnosis	Number Completed within 30 days	Percent With Records Completed Within 30 Days	Standard Met <sup>2</sup>
Alliance Behavioral Healthcare	1,183	298	885	75%	
Cardinal Innovations Healthcare Solution	6,830	8	6,822	100%	★
CenterPoint Human Services	1,058	6	1,052	99%	★
CoastalCare	697	16	681	98%	★
East Carolina Behavioral Health	3,680	12	3,668	100%	★
Eastpointe	3,030	261	2,769	91%	★
MeckLINK Behavioral Healthcare	284	3	281	99%	★
Partners Behavioral Health Management	1,886	4	1,882	100%	★
Sandhills Center	3,719	115	3,604	97%	★
Smoky Mountain Center	905	218	687	76%	
Western Highlands Network	1,926	0	1,926	100%	★
<b>TOTAL</b>	<b>25,198</b>	<b>941</b>	<b>24,257</b>	<b>96%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2014 Standard: 9 (81.8%)

Notes:

1. Percentages less than 90% are shaded red.
2. ★ = Met the Performance Contract Standard.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**8. Client Data Warehouse (CDW)  
 "Unknown" Value In Mandatory Fields (Admissions)**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Mandatory fields contain a value other than "unknown".

The table below shows the percentage of clients admitted during the prior quarter (April 1, 2013 - June 30, 2013) where all mandatory data fields contain a value other than 'unknown'.

SFY 2014 Standard: 90% of all mandatory data fields for the prior quarter contain a value other than "unknown".

LME-MCO	Admission Records	County	Race	Ethnicity	Gender	Marital Status	Employment	Education	Veteran Status	Family Income	Family Size	Arrests 30 Days	Attention Self Help	Standard Met <sup>2</sup>
Alliance Behavioral Healthcare	1,183	100%	99%	100%	100%	99%	100%	97%	100%	100%	100%	100%	100%	★
Cardinal Innovations Healthcare Solutions	6,830	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
CenterPoint Human Services	1,058	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
CoastalCare	697	99%	100%	100%	100%	100%	100%	98%	99%	100%	100%	100%	100%	★
East Carolina Behavioral Health	3,680	100%	98%	100%	100%	99%	100%	99%	100%	100%	100%	100%	100%	★
Eastpointe	3,030	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
MeckLINK Behavioral Healthcare	284	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
Partners Behavioral Health Management	1,886	99%	100%	100%	100%	100%	100%	97%	99%	100%	100%	100%	100%	★
Sandhills Center	3,719	100%	100%	98%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
Smoky Mountain Center	905	97%	99%	97%	100%	98%	100%	92%	98%	100%	100%	100%	100%	★
Western Highlands Network	1,926	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
<b>TOTAL</b>	<b>25,198</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>99%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2014 Standard:

11 (100%)

Notes:

1. Percentages less than 90% are shaded red.
2. ★ = Met the Performance Contract Standard.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**9. Client Data Warehouse (CDW)  
 "Unknown" Value In Mandatory Fields (Discharges)**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Mandatory fields contain a value other than "unknown". The table below shows the percentage of clients discharged during the prior quarter (April 1, 2013 - June 30, 2013) where all mandatory data fields contain a value other than 'unknown'.

SFY 2014 Standard: 90% of all mandatory data fields for the prior quarter contain a value other than "unknown".

LME-MCO	Discharge Records	Discharge Reason	Referral To	Living Arrangement	Employment Status	Arrests Prior 30 Days	Attention Self Help	Standard Met <sup>2</sup>
Alliance Behavioral Healthcare	294	62%	62%	62%	61%	62%	62%	
Cardinal Innovations Healthcare Solution	1,912	100%	100%	100%	100%	100%	100%	★
CenterPoint Human Services	394	100%	100%	100%	100%	100%	100%	★
CoastalCare	302	100%	100%	100%	100%	100%	100%	★
East Carolina Behavioral Health	713	100%	100%	100%	100%	100%	100%	★
Eastpointe	27	100%	100%	100%	100%	100%	100%	★
MeckLINK Behavioral Healthcare	324	100%	100%	100%	99%	100%	100%	★
Partners Behavioral Health Management	196	100%	100%	100%	96%	100%	100%	★
Sandhills Center	953	99%	99%	99%	99%	99%	99%	★
Smoky Mountain Center	273	100%	100%	100%	95%	100%	100%	★
Western Highlands Network	1,619	100%	100%	100%	100%	100%	100%	★
<b>TOTAL</b>	<b>7,007</b>	<b>98%</b>	<b>98%</b>	<b>98%</b>	<b>98%</b>	<b>98%</b>	<b>98%</b>	<b>★</b>

