

AC LME Provider Forum
ALAMANCE/CASWELL LOCAL MANAGEMENT ENTITY

September 17, 2009

LME Staff Present: Debra Welch, LME Human Resources Director; Barbara Docimo, LME QI Specialist; Trina Powell, LME Provider Specialist; Jodi Meacham, LME QI/PR Manager; Jandy Andrews, LME Director of Finance; Jean Gibson, LME Provider Liaison; Ric Bruton, LME Community Affairs; Carmen Morrow, LME Training Coordinator; Clayron McCain, LME IT Director; Fran Harvey, LME System of Care Coordinator; David Sykes, LME DD Coordinator and Lynnette Gordon, LME UR/STR Manager.

Provider Staff Present: OE Enterprises, Therapeutic Alternatives, Save Our Children, Easter Seals, Harvest House, Universal MH/DD/SA, Solutions CSA, Ralph Scott Lifeservices, Inc., Ethel's Footprints, Visions of Therapeutic Development, CNC Access, Genesis Residential Services, A Pathway, Hearthstone, A Better Path, Sunrise Pointe, Freedom Homes, Central State of the Carolinas, Old Vineyard, Residential Treatment Services, NC Mentor, Triumph, LLC, Youth Ventures, Hope Farms Residential Services, Children's Home Society of NC, Alcohol & Drug Services, Youth Builders, Community Support Services, Behavioral Link, Mental Health Association, Psychotherapeutic Services, and Alamance Academy.

Guest: Lisa Bunting, Impact Training Consultants, LLC

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
<i>Item number and name</i>	<i>Detailed reflection of discussion and any conclusions from discussions. Include pertinent data wherever possible.</i>	<i>Any decisions, recommendations and/or steps the committee takes.</i>		<i>Open or Closed</i>
Welcome	Ms. Debra Welch, HR Director welcomed all providers to forum. Introductions were made of LME Staff and all providers.			Closed
Direct Care Training Presentation	Ms. Lisa Bunting, LCSW of Impact Training & Consultants, LLC gave brief presentation of Direct Care Worker Grant that was awarded to her company. Ms. Bunting announced the Direct Care Worker class will be offered at GTCC (Guilford Technical Community College). <u>The format of the class is:</u> <ul style="list-style-type: none"> • Meet 4 hours per day – 5 days per week (4 week period) • Total of 80 hours as completion (Other: 8 days classroom experience, 5-6 days of class are based in Community Internships. The hours for the internships may vary from 1 st shift to 2 nd shift weekdays or weekends. The internship agency hosts and the instructors will help students find internship hours that meet their scheduling needs)	None		Closed

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p><u>Course Description:</u> The course will prepare students for entry level jobs in the field of human services, especially working in a direct care capacity with people with MH/DD.</p> <p>The State of NC workforce recruitment plan for direct care workers outlines 7 core competencies that are required for paraprofessional (non-degree holding & non-licensed) staff in the NC Administrative Codes (10A, NCAC 27G.0204) The general outline for this course follows these same competencies.</p> <p><u>Projected Cost of Class:</u> \$150.00 per person</p> <p><u>Direct Care Workers will learn:</u> Basic Technical, communication, analytical, decision making, interpersonal and clinical skills that will be used in a variety of direct care employment settings. Cultural awareness & sensitivity training will also be provided.</p> <p>Students will learn about a variety of jobs available in the human services industry as direct care workers & will participate in several community based internships.</p> <p><u>New additions to the class are:</u></p> <ul style="list-style-type: none"> • American Red Cross CPR & First Aid Certification • Non Violent Crisis Intervention (NCI) Prevention & Core certification <p>Ms. Bunting asked providers to contact her at lisabunting@aol.com if they were interested in providing internship hours for students and becoming community partners. And, also if they would like to participate in upcoming job fairs that will be held at various locations.</p> <p>Ms. Bunting also announced to providers upcoming training sponsored by AC LME –</p> <ul style="list-style-type: none"> • September 28, 2009 – Community Support Team Training • October 16, 2009 – Person Centered Thinking Training • October 23, 2009 – 1st Responder Training <p>The LME is in the process of scheduling an Intensive In-Home Training – dates will be available soon.</p>			

