Smoky Mountain LME/MCO (Smoky)
Operations at a Glance – February 2015

Individuals Eligible for Services through Smoky

Smoky is responsible for the oversight of behavioral health and intellectual/developmental disability Medicaid and State-funded (including county-funded and federal block grant) services in our 23-county area. For February:

- Individuals on the NC Innovations waiver: **1,560**
- Other individuals who receive Medicaid: **162,740**
- Estimated uninsured eligible for State-funding: **137,660**

Registry of Unmet Needs

- **849** of the **948** individuals potentially eligible for NC Innovations received services during the month of February. (An individual is potentially eligible for an Innovations slot when he or she has a documented intellectual disability or a condition, other than mental illness, that is closely related to an intellectual disability.)

Customer Services

Customer service representatives take calls related to accessing services, answering questions, and providing support. Smoky is required to answer calls within 30 seconds.

Measure	Medicaid and State-funded requests combined	
	February	YTD*
Calls answered	3,841	8,508
Average time to answer calls	7 seconds	6.46 seconds

Care Management/Utilization Management

Many services require prior authorization. A care manager reviews a request for services along with supporting documentation. Reviews must demonstrate that the request is for the right service in the right amount, and must be completed within 14 calendar days of receipt. Unable to Process are those requests that are considered invalid, while those that are not authorized for administrative reasons are missing required information.

Measure	Medicaid		State-funded	
	February	YTD	February	YTD
Requests processed	2,623	5,957	626	1,384
Average time between submission and decision	6.2	4.0	3.4	2.7
Requests for mental health and substance abuse services	1,911	4,468	412	924
Requests for intellectual/developmental disability services	712	1,489	214	460
Requests unable to process	181	454	47	104
Requests not authorized - administrative reasons	3.2%	2.6%	4.0%	3.8%
Requests not authorized - clinical reasons (right service/amount)	2.7%	3.2%	0.5%	0.4%
First level appeal requests	11	25	2	2
Second level appeal requests	1	5	0	0

***YTD** - Year to date. For the purpose of this report, it is everything that has occurred since January 1, 2015.

Care Coordination – Numbers of Persons Served

The LME/MCO must ensure that care coordination occurs for those individuals considered to have special needs according to the 1915 (b)/(c) waiver. Individuals who have high-risk conditions or those who use an amount of services considered high-cost (the top 20% of service dollars) also receive care coordination.

Measure	Medicaid		State-funded	
	February	YTD	February	YTD
Persons with intellectual/developmental disabilities (I/DD)	1,795	1,871	86	123
Individuals with mental health or substance abuse needs	1,402	1,747	1,101	1,433

Quality Management – Grievances/Complaints

Smoky is required to track all grievances. The definition of grievance is "an expression of dissatisfaction by or on behalf of an Enrollee." A grievance is about any matter other than a service request that does not get prior authorization. Smoky is required to resolve grievances within 30 days of their receipt.

Measure	Medicaid		State-funded		Funding Source Other*	
	February	YTD	February	YTD	February	YTD
Grievances about Smoky	5	6	1	1	0	2
Grievances about providers	17	40	3	11	4	10
Total grievances received	22	46	4	12	4	12
Average time to resolve a grievance (days)	15.3	13.4	28.5	11.9	5.3	10
Grievances fully resolved	19	43	2	10	3	11

*Other defined by funding source not indicated, Medicare, Out of Purview, Anonymous grievance or is unknown.

Finance/Claims

Smoky is required to process a claim within 18 days of receipt, and is required to pay 90% of clean claims within 30 days. A clean claim is a claim that has all the information necessary to process.

Measure	Medicaid		State-funded	
	February	YTD	February	YTD
Claims processed	177,641	168,002	46,477	94,863
Claims approved and paid	162,415	155,603	41,910	83,810
Average time to process a "clean claim"	1.0	1.1	1.6	1.3
Service dollars paid out to providers/vendors	20,846,082	40,989,382	3,750,641	7,495,900
Providers paid	449	520	85	89

Provider Network (Medicaid and State-funded)

Measure	Total	Mental Health	Substance Abuse	I/DD
Contracted providers	668	*	*	*
Providers with single-case agreements		*	*	*

- Note: Some provider agencies provide services for more than one type of service need.
- Of the total contracted providers, * have locations within one or more of Smoky's 23 counties.
- Of the providers with single-case agreements, * are located within one of Smoky's 23 counties.

*Report in development.