Number and Pct of LME-MCOs that met the SFY 2014 Standard:

10 (90.9%)

Notes:

1. Percentages less than 90% are shaded red.
2. ★ = Met the Performance Contract Standard.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**10. Client Data Warehouse (CDW)  
 Identifying and Demographic Records**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Open clients who are enrolled in a target population and receive a billable service will have a completed identifying record (record type 10) and a completed demographic record (record type 11) in CDW within 30 days of the beginning date of service on the paid claims record.

The table below shows the percentage of clients admitted during the prior quarter (April 1, 2013 - June 30, 2013) with an identifying record and demographic record completed within 30 days of the beginning date of service.

SFY 2014 Standard: 90% of open clients who are enrolled in a target population and receive a billable service have completed identifying and demographic records within 30 days of the beginning date of service.

LME-MCO	Number of Claims <sup>3</sup>	Number Missing Records	Number Completed within 30 days	Percent With Records Completed Within 30 Days	Standard Met <sup>2</sup>
Alliance Behavioral Healthcare	3,699	198	3,501	95%	★
Cardinal Innovations Healthcare Solutions	2,905	2	2,903	100%	★
CenterPoint Human Services	1,920	37	1,883	98%	★
CoastalCare	2,275	92	2,183	96%	★
East Carolina Behavioral Health	1,978	197	1,781	90%	★
Eastpointe	2,263	114	2,149	95%	★
MeckLINK Behavioral Healthcare	730	26	704	96%	★
Partners Behavioral Health Management	2,506	97	2,409	96%	★
Sandhills Center	1,769	65	1,704	96%	★
Smoky Mountain Center	2,452	166	2,286	93%	★
Western Highlands Network	1,138	2	1,136	100%	★
<b>TOTAL</b>	<b>23,635</b>	<b>996</b>	<b>22,639</b>	<b>96%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2014 Standard:

11 (100%)

Notes:

1. Percentages less than 90% are shaded red.

2. ★ = Met the Performance Contract Standard.

3. Only includes IPRS claims.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**11. Client Data Warehouse (CDW)  
 Drug Of Choice Data**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. A drug of choice record (record type 17) is completed within 60 days of the beginning date of service for clients enrolled in any of the following target populations: ASCDR, ASCJO, ASCS, ASDSS, ASTNC, CSTNC, ASTER, ASWOM, CSCS, CSMAJ, and CSSAD.

The table below shows the percentage of open clients in the designated target populations (April 1, 2013 - June 30, 2013) with a drug of choice record completed within 60 days of the beginning date of service.

SFY 2014 Standard: 90% of open clients in the designated target populations have a drug of choice record completed within

LME-MCO	Number of Claims <sup>3</sup>	Number Missing Records	Number Completed within 60 days	Percent With Records Completed Within 60 Days	Standard Met <sup>2</sup>
Alliance Behavioral Healthcare	1,107	95	1,012	91%	★
Cardinal Innovations Healthcare Solutions	963	69	894	93%	★
CenterPoint Human Services	521	17	504	97%	★
CoastalCare	523	31	492	94%	★
East Carolina Behavioral Health	919	73	846	92%	★
Eastpointe	547	2	545	100%	★
MeckLINK Behavioral Healthcare	286	9	277	97%	★
Partners Behavioral Health Management	688	2	686	100%	★
Sandhills Center	527	8	519	98%	★
Smoky Mountain Center	508	153	355	70%	
Western Highlands Network	323	0	323	100%	★
<b>TOTAL</b>	<b>6,912</b>	<b>459</b>	<b>6,453</b>	<b>93%</b>	<b>★</b>

Number and Pct of LME-MCOs that met the SFY 2014 Standard: 10 (90.9%)

Notes:

1. Percentages less than 90% are shaded red.
2. ★ = Met the Performance Contract Standard.
3. Only includes IPRS claims.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**12. Client Data Warehouse (CDW)  
 Episode Completion (Discharge) Record - Substance Abuse Clients**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. An episode completion (discharge) record (Record Type 12) is completed for all consumers (except for members of the AMSRE target population) who have had no billable service for at least 60 days. This report separately focuses on **SA clients** who are identified for reporting to TEDS (Treatment Episodes Data System).

