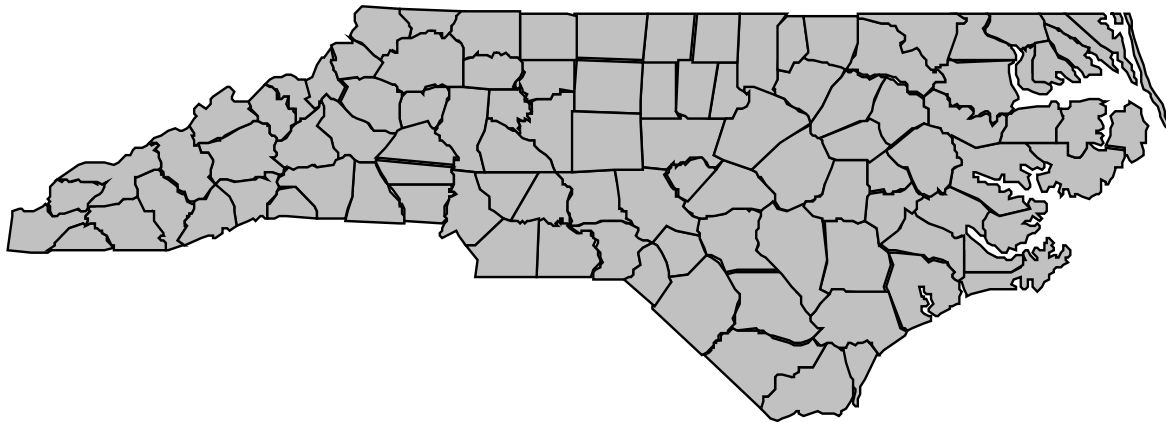


**North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities,
and Substance Abuse Services**

**SFY 2015 Performance Contract
With Local Management Entities - Managed Care Organizations
Report/Data Submission Requirements**

**Second Quarter Report
October 1, 2014 - December 31, 2014**



Prepared by

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

February 2015



Introduction

This is the **Second Quarter Report** for SFY 2014-2015 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 94 percent of the seven report submission requirements and 81 percent of the nine data submission/report 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. The results in the Quarterly Complaints Report show what was previously reported in the first quarter, due to schedule changes intended to provide you with a more timely response.

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 2015 Performance Contract
 Report/Data Submission Requirements
 Second Quarter Report
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SFY 2015 Performance Contract Report Schedule

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

Requirement	1st Qtr Nov 30	2nd Qtr Feb 28	3rd Qtr May 30	4th Qtr Aug 30
1. Monthly Financial Reports	X	X	X	X
2. Substance Abuse/Juvenile Justice Initiative Quarterly Report	X	X	X	X
3. Work First Initiative Quarterly Reports	X	X	X	X
4. Traumatic Brain Injury (TBI) Services Quarterly Report	X	X	X	X
5. Projects For Assistance In Transitions From Homelessness (PATH) Report	X	X	X	X
6. Quarterly Complaints Report	X	X	X	X
7. Client Data Warehouse (CDW) - Screening Record	X	X	X	X
8. Client Data Warehouse (CDW) - Admissions	X	X	X	X
9. Client Data Warehouse (CDW) - ICD-9 Diagnosis	X	X	X	X
10. Client Data Warehouse (CDW) - Unknown Data (Admissions)	X	X	X	X
11. Client Data Warehouse (CDW) - Unknown Data (Discharges)	X	X	X	X
12. Client Data Warehouse (CDW) - Identifying and Demographic Records	X	X	X	X
13. Client Data Warehouse (CDW) - Drug of Choice	X	X	X	X
14. Client Data Warehouse (CDW) - Episode Completion Record (SA Clients)	X	X	X	X
15. NC Treatment Outcomes and Program Performance System (Initial)	Report under revision			
16. NC Treatment Outcomes and Program Performance System (Update)	X	X	X	X
17. NC Support Needs Assessment Profile (NC-SNAP)	X	X	X	X
18. System of Care Report		X		X
19. SAPTBG Compliance Report		X		X
20. National Core Indicators (NCI) Consents, Pre-Surveys, and Mail Surveys				X

