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February 4, 2014

MEMORANDUM

TO: LME/MCO CEOs

**FROM: Dave Richard, Division Director, DMH/DD/SAS
Kathy Nichols, Senior Waiver Manager, DMA**

RE: Joint Communication Bulletin
- Rollout of the New Routine Provider Monitoring Tools and Process
- Registration for Introductory Workshop for LME/MCOs, Providers and LIPs

This communication bulletin announces implementation of the new tools and process for routine provider monitoring, and provides information on how to register for upcoming workshops that will give an overview of the new tools and process.

Rollout of the New Routine Provider Monitoring Tools and Process for LME/MCOs, Provider Agencies and LIPs

Effective March 1, 2014, new provider monitoring tools will be used by the LME/MCOs to conduct routine monitoring and post-payment reviews of provider agencies and licensed independent practitioners (LIPs). The implementation of these new streamlined tools represents the culmination of several months of deliberation and collaboration by the members of the DHHS-LME/MCO-Provider Monitoring Workgroup. The representatives from the LME/MCOs and the providers appointed to the workgroup by their professional organizations have significant experience in the field. Their input and perspectives have been invaluable as the Workgroup sought to make the process more relevant, efficient, transparent and accountable. This review and refinement of the routine monitoring process is the first phase of the collaborative effort to improve and standardize all phases of provider monitoring.

This new provider monitoring process takes into account how both the MH/IDD/SA system and the network of providers have evolved since the former Gold Star tools were first developed. Routine provider monitoring, which occurs every two years, consists of a routine review and a post-payment review. Both the routine tool and the PPR tools can be used anytime for targeted monitoring or investigations.

The tools for routine monitoring were streamlined to reflect the essential elements of accountability, which while regulatory in nature, have as their ultimate goal a focus on those areas which have direct implications for the quality of service provision. The performance of provider agencies and LIPs is evaluated in the areas of protection of rights,

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service availability and coordination of care. The provider agency's reporting and follow-up on incidents, use of restrictive interventions and its process for handling complaints are assessed during the routine review as well as the provider's protection of the individual's personal property and funds management when applicable. Additional areas of focus for the LIP are compliance with HIPAA and ADA requirements, and a preliminary assessment of the technical assistance needs of a LIP joining a provider network -- especially those LIPs who are entering the public system of care for the first time.

Substantial revisions have been made to the Guidelines for rating and scoring the items on the tools to facilitate greater clarity, consistency and uniformity across reviews. These refinements are directly attributable to the feedback and input from the LME/MCO representatives and providers in the workgroup.

The number of tools used for routine monitoring has been reduced significantly. Each tool has a distinct function, as described below.

Tools for Monitoring Provider Agencies

The Routine Review Tool

This tool is designed to monitor unlicensed services and services licensed under GS §122C that have not been surveyed by the Mental Health Licensure Section of the Division of Health Service Regulation (DHSR) within the previous 12-15 months.

The Health, Safety and Compliance Tool for Initial Reviews

This tool has been abbreviated and is only for the initial review of services that operate out of a setting that is not licensed by DHSR (e.g., Unlicensed Supervised Living Programs). Subsequent reviews of these services would utilize the Routine Review Tool.

The Unlicensed AFL Review Tool

No changes have been made to the items on this tool. This tool is required to be completed annually for AFL services under the Innovations Waiver and every two years for all other unlicensed AFL sites.

Tools for Licensed Independent Practitioners (LIPs)

LIP Office Site Review Tool

- Prior to the LME-MCO contracting with the LIP, an on-site review is conducted. The on-site review determines the extent to which the LIP is able to meet state standards in terms of compliance with rules, client rights, records management and documentation standards.
- A mock record review is also a part of the on-site visit. This mock record review utilizes the Service Plan Checklist to help determine the extent to which the LIP will need to be provided technical assistance in order to meet state standards for documentation, billing and reimbursement.

LIP Review Tool

This is the basic tool used for routine monitoring of LIPs. The main components are notification of rights, service availability, coordination of care and storage of records.

The Post-Payment Review

The post-payment review (PPR) is an integral part of the routine monitoring of providers and LIPs. Each of the PPR tools has been streamlined. Guidance is provided on the highest possible action associated with each item on the tool. Enhancements have been made to the Overall Summary worksheet to provide a snapshot of provider performance on each section of the tool.

Registration for the Introductory Workshop for LME/MCOs, Providers and LIPs

The Provider Monitoring Workgroup will hold introductory workshops at various sites across the state from February 10–21. LME/MCOs and professional organizations are requested to forward this Joint Communication Bulletin with the registration information to the providers in their network. Registration information follows:

An Introductory Workshop on the New Process for Routine Provider Monitoring

You are invited to attend one of the upcoming workshops that will introduce the New Routine Provider Monitoring Tools and Process. This training is geared to all providers and LME/MCO staff involved in the monitoring process. Space is limited at these events and it is imperative that everyone pre-register for these trainings. Please note that each session is 3-1/2 hours long. There will be two sessions (AM/PM) available at each site. There is no cost associated with this training.

The sessions are listed below. Please complete the registration form at the end of this bulletin and return it to Cathy Duenkel at cathy.duenkel@dhhs.nc.gov, or you may fax your registration to her at 704/567-4794.

Before the Workshop. You will need to download the handouts from the Division website prior to the training and bring them with you. The handouts will be posted Thursday, February 6, 2014, at

<http://www.ncdhhs.gov/mhddsas/providers/providermonitoring/index/htm>.

February 10, 2014 Eastpointe – Rocky Mount 500 Nash Medical Arts Mall Rocky Mount, NC 9:00am – 12:30pm 1:30pm – 5:00pm	February 11, 2014 Alliance Behavioral Healthcare 4600 Emperor Blvd Durham, NC 9:00am – 12:30pm 1:30pm – 5:00pm
February 14, 2014 Smoky Mountain Center – Asheville 356 Biltmore Avenue Asheville, NC 9:00am – 12:30pm 1:30pm – 5:00pm	February 17, 2014 Eastpointe – Beulaville 514 E. Main Street Beulaville, NC 9:00am – 12:30pm 1:30pm – 5:00pm
February 20, 2014 Barium Springs Little Joe’s Family Enrichment Center 107 Grannis Lane Troutman, NC 9:00am – 12:30pm 1:30pm – 5:00pm	February 21, 2014 CenterPoint Human Services The Point Room 4025 University Parkway Winston Salem, NC 9:00am – 12:30pm 1:30pm – 5:00pm

Session you plan to attend: Date: _____ AM ☐ PM ☐

Name: _____ Position Title: _____

Agency: _____ Please check if you are a LIP: ☐

Email address: _____ Phone No.: _____

Responsible for training individuals in your agency? Yes _____ No _____

cc: Sandy Terrell, DMA
 Jim Jarrard, DMH/DD/SAS
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