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>For all training information at AC LME – Please contact Carmen Morrow, LME Training Coordinator at (336) 513-4200 ext. 4108 or cmorrow@acmhdds.org.</p>			
DD/CAP Updates	<p>Mr. David Sykes, LME DD Coordinator gave the following updates:</p> <p><u>TBI Services</u> – If providers have TBI consumers who need services, there may be TBI money available at the State level. Please let Mr. Sykes know of any consumers who are in need of this service.</p> <p>No word on CAP slots as of yet – as soon as the LME receives any notification, providers will be notified.</p> <p>Just a reminder! Medicaid cards are annual now, not monthly. More information is Provider Highlights newsletter.</p> <p>Mr. Sykes contact information is: dsykes@acmhdds.org or (336) 513-4200 ext. 4177.</p>	None		Closed
System of Care Updates	<p>Ms. Fran Harvey, LME System of Care Coordinator gave the following updates. Ms. Harvey distributed handout: Care Review</p> <p>The handout outlined the following:</p> <p><u>Out of Home Placement</u> – Child & Family Team (CFT) team presents reasons at a Care Review when considering out of home placement for a period longer than 30 days. Care Review also serves as the approval body for all state funded PRTF’s, Wright and Whitaker Schools.</p> <p><u>Discharge & Transition Plan</u> – When the youth is returning to the community following an out of home placement, the CFT should meet to prepare a step down plan that is presented at Care Review.</p> <p><u>CFT Requests Assistance</u> – A CFT team may seek assistance from Care Review Committee when treatment experiences have resulted in limited or ineffective progress towards achieving treatment goals & other measurable outcomes.</p>			Closed

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p><u>Where does the Process Begin?</u></p> <ol style="list-style-type: none"> 1. The Case Manager consults with their supervisor about the need to refer a child for Care Review 2. Logistics Coordinator is contacted (Sue Ward) sward@acmhdds.org or (336) 513-4225 to request a referral packet 3. Packet is completed & date/time will be forwarded to Case Manager 4. Case Manager will notify CFT (Child & Family Team) of date/time and the following are expected to attend the Care Review: 5. Case Manager 6. Child's parent(s)/legal guardian 7. Any CFT members deemed appropriate by the Case Manager & provide information relevant to the nature & purpose of the Care Review <p>All Care Reviews are held at Child Support Enforcement Building Conference Room unless otherwise noted at 201 W. Elm Street, Graham NC.</p> <p><u>Purpose of Care Review –</u> The partnering agencies in System of Care are:</p> <ul style="list-style-type: none"> • AC LME • Department of Social Services • DJJDP • School System • Guardian Ad Litem • Partnership of Children <p>All agencies support the concept of CFT to ensure that best practice services are available to children & their families within the community.</p> <p>The agencies also strive to fulfill certain principles when youth & their family need intensive treatment including:</p> <ol style="list-style-type: none"> 1. Matching the needs of youth with what is understood to be best practice or evidence based services in the fields of MH & SA 2. Maintaining & strengthening the youth's connection the community 3. Providing youth with services that match their needs in the least restrictive setting while valuing the preferences & culture of the family 4. Supporting the family in meeting the needs of their child 			

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>Ms. Harvey also announced to providers to please send all of ITRF packets to the LME.</p> <p>Contact Information for Ms. Fran Harvey – (336) 513-4200 ext. 4174 or via email: fharvey@acmhdds.org.</p>			
Financial Updates	<p>Ms. Jandy Andrews, LME Director of Financial Services announced to providers the LME has received final allocation letter from Division. The LME had already cut IPRS contracts up to 15%. The LME will have to submit a plan to the Division detailing how all cuts have been allocated to all disabilities.</p> <p>Ms. Andrews announced to providers they should be receiving new contracts very soon and may see a slight increase from the last contract.</p>	<p>Action: Amended contracts will be forwarded to providers.</p> <p>Plan to be submitted to Division.</p>		Open
Reimbursement Updates	<p>Mr. Clayron McCain, LME IT Director reported to providers in order to get paid a service must be submitted with a target population. Mr. McCain defined a “clean claim” and the components of a “clean claim”.</p> <p>Mr. McCain also clarified the 60 day billing cycle – if claim is submitted 60 days after date of service – providers will not get paid.</p>			Closed
New Incident Reporting Updates	<p>Ms. Barbara Docimo announced to providers regarding the new IRIS system (Incident Reporting Improvement System). The new IRIS system has an anticipated Go LIVE date October 5th. The LME hosted the 1st training that was held on September 10th – a webcam presentation from the Division of MH. Ms. Docimo thanked all providers who participated.</p> <p>The 1st wave of providers can start on October 5th (Go LIVE Date). If you would like to roll out on the 1st wave – please contact Ms. Docimo at bdocimo@acmhdds.org – we are asking for a small amount of providers to start this process. We anticipate more training upcoming for the IRIS system.</p>			Open
Updates from QI Forum	<p>Ms. Docimo reported updates from the most recent QI Forum. They are as follows:</p> <p><u>Section .0600 – Area Authority or County Program Monitoring of Facilities & Services – Changes were as follows:</u></p>			Closed

