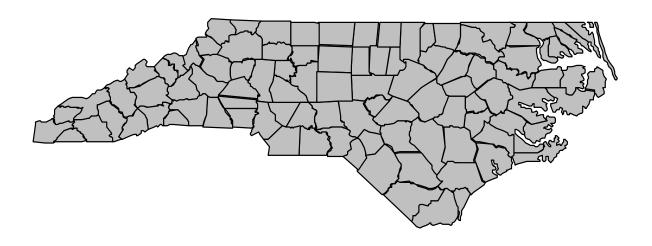
North Carolina Department of Health and Human Services Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

SFY 2016 Performance Contract With Local Management Entities - Managed Care Organizations Report/Data Submission Requirements

First Quarter Report July 1, 2015 - September 30, 2015



Prepared by

Quality Management Section

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

North Carolina Department of Health and Human Services

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Introduction

This is the **First Quarter Report** for SFY 2015-2016 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 guarter 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 (\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 95 percent of the five report submission requirements and 90 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.

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 2016 Performance Contract Report/Data Submission Requirements First Quarter Report

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SFY 2016 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	Х	Х	Х	Х
2. Substance Abuse/Juvenile Justice Initiative Quarterly Report	Х	Х	Х	Х
3. Work First Initiative Quarterly Reports	Х	Х	Х	Х
4. Traumatic Brain Injury (TBI) Services Quarterly Report	Х	Х	Х	Х
5. Projects For Assistance In Transitions From Homelessness (PATH) Report	Х	Х	Х	Х
6. Quarterly Complaints Report	Х	Х	Х	Х
7. Client Data Warehouse (CDW) - Screening Record	Х	Х	Х	Х
8. Client Data Warehouse (CDW) - Admissions	Х	Х	Х	Х
9. Client Data Warehouse (CDW) - Diagnosis Record	Х	Х	Х	Х
10. Client Data Warehouse (CDW) - Unknown Data (Admissions)	Х	Х	Х	Х
11. Client Data Warehouse (CDW) - Unknown Data (Discharges)	Х	Х	Х	Х
12. Client Data Warehouse (CDW) - Identifying and Demographic Records	Х	Х	Х	Х
13. Client Data Warehouse (CDW) - Drug of Choice	Х	Х	Х	Х
14. Client Data Warehouse (CDW) - Episode Completion Record (SA Clients)	Х	Х	Х	Х
15. NC Treatment Outcomes and Program Performance System (Initial)	R	eport un	der revisi	on
16. NC Treatment Outcomes and Program Performance System (Update)	Х	Х	Х	Х
17. NC Support Needs Assessment Profile (NC-SNAP)	Х	Х	Х	Х
18. System of Care Report		Х		Х
19. SAPTBG Compliance Report		Х		Х
20. National Core Indicators (NCI) Consents, Pre-Surveys, and Mail Surveys				Х

^{*}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 2016 Performance Contract Report/Data Submission Requirements Summary Of Performance First Quarter Report July 1, 2015 - September 30, 2015

				Repor	t Submiss	ion Meas	ures								Data	Submiss	ion Meas	ures			
OOMSWT	Number of Report Sur.	Total Number	Percent of Report	Monthly Financia.	2. SAJJJ Initiative Quarter.	3. Work First Initiative	4. TBI Services Quarteri	5. Quarterly Complaints Renner		Total Number	Percent of Data S	Reasures Met Sion S. CDW - Screening S	3. CDW - Diagnosis p	9. CDW - Unknown Data	10. CDW - Unknown Data	~ / Š	12. CDW - Drug of C.	13. CDW - Episode	Clients) 4. NC TOPPS. LEAS	IS. NC TOPPS. IL.	16. NC-SNAp
Alliance Behavioral Healthcare	4	5	80%		*	*	*	*	7	9	78%	*	*	*	*	*	*				*
Cardinal Innovations Healthcare Solutions	4	5	80%		*	*	*	*	6	8	75%	*	*	*	*	*		*	er.		N/A
CenterPoint Human Services	5	5	100%	*	*	*	*	*	9	9	100%	*	*	*	*	*	*	*	revision -	*	*
Eastpointe	5	5	100%	*	*	*	*	*	8	9	89%	*	*	*	*	*	*		under ed this	*	*
Partners Behavioral Health Management	5	5	100%	*	*	*	*	*	8	9	89%		*	*	*	*	*	*	re is u	*	*
Sandhills Center	5	5	100%	*	*	*	*	*	9	9	100%	*	*	*	*	*	*	*	meası Its not	*	*
Smoky Mountain Center	5	5	100%	*	*	*	*	*	8	9	89%	*	*	*	*	*	*		This	*	*
Trillium Health Resources	5	5	100%	*	*	*	*	*	9	9	100%	*	*	*	*	*	*	*		*	*
STATEWIDE - Number			95%	6	8	8	8	8			90%	7	8	8	8	8	7	5	0	6	7
STATEWIDE - Percent				75.0%	100.0%	100.0%	100.0%	100.0%				87.5%	100.0%	100.0%	100.0%	100.0%	87.5%	62.5%	0.0%	75.0%	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.