*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 2015 Performance Contract Report/Data Submission Requirements Summary Of Performance
Second Quarter Report
October 1, 2014 - December 31, 2014**

Report Submission Measures

Data Submission Measures

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	1. Monthly Financial Report	2. SA/JJ Initiative Quarterly Report	3. Work First Initiative Quarterly Report	4. TBI Services Quarterly Report	5. Quarterly Complaints Report	17. System of Care Quarterly Report	18. SAPTBG Compliance Semi-Annual Report	Number of Data Submission Measures Met	Total Number of Data Submission Measures	Percent of Data Submission Measures Met	6. CDW - Screening Record	8. CDW - ICD-9 Diagnosis	9. CDW - Unknown Data (Admissions)	10. CDW - Unknown Data (Discharges)	11. CDW - Identifying and Demographic Records	12. CDW - Drug of Choice	13. CDW - Episode Completion Records (SA Clients)	15. NC TOPPS - Update	16. NC-SMAP
Alliance Behavioral Healthcare	6	7	86%	★	★	★	★		★	★	6	9	67%	★		★	★	★	★			★
Cardinal Innovations Healthcare Solutions	7	7	100%	★	★	★	★	★	★	★	7	8	88%	★	★	★	★	★	★	★		N/A
CenterPoint Human Services	6	7	86%		★	★	★	★	★	★	9	9	100%	★	★	★	★	★	★	★	★	★
Coastal Care	6	7	86%		★	★	★	★	★	★	8	9	89%	★	★	★	★	★			★	★
East Carolina Behavioral Health	7	7	100%	★	★	★	★	★	★	★	3	9	33%		★						★	★
Eastpointe	7	7	100%	★	★	★	★	★	★	★	9	9	100%	★	★	★	★	★	★	★	★	★
Partners Behavioral Health Management	7	7	100%	★	★	★	★	★	★	★	7	9	78%	★	★	★	★	★				★
Sandhills Center	6	7	86%	★	★	★	★		★	★	8	9	89%		★	★	★	★	★	★	★	★
Smoky Mountain Center	7	7	100%	★	★	★	★	★	★	★	8	9	89%	★	★	★	★	★			★	★
STATEWIDE - Number			94%	7	9	9	9	7	9	9			81%	7	8	8	8	8	8	4	6	8
STATEWIDE - Percent				77.8%	100.0%	100.0%	100.0%	77.8%	100.0%	100.0%				77.8%	88.9%	88.9%	88.9%	88.9%	88.9%	44.4%	66.7%	100.0%

* This column shows the total number of **report submission** measures that apply 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 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

1. Monthly Financial Reports

Performance Requirement: LME-MCO submits all required monthly financial reports in acceptable format, completeness, and accuracy by the 20th of the month (or next business day if the due date is a weekend or holiday) following the month covered by the report. For example, the financial report covering the month of Jan is due by Feb

SFY 2015 Standard: Reports are accurate, complete, and received by the due date.

LME-MCO	SEP Report Due 10/20/14		OCT Report Due 11/20/14		NOV Report Due 12/22/14		DEC Report Due 1/20/15		Standard Met ¹
	Date Received ²	Accurate, Complete	Date Received ²	Accurate, Complete	Date Received ²	Accurate, Complete	Date Received ²	Accurate, Complete	
Alliance Behavioral Healthcare	10/20/14	Yes	11/20/14	Yes	12/16/14	Yes	1/16/15	Yes	★
Cardinal Innovations Healthcare Solutions	10/17/14	Yes	11/20/14	Yes	12/19/14	Yes	1/20/15	Yes	★
CenterPoint Human Services	10/17/14	No	11/20/14	No	12/19/14	Yes	1/16/15	Yes	
CoastalCare	10/17/14	No	11/19/14	No	12/16/14	Yes	1/20/15	Yes	
East Carolina Behavioral Health	10/20/14	Yes	11/19/14	Yes	12/15/14	Yes	1/20/15	Yes	★
Eastpointe	10/20/14	Yes	11/20/14	Yes	12/22/14	Yes	1/20/15	Yes	★
Partners Behavioral Health Management	10/15/14	Yes	11/14/14	Yes	12/8/14	Yes	1/8/15	Yes	★
Sandhills Center	10/20/14	Yes	11/20/14	Yes	12/22/14	Yes	1/20/15	Yes	★
Smoky Mountain Center	10/17/14	Yes	11/20/14	Yes	12/22/14	Yes	1/20/15	Yes	★