The table below shows the percentage of SA clients admitted since October 1, 2006, when this measure began, who during the prior quarter (April 1, 2013 - June 30, 2013) have had a billable service, administrative activity, or if neither occurred for at least 60 days, have submitted an episode completion record.

SFY 2014 Standard: 90% of SA clients admitted since October 1, 2006, who are not in the AMSRE target population, have had a billable service, administrative activity, or if neither occurred for at least 60 days, have submitted an episode completion record.

LME-MCO	Number of Clients Admitted Since October 1, 2006, Not in the AMSRE Target Population	Number <u>without</u> Appropriate Activity or an Episode Completion Record <sup>3</sup>	Number <u>with</u> Appropriate Activity or an Episode Completion Record <sup>4</sup>	Percent <u>with</u> Appropriate Activity or an Episode Completion Record	Standard Met <sup>2</sup>
Alliance Behavioral Healthcare	209	36	173	83%	
Cardinal Innovations Healthcare Solutions	510	13	497	97%	★
CenterPoint Human Services	100	0	100	100%	★
CoastalCare	157	0	157	100%	★
East Carolina Behavioral Health	357	45	312	87%	
Eastpointe	581	3	578	99%	★
MeckLINK Behavioral Healthcare	69	3	66	96%	★
Partners Behavioral Health Management	206	49	157	76%	
Sandhills Center	714	48	666	93%	★
Smoky Mountain Center	143	4	139	97%	★
Western Highlands Network	109	27	82	75%	
<b>TOTAL</b>	<b>3,155</b>	<b>228</b>	<b>2,927</b>	<b>93%</b>	<b>★</b>

Number and Pct of LME-MCOs that met the SFY 2014 Standard:

7 (63.6%)

Notes:

1. Percentages less than 90% are shaded red.
2. ★ = Met the Performance Contract Standard.
3. Number without a billable service or administrative activity for at least 60 days, and an Episode Completion Record was not submitted.
4. Number with a billable service, administrative activity, or if neither occurred for at least 60 Days, an Episode Completion Record was submitted.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**14. NC Treatment Outcomes and Program Performance System (NC-TOPPS)  
 Update Assessments**

**Performance Requirement:** The LME-MCO, through providers, will collect outcomes information on its consumers following sampling methods and reporting schedules for the instrument being used. The instrument used will depend on the type of consumer. The NC-TOPPS is required for all MH/SA consumers ages six and older and shall be entered in the web-based system within 30 days of completion of the assessment as specified in the NC-TOPPS Implementation Guidelines. An update assessment must be completed within two weeks before or after the required update month (e.g. 3-months, 6-months, 12-months, 18-months, etc). All update assessments shall be complete and accurate. The DMH/DD/SAS shall annually sample consumers with initial assessments to determine the timeliness and accuracy of 3-month update assessments. The 3-month update assessments shall be administered between 76 and 104 days after the initial assessment. To ensure accuracy and completeness, data reported below are for two quarters ago (time-lagged two quarters).

SFY 2014 Standard: 90% of the expected update forms are received and are timely.

LME-MCO	Expected # of Update Instruments	Receipt		Timeliness		Standard Met <sup>2</sup>
		# of Update Assessments Received	% of Expected Assessments Received <sup>1</sup>	# of Update Assessments Received On-Time	% of Expected Assessments Received On-Time <sup>1</sup>	
Alliance Behavioral Healthcare	1,803	1,599	88.7%	1,415	78.5%	
Cardinal Innovations Healthcare Solution	1,237	1,187	96.0%	1,094	88.4%	
CenterPoint Human Services	632	624	98.7%	604	95.6%	★
CoastalCare	708	708	100.0%	697	98.4%	★
East Carolina Behavioral Health	555	555	100.0%	541	97.5%	★
Eastpointe	1,397	1,397	100.0%	1,385	99.1%	★
MeckLINK Behavioral Healthcare	1,260	1,244	98.7%	1,164	92.4%	★
Partners Behavioral Health Management	1,364	1,318	96.6%	1,185	86.9%	
Sandhills Center	1,435	1,273	88.7%	1,190	82.9%	
Smoky Mountain Center	517	444	85.9%	385	74.5%	
Western Highlands Network	715	598	83.6%	513	71.7%	
<b>Totals</b>	<b>11,623</b>	<b>10,947</b>	<b>94.2%</b>	<b>10,173</b>	<b>87.5%</b>	