1. Monthly Financial Reports

<u>Performance Requirement</u>: 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

SFY 2016 Standard:

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

	JUN Report	Due 7/31/15	JUL Report	Due 8/20/15	AUG Report	Due 9/21/15	
LME-MCO	Date Received ²	Accurate, Complete	Date Received ²	Accurate, Complete	Date Received ²	Accurate, Complete	Standard Met ¹
Alliance Behavioral Healthcare	7/31/15	Yes	8/24/15	No	9/21/15	Yes	
Cardinal Innovations Healthcare Solutions	8/10/15	No	8/20/15	Yes	9/18/15	Yes	
CenterPoint Human Services	7/16/15	Yes	8/20/15	Yes	9/18/15	Yes	*
Eastpointe	7/31/15	Yes	8/20/15	Yes	9/21/15	Yes	*
Partners Behavioral Health Management	7/31/15	Yes	8/20/15	Yes	9/11/15	Yes	*
Sandhills Center	7/30/15	Yes	8/20/15	Yes	9/18/15	Yes	*
Smoky Mountain Center	7/31/15	Yes	8/20/15	Yes	9/21/15	Yes	*
Trillium Health Resources	7/31/15	Yes	8/20/15	Yes	9/18/15	Yes	*

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

6 (75%)

- 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.

2. Substance Abuse/Juvenile Justice Initiative Quarterly Reports

<u>Performance Requirement</u>: 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 2016 Standard:

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

		1st	Qtr Report Due 10/20	0/15	
LME-MCO	Juvenile I	Detention	JJSAMH P		
	Date Received ²	Accurate And Complete	Date Received ²	Accurate And Complete	Standard Met ¹
Alliance Behavioral Healthcare	10/9/15	Yes	10/9/15	Yes	*
Cardinal Innovations Healthcare Solutions	10/19/15	Yes	10/19/15	Yes	*
CenterPoint Human Services	10/2/15	Yes	10/2/15	Yes	*
Eastpointe			10/8/15	Yes	*
Partners Behavioral Health Management	10/16/15	Yes	10/16/15	Yes	*
Sandhills Center	10/6/15	Yes	10/12/15	Yes	*
Smoky Mountain Center	10/8/15	Yes	10/8/15	Yes	*
Trillium Health Resources	10/9/15	Yes	10/12/15	Yes	*

Number of Percent of LME-MCOs that Met the SFY2016 Standard:

8 (100%)

- 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.
- 4. Reports that are shaded gray do not have a program and do not have a reporting requirement.

3. Work First Initiative Quarterly Reports

<u>Performance Requirement</u>: 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 2016 Standard:

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

	1st Qtr Repor	t Due 10/20/15	
LME-MCO	Date Received ²	Accurate And Complete	Standard Met ¹
Alliance Behavioral Healthcare	10/20/2015	Yes	*
Cardinal Innovations Healthcare Solutions	10/20/2015	Yes	*
CenterPoint Human Services	10/20/2015	Yes	*
Eastpointe	10/14/2015	Yes	*
Partners Behavioral Health Management	10/20/2015	Yes	*
Sandhills Center	10/16/2015	Yes	*
Smoky Mountain Center	10/20/2015	Yes	*
Trillium Health Resources	10/20/2015	Yes	*

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

8 (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.