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

7 (77.8%)

Notes:

1. ★ = Met the Performance Contract Standard.
2. Red shading indicates reports that are not received by the due date or are not accurate and complete.

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

2. 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 business day if the due date is a weekend or holiday).

SFY 2015 Standard: All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	2nd Qtr Report Due 1/20/15				Standard Met ¹
	Juvenile Detention		JJSAMH Partnership		
	Date Received ²	Accurate And Complete	Date Received ²	Accurate And Complete	
Alliance Behavioral Healthcare	1/9/15	Yes	1/9/15	Yes	★
Cardinal Innovations Healthcare Solutions			1/12/15	Yes	★
CenterPoint Human Services	1/12/15	Yes	1/12/15	Yes	★
CoastalCare	1/8/15	Yes	1/12/15	Yes	★
East Carolina Behavioral Health	1/9/15	Yes	1/9/15	Yes	★
Eastpointe			1/8/15	Yes	★
Partners Behavioral Health Management	1/9/15	Yes	1/13/15	Yes	★
Sandhills Center	1/12/15	Yes	1/12/15	Yes	★
Smoky Mountain Center	1/7/15	Yes	1/7/15	Yes	★

Number of Percent of LME-MCOs that Met the SFY2015 Standard:

9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard. **N/A** = Not Applicable this quarter.
2. Reports that are not complete or that were received >10 days after the due date are shaded red.
3. Reports with ***italicized*** dates and yellow shading were received within 10 days after the due date.

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

3. 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 business day if the due date is a weekend or holiday).

SFY 2015 Standard: All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	2nd Qtr Report Due 1/20/15		Standard Met ¹
	Date Received ²	Accurate And Complete	
Alliance Behavioral Healthcare	1/16/2015	Yes	★
Cardinal Innovations Healthcare Solutions	1/16/2015	Yes	★
CenterPoint Human Services	1/14/2015	Yes	★
CoastalCare	1/16/2015	Yes	★
East Carolina Behavioral Health	1/20/2015	Yes	★
Eastpointe	1/14/2015	Yes	★
Partners Behavioral Health Management	1/20/2015	Yes	★
Sandhills Center	1/14/2015	Yes	★
Smoky Mountain Center	1/20/2015	Yes	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard: 9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. 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.

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

4. Quarterly Traumatic Brain Injury (TBI) Services Report

Performance Requirement: LME-MCO submits all required Traumatic Brain Injury (TBI) Services reports in acceptable format by the following due dates (or next business day if the due date is a weekend or holiday):

- First quarter report = Dec 31.
- Second quarter report = Mar 31.
- Third quarter report = Jun 30.
- Fourth quarter report = Aug 31.

SFY 2015 Standard: Reports are accurate, complete, and received by the due date.

LME-MCO	1st Qtr Report Due 12/31/14		
	Date Received ²	Accurate, Complete	Standard Met ¹
Alliance Behavioral Healthcare	12/31/14	Yes	★
Cardinal Innovations Healthcare Solutions	12/31/14	Yes	★
CenterPoint Human Services	12/30/14	Yes	★
CoastalCare	12/22/14	Yes	★
East Carolina Behavioral Health	12/22/14	Yes	★
Eastpointe	12/22/14	Yes	★
Partners Behavioral Health Management	12/22/14	Yes	★
Sandhills Center	12/23/14	Yes	★
Smoky Mountain Center	12/31/14	Yes	★

Number and Percent of LME-MCOs that met the Performance Standard: 9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Red shading indicates reports that are not received by the due date or are not accurate and complete.