Number and Percent of LME-MCOs that met the SFY 2014 Standard:

5 (45.5%)

**Notes:**

1. Percentages less than 90% are shaded red.
2. ★ = Met the Performance Contract Standard.

SFY 2014 Performance Contract Data/Report Submission Requirements  
 First Quarter Report  
 July 1, 2013 - September 30, 2013

**15. NC Support Needs Assessment Profile (NC-SNAP)**

**Performance Requirement:** The LME-MCO, through providers, will submit to DMH/DD/SAS, by the 15th of each month, an electronically transmitted file (SQL or FTP) containing current assessment forms for all consumers receiving or requesting DD services.

**SFY 2014 Standard:** 90% of current assessments are no more than 15 months old.

LME-MCO	Currency Of Assessments			Standard Met <sup>2</sup>
	# Received	# No More Than 15 Months Old	% No More Than 15 Months Old <sup>1</sup>	
Alliance Behavioral Healthcare	3,160	2,995	94.8%	★
Cardinal Innovations Healthcare Solutions	LME-MCO submits data through special waiver not the NC-SNAP			N/A
CenterPoint Human Services	1,225	1,225	100.0%	★
CoastalCare	1,444	1,443	99.9%	★
East Carolina Behavioral Health	1,616	1,577	97.6%	★
Eastpointe	3,800	3,798	99.9%	★
MeckLINK Behavioral Healthcare	1,909	1,588	83.2%	
Partners Behavioral Health Management	2,274	2,159	94.9%	★
Sandhills Center	1,794	1,793	99.9%	★
Smoky Mountain Center	1,246	1,005	80.7%	
Western Highlands Network	1,311	1,311	100.0%	★
<b>Totals</b>	<b>19,779</b>	<b>18,894</b>	<b>95.5%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2014 Standard:

8 (80%)

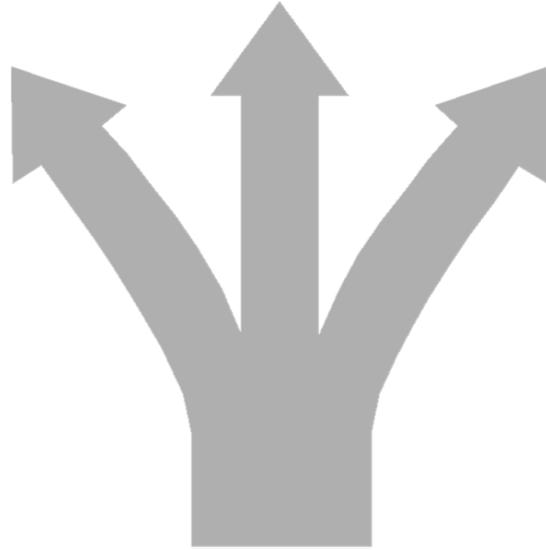
**Notes:**

1. Percentages less than 90% are shaded red.
2. ★ = Met the Performance Contract Standard. N/A = Not Applicable this quarter.

**Appendix: Summary of Revisions Made to the SFY2014 First Quarter Report**

The NC Support Needs Assessment Profile (NC-SNAP) Report was revised to provide corrected data for all LME-MCOs. This resulted in 8 of 10 LME-MCOs exceeding the performance standard of 90% of current assessments being no more than 15 months old, with a statewide average of 95.5%. This also changed the overall results reported in the Introduction and Summary of Performance showing that LME-MCOs met 84% of the nine data submission requirements measured this quarter.

The Substance Abuse/Juvenile Justice Initiative Report was revised to show Partners Behavioral Health Management and Smoky Mountain Center as submitting the Juvenile Detention Report on time and accurate/complete. Also, Smoky Mountain Center 's JJSAMH Partnership Report and Western Highland's Juvenile Detention Report was not applicable this quarter.



**Please give us feedback so we can improve these reports by making them more informative and more useful to you!**

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