4. Quarterly Traumatic Brain Injury (TBI) Services Report

<u>Performance Requirement</u>: 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 2016 Standard:

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

LME MCO		4th Qtr Report Due 8/31/15	
LME-MCO	Date Received ²	Accurate, Complete	Standard Met ¹
Alliance Behavioral Healthcare	8/31/15	Yes	*
Cardinal Innovations Healthcare Solutions	8/31/15	Yes	*
CenterPoint Human Services	8/24/15	Yes	*
Eastpointe	8/24/15	Yes	*
Partners Behavioral Health Management	8/18/15	Yes	*
Sandhills Center	8/24/15	Yes	*
Smoky Mountain Center	8/31/15	Yes	*
Trillium Health Resources	8/27/15	Yes	*

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

8 (100%)

- 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.

5. Quarterly Complaints Report

<u>Performance Requirement</u>: 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 2016 Standard:

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

LME-MCO		1st Qtr Report Due 11/16/15	5
LIVIE-IVICO	Date Received ²	Accurate, Complete	Standard Met ¹
Alliance Behavioral Healthcare	11/10/15	Yes	*
Cardinal Innovations Healthcare Solutions	11/12/15	Yes	*
CenterPoint Human Services	11/13/15	Yes	*
Eastpointe	11/13/15	Yes	*
Partners Behavioral Health Management	11/16/15	Yes	*
Sandhills Center	11/6/15	Yes	*
Smoky Mountain Center	11/9/15	Yes	*
Trillium Health Resources	11/13/15	Yes	*

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

8 (100%)

- 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.

6. Client Data Warehouse (CDW) Screening Records

<u>Performance Requirement</u>: 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, 2015 - June 30, 2015) with a cross-reference to the CNDS completed within 30 days of initial contact.

SFY 2016 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	5	0	5	100%	*
Cardinal Innovations Healthcare Solutions	974	35	939	96%	*
CenterPoint Human Services	185	0	185	100%	*
Eastpointe	309	22	287	93%	*
Partners Behavioral Health Management	0		0	0%	
Sandhills Center	490	2	488	100%	*
Smoky Mountain Center	2,444	3	2,441	100%	*
Trillium Health Resources	451	0	451	100%	*
TOTAL	4,858	62	4,796	99%	*

Number and Percent of LME-MCOs that met the SFY 2016 Performance Standard:

7 (87.5%)

- 1. ★ = Met the Performance Contract Standard.
- 2. Percentages less than 90% are shaded red.
- 3. Values for Trillium Health Resources were calculated by summing premerger values for CoastalCare and East Carolina Behavioral Health.

7. Client Data Warehouse (CDW) Admissions

<u>Performance Requirement</u>: 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, 2015.

LME-MCO	Facility Code	JUL	AUG	SEP	First Quarter Adm SFY2016	First Quarter Adm SFY2015	Monthly Average SFY2016	Monthly Average SFY2015
Alliance Behavioral Healthcare	23141	944	929	805	2,678	2,892	893	964
Cardinal Innovations Healthcare Solutions	13121	1,454	1,297	851	3,602	4,058	1,201	1,353
CenterPoint Human Services	23021	318	303	292	913	1,347	304	449
Eastpointe	43081	201	168	263	632	3,821	211	1,274
Partners Behavioral Health Management	13114	599	636	615	1,850	2,169	617	723
Sandhills Center	33031	1,206	936	969	3,111	3,110	1,037	1,037
Smoky Mountain Center	13010	1,206	1,123	1,120	3,449	3,106	1,150	1,035
Trillium Health Resources	43071	3,061	1,341	947	5,349	3,514	1,783	1,171
TOTAL ADMISSIONS	8,989	6,733	5,862	21,584	24,017	7,195	8,006	

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

8. Client Data Warehouse (CDW) Diagnosis Records

<u>Performance Requirement</u>: 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 (April 1, 2015 - June 30, 2015) with a diagnosis completed within 30 days of beginning date of service.

SFY 2016 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	2,662	95	2,567	96%	*
Cardinal Innovations Healthcare Solutions	3,624	0	3,624	100%	*
CenterPoint Human Services	1,053	0	1,053	100%	*
Eastpointe	1,960	79	1,881	96%	*
Partners Behavioral Health Management	1,609	7	1,602	100%	*
Sandhills Center	3,792	20	3,772	99%	*
Smoky Mountain Center	3,082	35	3,047	99%	*
Trillium Health Resources	3,626	3	3,623	100%	*
TOTAL	21,408	239	21,169	99%	*

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

- 1. ★ = Met the Performance Contract Standard.
- 2. Percentages less than 90% are shaded red.
- 3. Values for Trillium Health Resources were calculated by summing premerger values for CoastalCare and East Carolina Behavioral Health.