SFY 2015 Performance Contract Data/Report Submission Requirements
 First Quarter Report
 July 1, 2014 - September 30, 2014

5. Quarterly Complaints Report

Performance Requirement: LME-MCO submits all required Complaints reports in acceptable format by the following due dates (or next business day if the due date is a weekend or holiday):

- First quarter report = Nov 15.
- Second quarter report = Feb 15.
- Third quarter report = May 15.
- Fourth quarter report = Aug 15.

SFY 2015 Standard:

Reports are accurate, complete, and received by the due date.

LME-MCO	1st Qtr Report Due 11/17/14		
	Date Received ²	Accurate, Complete	Standard Met ¹
Alliance Behavioral Healthcare	11/18/14	Yes	
Cardinal Innovations Healthcare Solutions	11/14/14	Yes	★
CenterPoint Human Services	11/13/14	Yes	★
CoastalCare	11/14/14	Yes	★
East Carolina Behavioral Health	11/14/14	Yes	★
Eastpointe	11/13/14	Yes	★
Partners Behavioral Health Management	11/7/14	Yes	★
Sandhills Center	11/18/14	Yes	
Smoky Mountain Center	11/17/14	Yes	★

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

7 (77.8%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Red shading indicates reports that are received before the quarter has ended, not received by the due date, or are not accurate and complete.

3. This is a repeat of the 1st quarter report, due to changes in our reporting schedule. The next compliance report will reflect the 2nd quarter information.

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

**6. 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 (July 1, 2014 - September 30, 2014) with a cross-reference to the CNDS completed within 30 days of initial contact.

SFY 2015 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 ²	Standard Met ¹
Alliance Behavioral Healthcare	11	1	10	91%	★
Cardinal Innovations Healthcare Solutions	1,483	58	1,425	96%	★
CenterPoint Human Services	495	0	495	100%	★
CoastalCare	29	0	29	100%	★
East Carolina Behavioral Health	0	0	0	0%	
Eastpointe	4,709	29	4,680	99%	★
Partners Behavioral Health Management	12	0	12	100%	★
Sandhills Center	713	75	638	89%	
Smoky Mountain Center	90	1	89	99%	★
TOTAL	7,542	164	7,378	98%	★

Number and Percent of LME-MCOs that met the SFY 2015 Performance Standard: 7 (77.8%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

**7. 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 January 31, 2015.

LME-MCO	Facility Code	OCT	NOV	DEC	Second Quarter Adm SFY2015	Second Quarter Adm SFY2014	Monthly Average SFY2015	Monthly Average SFY2014
Alliance Behavioral Healthcare	23141	978	805	831	2,614	871	871	290
CenterPoint Human Services	23021	491	367	391	1,249	416	416	139
CoastalCare	43141	397	260	274	931	310	310	103
East Carolina Behavioral Health	43071	372	306	313	991	330	330	110
Eastpointe	43081	1,410	1,086	973	3,469	1,156	1,156	385
Partners Behavioral Health Management	13114	704	582	622	1,908	636	636	212
Cardinal Innovations Healthcare Solutions	13121	820	721	922	2,463	821	821	274
Sandhills Center	33031	395	260	113	768	256	256	85
Smoky Mountain Center	13010	959	567	708	2,234	745	745	248
TOTAL ADMISSIONS		6,526	4,954	5,147	16,627	5,542	5,542	1,847

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

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

**8. 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 (NCTRACKS or Medicaid) or a Record Type 13.

The table below shows the percentage of clients admitted during the prior quarter (July 1, 2014 - September 30, 2014) with a diagnosis completed within 30 days of beginning date of service.