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 (April 1, 2015 - June 30, 2015) where all mandatory data fields contain a value other than 'unknown'.

SFY 2016 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	Education	Employment	Veteran Status	Family Income	Family Size	Arrests 30 Days	Health Med Ins	Primary Language	Attention Self Help	Standard Met ¹
Alliance Behavioral Healthcare	2,662	100%	95%	96%	99%	97%	96%	100%	93%	100%	100%	100%	100%	97%	100%	*
Cardinal Innovations Healthcare Solutions	3,624	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	*
CenterPoint Human Services	1,053	100%	100%	100%	100%	100%	95%	100%	99%	100%	100%	100%	100%	100%	100%	*
Eastpointe	1,960	100%	100%	97%	99%	100%	96%	100%	97%	100%	100%	100%	100%	99%	100%	*
Partners Behavioral Health Management	1,609	100%	100%	100%	100%	100%	100%	100%	99%	100%	100%	100%	100%	100%	100%	*
Sandhills Center	3,792	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	*
Smoky Mountain Center	3,082	100%	99%	98%	100%	98%	93%	100%	98%	100%	100%	100%	100%	100%	100%	*
Trillium Health Resources	3,626	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	*
TOTAL	21,408	100%	99%	99%	100%	99%	98%	100%	98%	100%	100%	100%	100%	100%	100%	*

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

- 1. ★ = Met the Performance Contract Standard.
- 2. Percentages less than 90% are shaded red.
- 3. Values for Trillium Health Resources were calculated by summing premerger values for CoastalCare and East Carolina Behavioral Health.

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 (April 1, 2015 - June 30, 2015) where all mandatory data fields contain a value other than 'unknown'.

SFY 2016 Standard:

90% of all mandatory data fields for the prior quarter contain a value other than 'unknown'.

LME-MCO	Discharge Records	Discharge Reason	Employment Status	Arrests Prior 30 Days	Referral To	Living Arrangement	Attention Self Help	Standard Met ¹
Alliance Behavioral Healthcare	137	100%	98%	100%	100%	100%	100%	*
Cardinal Innovations Healthcare Solutions	1,778	100%	100%	100%	100%	100%	100%	*
CenterPoint Human Services	241	100%	99%	100%	100%	100%	100%	*
Eastpointe	20,529	100%	100%	100%	100%	100%	100%	*
Partners Behavioral Health Management	700	100%	100%	100%	100%	100%	100%	*
Sandhills Center	2,779	100%	100%	100%	100%	100%	100%	*
Smoky Mountain Center	2,009	100%	95%	100%	100%	100%	100%	*
Trillium Health Resources	18,033	100%	100%	100%	100%	100%	100%	*
TOTAL	46,206	100%	100%	100%	100%	100%	100%	*

Number and Pct of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

- 1. ★ = Met the Performance Contract Standard.
- 2. Percentages less than 90% are shaded red.
- 3. Values for Trillium Health Resources were calculated by summing premerger values for CoastalCare and East Carolina Behavioral Health.

11. Client Data Warehouse (CDW) Identifying and Demographic Records

<u>Performance Requirement</u>: 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, 2015 - June 30, 2015) with an identifying record and demographic record completed within 30 days of the beginning date of service.

SFY 2016 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	7,592	115	7,477	98%	*
Cardinal Innovations Healthcare Solutions	6,550	46	6,504	99%	*
CenterPoint Human Services	4,007	0	4,007	100%	*
Eastpointe	1,411	17	1,394	99%	*
Partners Behavioral Health Management	6,026	30	5,996	100%	*
Sandhills Center	6,071	12	6,059	100%	*
Smoky Mountain Center	7,712	15	7,697	100%	*
Trillium Health Resources	8,370	277	8,093	97%	*
TOTAL	47,739	512	47,227	99%	*

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

- 1. ★ = Met the Performance Contract Standard.
- 2. Percentages less than 90% are shaded red.
- 3. Only includes NCTRACKS claims.
- 4. Values for Trillium Health Resources were calculated by summing premerger values for CoastalCare and East Carolina Behavioral Health.

12. Client Data Warehouse (CDW) Drug Of Choice Data

<u>Performance Requirement</u>: 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, 2015 - June 30, 2015) with a drug of choice record completed within 60 days of the beginning date of service.

<u>SFY 2016 Standard:</u> 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	1,469	44	1,425	97%	*
Cardinal Innovations Healthcare Solutions	950	112	838	88%	
CenterPoint Human Services	819	5	814	99%	*
Eastpointe	432	10	422	98%	*
Partners Behavioral Health Management	1,327	2	1,325	100%	*
Sandhills Center	920	7	913	99%	*
Smoky Mountain Center	1,459	27	1,432	98%	*
Trillium Health Resources	1,149	89	1,060	92%	*
TOTAL	8,525	296	8,229	97%	*

Number and Pct of LME-MCOs that met the SFY 2016 Standard:

7 (87.5%)

- 1. ★ = Met the Performance Contract Standard.
- 2. Percentages less than 90% are shaded red.
- 3. Only includes NCTRACKS claims.
- 4. Values for Trillium Health Resources were calculated by summing premerger values for CoastalCare and East Carolina Behavioral Health.

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

<u>Performance Requirement</u>: 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, 2015 - June 30, 2015) have had a billable service, administrative activity, or if neither occurred for at least 60 days, have submitted an episode completion record.

SFY 2016 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 without 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	385	72	313	81%	
Cardinal Innovations Healthcare Solutions	556	6	550	99%	*
CenterPoint Human Services	181	1	180	99%	*
Eastpointe	228	24	204	89%	
Partners Behavioral Health Management	206	0	206	100%	*
Sandhills Center	313	10	303	97%	*
Smoky Mountain Center	550	80	470	85%	
Trillium Health Resources	1,033	21	1,012	98%	*
TOTAL	3,452	214	3,238	94%	*

Number and Pct of LME-MCOs that met the SFY 2016 Standard:

5 (62.5%)

- ★ = 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.
- 5. Values for Trillium Health Resources were calculated by summing premerger values for CoastalCare and East Carolina Behavioral Health.

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

<u>Performance Requirement</u>: 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 2016 Standard:

90% of the expected update forms are received and are timely.

LME-MCO	Formandad # of	Red	ceipt	Timeliness		
	Expected # of Update Instruments	# of Update Assessments Received	% of Expected Assessments Received ²	# of Update Assessments Received On-Time	% of Expected Assessments Received On-Time ²	Standard Met ¹
Alliance Behavioral Healthcare	1,492	1,394	93.4%	1,275	85.5%	
Cardinal Innovations Healthcare Solutions	1,924	1,757	91.3%	1,644	85.4%	
CenterPoint Human Services	425	417	98.1%	407	95.8%	*
Eastpointe	1,079	1,078	99.9%	1,072	99.4%	*
Partners Behavioral Health Management	1,237	1,209	97.7%	1,153	93.2%	*
Sandhills Center	1,257	1,223	97.3%	1,185	94.3%	*
Smoky Mountain Center	1,656	1,645	99.3%	1,547	93.4%	*
Trillium Health Resources	530	530	100.0%	525	99.1%	*
Totals	9,600	9,253	96.4%	8,808	91.8%	*

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

6 (75%)

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

16. NC Support Needs Assessment Profile (NC-SNAP)

<u>Performance Requirement</u>: 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 2016 Standard:

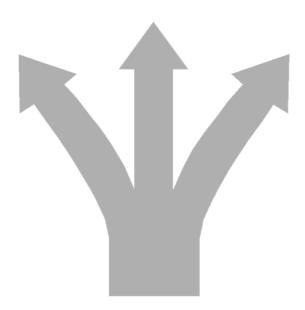
90% of current assessments are no more than 15 months old.

LME-MCO	# Received	# No More Than 15 Months Old	% No More Than 15 Months Old ²	Standard Met ¹
Alliance Behavioral Healthcare	3,222	2,926	90.8%	*
Cardinal Innovations Healthcare Solutions	LME-MCO submits	N/A		
CenterPoint Human Services	1,130	1,118	98.9%	*
Eastpointe	2,283	2,121	92.9%	*
Partners Behavioral Health Management	2,060	1,855	90.0%	*
Sandhills Center	2,246	2,046	91.1%	*
Smoky Mountain Center	2,127	2,005	94.3%	*
Trillium Health Resources	2,968	2,832	95.4%	*
Totals	16,036	14,903	92.9%	*

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

7 (100%)

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



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

North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
Quality Management Section
3004 Mail Service Center
Raleigh, North Carolina 27699-3004

(919) 733-0696 Email: ContactDMHQuality@dhhs.nc.gov

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