SFY 2015 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 ²	Standard Met ¹
Alliance Behavioral Healthcare	2,872	838	2,034	71%	
Cardinal Innovations Healthcare Solutions	3,016	2	3,014	100%	★
CenterPoint Human Services	1,337	7	1,330	99%	★
CoastalCare	1,002	30	972	97%	★
East Carolina Behavioral Health	1,088	59	1,029	95%	★
Eastpointe	3,771	12	3,759	100%	★
Partners Behavioral Health Management	2,147	218	1,929	90%	★
Sandhills Center	1,117	0	1,117	100%	★
Smoky Mountain Center	3,059	199	2,860	93%	★
TOTAL	19,409	1,365	18,044	93%	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

8 (88.9%)

Notes:

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

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

**9. 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 (July 1, 2014 - September 30, 2014) where all mandatory data fields contain a value other than 'unknown'.

SFY 2015 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 ¹
Alliance Behavioral Healthcare	2,872	100.00%	99.00%	100.00%	100.00%	99.00%	100.00%	99.00%	97.00%	100.00%	100.00%	100.00%	100.00%	★
Cardinal Innovations Healthcare Solutions	3,016	100.00%	99.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	★
CenterPoint Human Services	1,337	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.00%	100.00%	100.00%	100.00%	100.00%	100.00%	★
CoastalCare	1,002	98.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.00%	99.00%	100.00%	100.00%	100.00%	100.00%	★
East Carolina Behavioral Health	1,088	100.00%	82.00%	95.00%	100.00%	98.00%	100.00%	91.00%	94.00%	100.00%	100.00%	100.00%	100.00%	
Eastpointe	3,771	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	★
Partners Behavioral Health Management	2,147	99.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.00%	98.00%	100.00%	100.00%	100.00%	100.00%	★
Sandhills Center	1,117	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	★
Smoky Mountain Center	3,059	100.00%	99.00%	99.00%	100.00%	98.00%	100.00%	92.00%	97.00%	100.00%	100.00%	100.00%	100.00%	★
TOTAL	19,409	100%	99%	100%	100%	99%	100%	98%	98%	100%	100%	100%	100%	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

8 (88.9%)

Notes:

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

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

**10. 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 (July 1, 2014 - September 30, 2014) where all mandatory data fields contain a value other than 'unknown'.

SFY 2015 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 ¹
Alliance Behavioral Healthcare	106	100%	100%	100%	98%	100%	100%	★
Cardinal Innovations Healthcare Solutions	1,534	100%	100%	100%	100%	100%	100%	★
CenterPoint Human Services	168	100%	100%	100%	100%	100%	100%	★
CoastalCare	118	100%	100%	100%	99%	100%	100%	★
East Carolina Behavioral Health	0	0%	0%	0%	0%	0%	0%	
Eastpointe	107	100%	100%	100%	100%	100%	100%	★
Partners Behavioral Health Management	856	100%	100%	100%	99%	100%	100%	★
Sandhills Center	2,153	100%	100%	100%	100%	100%	100%	★
Smoky Mountain Center	1,588	100%	100%	100%	94%	100%	100%	★
TOTAL	6,630	100%	100%	100%	98%	100%	100%	★

Number and Pct of LME-MCOs that met the SFY 2015 Standard:

8 (88.9%)

Notes:

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

SFY 2015 Performance Contract Data/Report Submission Requirements
 Second Quarter Report
 October 1, 2014 - December 31, 2014

**11. 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 (July 1, 2014 - September 30, 2014) with an identifying record and demographic record completed within 30 days of the beginning date of service.

SFY 2015 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 ³	Number Missing Records	Number Completed within 30 days	Percent With Records Completed Within 30 Days ²	Standard Met ¹
Alliance Behavioral Healthcare	5,493	120	5,373	98%	★
Cardinal Innovations Healthcare Solutions	4,159	40	4,119	99%	★
CenterPoint Human Services	3,454	1	3,453	100%	★
CoastalCare	3,197	108	3,089	97%	★
East Carolina Behavioral Health	2,826	1,028	1,798	64%	
Eastpointe	3,201	22	3,179	99%	★
Partners Behavioral Health Management	4,667	92	4,575	98%	★
Sandhills Center	3,993	302	3,691	92%	★
Smoky Mountain Center	5,762	78	5,684	99%	★
TOTAL	36,752	1,791	34,961	95%	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard: 8 (88.9%)

Notes:

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

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**12. 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, CSM AJ, and CSSAD.

The table below shows the percentage of open clients in the designated target populations (July 1, 2014 - September 30, 2014) with a drug of choice record completed within 60 days of the beginning date of service.

SFY 2015 Standard: 90% of open clients in the designated target populations have a drug of choice record completed within 60 days.

LME-MCO	Number of Claims ³	Number Missing Records	Number Completed within 60 days	Percent With Records Completed Within 60 Days ²	Standard Met ¹
Alliance Behavioral Healthcare	1,244	93	1,151	93%	★
Cardinal Innovations Healthcare Solutions	590	22	568	96%	★
CenterPoint Human Services	837	6	831	99%	★
CoastalCare	655	15	640	98%	★
East Carolina Behavioral Health	726	335	391	54%	
Eastpointe	928	4	924	100%	★
Partners Behavioral Health Management	1,105	52	1,053	95%	★
Sandhills Center	548	12	536	98%	★
Smoky Mountain Center	1,379	26	1,353	98%	★
TOTAL	8,012	565	7,447	93%	★

Number and Pct of LME-MCOs that met the SFY 2015 Standard:

8 (88.9%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

3. Only includes NCTRACKS claims.

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**13. 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 (July 1, 2014 - September 30, 2014) have had a billable service, administrative activity, or if neither occurred for at least 60 days, have submitted an episode completion record.

SFY 2015 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 ³	Number <u>with</u> Appropriate Activity or an Episode Completion Record ⁴	Percent <u>with</u> Appropriate Activity or an Episode Completion Record ²	Standard Met ¹
Alliance Behavioral Healthcare	365	282	83	23%	
Cardinal Innovations Healthcare Solutions	425	8	417	98%	★
CenterPoint Human Services	206	2	204	99%	★
CoastalCare	214	40	174	81%	
East Carolina Behavioral Health	267	222	45	17%	
Eastpointe	641	12	629	98%	★
Partners Behavioral Health Management	417	223	194	47%	
Sandhills Center	105	10	95	90%	★
Smoky Mountain Center	514	168	346	67%	
TOTAL	3,154	967	2,187	69%	

Number and Pct of LME-MCOs that met the SFY 2015 Standard:

4 (44.4%)

Notes:

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

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**15. 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 2015 Standard: 90% of the expected update forms are received and are timely.

LME-MCO	Expected # of Update Instruments	Receipt		Timeliness		Standard Met ¹
		# of Update Assessments Received	% of Expected Assessments Received ²	# of Update Assessments Received On-Time	% of Expected Assessments Received On-Time ²	
Alliance Behavioral Healthcare	1,624	1,548	95.3%	1,410	86.8%	
Cardinal Innovations Healthcare Solutions	2,030	1,839	90.6%	1,704	83.9%	
CenterPoint Human Services	616	607	98.5%	604	98.1%	★
CoastalCare	747	746	99.9%	742	99.3%	★
East Carolina Behavioral Health	586	585	99.8%	579	98.8%	★
Eastpointe	1,476	1,475	99.9%	1,469	99.5%	★
Partners Behavioral Health Management	1,191	1,140	95.7%	1,055	88.6%	
Sandhills Center	1,227	1,202	98.0%	1,175	95.8%	★
Smoky Mountain Center	1,425	1,385	97.2%	1,318	92.5%	★
Totals	10,922	10,527	96.4%	10,056	92.1%	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

6 (66.7%)

Notes:

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

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16. 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 (or next business day if the due date is a weekend or holiday), an electronically transmitted file (SQL or FTP) containing current assessment forms for all consumers receiving or requesting DD services.

SFY 2015 Standard: 90% of current assessments are no more than 15 months old.

LME-MCO	Currency Of Assessments			Standard Met ¹
	# Received	# No More Than 15 Months Old	% No More Than 15 Months Old ²	
Alliance Behavioral Healthcare	3,165	3,010	95.1%	★
Cardinal Innovations Healthcare Solutions	LME submits data through special waiver not the NC-SNAP			N/A
CenterPoint Human Services	1,241	1,241	100.0%	★
CoastalCare	1,423	1,423	100.0%	★
East Carolina Behavioral Health	1,605	1,550	96.6%	★
Eastpointe	2,280	2,280	100.0%	★
Partners Behavioral Health Management	2,118	2,103	99.3%	★
Sandhills Center	2,105	2,105	100.0%	★
Smoky Mountain Center	2,188	2,187	100.0%	★
Totals	16,125	15,899	98.6%	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

8 (100%)

Notes:

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

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17. System of Care

Performance Requirement: LME-MCO submits a quarterly System of Care Report by the 15th of the month following the end of the quarter (or next business day if the due date is a weekend or holiday).

SFY 2015 Standard: All reports are accurate and complete and are received no later than 7 days after the due date.

LME-MCO	2nd Qtr Report Due 1/15/15		Standard Met ¹
	Date Received ²	Complete	
Alliance Behavioral Healthcare	1/15/15	Yes	★
Cardinal Innovations Healthcare Solutions	1/15/15	Yes	★
CenterPoint Human Services	1/15/15	Yes	★
CoastalCare	1/12/15	Yes	★
East Carolina Behavioral Health	1/15/15	Yes	★
Eastpointe	1/14/15	Yes	★
Partners Behavioral Health Management	1/12/15	Yes	★
Sandhills Center	1/14/15	Yes	★
Smoky Mountain Center	1/16/15	Yes	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Dates that are shaded red indicate reports received >7 days after the due date.

Dates with yellow shading are within 7 days after the due date.

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18. SAPTBG Compliance Report

Performance Requirement: The LME-MCO shall submit a semi-annual SAPTBG Compliance Report by the 20th of the month (or next business day if on a holiday or weekend) following the end of the semi-annual period. Reports are accurate and complete and show at least 48 hours of Synar activity for the period.

SFY 2015 Standard: All reports are accurate and complete, show 48 hours of Synar activity, and are received no later than 10 days after the due date.

LME-MCO	Mid-Year Report (Due 1/20/15)			Standard Met ¹
	Date Received ²	Accurate and Complete	48 Hours Of Synar Activity ²	
Alliance Behavioral Healthcare	1/20/15	Yes	Yes	★
Cardinal Innovations Healthcare Solutions	1/23/15	Yes	Yes	★
CenterPoint Human Services	1/16/15	Yes	Yes	★
CoastalCare	1/20/15	Yes	Yes	★
East Carolina Behavioral Health	1/20/15	Yes	Yes	★
Eastpointe	1/16/15	Yes	Yes	★
Partners Behavioral Health Management	1/20/15	Yes	Yes	★
Sandhills Center	1/15/15	Yes	Yes	★
Smoky Mountain Center	1/16/15	Yes	Yes	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

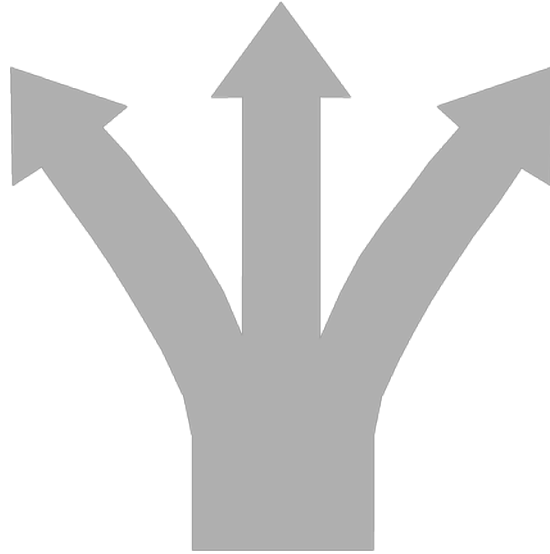
9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Dates received more than 10 days after the due date and Synar Activities < 48 hours are highlighted red.

Dates received within 10 days after the due date are highlighted yellow.



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

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