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p><u>10A NCAC 27G.0601</u> - Section (d) An LME or provider of public services shall exchange information, including confidential information, when necessary to coordinate & carry out the monitoring functions as set forth in this Section. Sharing of information shall conform to 42 CFR, Part 2 for persons receiving SA services.</p> <p><u>10A NCAC 27G.0602</u> – Section (5) “Level III incident” means the same as defined in 10A NCAC 27G.0103(b)(32) and results in:</p> <ul style="list-style-type: none"> (a) A death, sexual assault, or permanent physical or psychological impairment to a client; (b) A substantial risk of death, or permanent physical or psychological impairment to a client; (c) A death, sexual assault, permanent physical or psychological impairment caused by a client; (d) A substantial risk of death or permanent physical or psychological impairment caused by a client; or (e) A threat caused by a client to a person’s safety <p>Section (8) – <i>“Provider Category”</i> means the type of facility in which a client receives services or resides. The provider category determines the extent of monitoring that a provider receives and is determined as follows:</p> <ul style="list-style-type: none"> (a) Category A – facilities licensed pursuant to G.S. 122C, Article 2, except for hospitals. These include 24-hr. residential facilities, day treatment, PRFTs and outpatient services. <p><u>10A NCAC 27G.0603</u> – Incident Response Requirements for Category A & B Providers –</p> <p>Section (a) # 3 – developing & implementing corrective measures according to provider specified timeframes not to exceed 45 days</p> <p>Section (a) #4 – developing & implementing measures to prevent similar incidents according to provider specified timeframes not to exceed 45 days</p> <p>Section (3) – Immediately notifying the following:</p> <ul style="list-style-type: none"> (a) Host– the LME responsible for the catchment area where the services are provided pursuant to Rule .0604 (b) Home– the LME where the client resides, if different <p><u>10A NCAC 27G.0604</u> – Incident Reporting Requirements for Category A & B Providers –</p> <p>Section (a) Category A & B providers shall report all level II incidents,</p>			

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>except deaths, that occur during the provision of billable services or while the consumers is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider <i>rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident.</i></p> <p>Section (e) Category A & B providers shall send a <i>report quarterly</i> to the LME responsible for the catchment area where services are provided.</p> <p><u>10A NCAC 27G.0605</u> – Local Management Entity Management of Incidents LME will follow up upon learning of a level III incident that occurs while a client is in the care of a provider or on a provider’s premises.</p> <p><u>10A NCAC 27G.0608</u> – Local Monitoring Section (c) A Local Management Entity that conducts the local monitoring of a provider serving another Local Management Entity’s client shall provide a copy of the local monitoring report to the client’s home LME within 15 calendar days of completion.</p> <p>Ms. Docimo expressed to providers to continue to check the website for announcements/changes weekly.</p>			
Hospital Follow Up Updates	<p>Ms. Trina Powell, LME Provider Specialist gave brief description of hospital follow-up and guidelines. Hospital follow-up service is defined as receiving a community-based service within 7 days of discharge from a state psychiatric hospital and ADATC. The State tracks these services for each LME by monitoring paid claims for individuals discharged from state psychiatric hospitals and ADATC.</p> <p>Ms. Powell reported to providers 4th Quarter (April – June) information for AC LME. Ms. Powell expressed to providers they did a fabulous job reporting, but no claims were submitted. The LME will only get credit if the service has been billed and paid.</p> <p>Ms. Powell reported the goals of the LME - The LME would like to see numbers of at least 75% billed by providers for hospital follow-up by the end of year Dec. 2009. Ms. Powell asked providers for their help to achieve this goal. If there are problems, please let Ms. Powell know and she will provide technical assistance if needed.</p>	<p>Next Steps: To achieve goal of 75% for hospital follow-up</p>		<p>Open</p>

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>Providers expressed the reason why they are not billing the service – due to paperwork issues and no-show rate. Ms. Powell again expressed the urgency of hospital follow-up and will help all providers who request help to achieve the goal.</p> <p>Ms. Powell can be reached at (336) 513-4200 ext. 4158 or tpowell@acmhdds.org</p> <p><u>NC-TOPPS</u> –Ms. Powell expressed to providers the importance of Super Users at provider agencies. If you need assistance with becoming a Super User, Ms. Powell offered technical assistance.</p> <p>Ms. Powell distributed a sign-in sheet for Super Users.</p>			
Provider Updates	<p>Ms. Jean Gibson, LME Provider Liaison gave the following updates:</p> <p><u>Provider Enrollment</u> – Effective September 1, 2009 – enrollment fee of \$100 will be charged to each provider enrolling in the NC Medicaid program for the 1st time and at 3 year intervals when the provider is re-credentialed.</p> <p><u>On-Line Enrollment application</u> – Providers now have the option to enroll using the new online enrollment application. Please understand you will still need to mail in signature pages to complete the application process.</p> <p><u>Accreditation</u> – Ms. Gibson expressed to providers the LME will enforce the National Accreditation benchmarks. The accreditation process is new for residential providers (<i>refer to Implementation Update #60</i>). As a reminder, please email/fax letters of intent to the LME.</p> <p><u>Insurance</u> – Please make sure all copies are being sent to the LME. Please pay attention to lapses in coverage – plans of corrections will be given to providers for any lapses in coverage. The LME does check insurance limits. If there are any changes, please make sure you notify the LME.</p> <p>To contact Ms. Gibson – Phone: (336) 513-4200 ext. 4142 or Fax: (336)(513-4422 or via email: jjgibson@acmhdds.org for any questions.</p>	None		Closed
QI Updates	<p>Ms. Jodi Meacham, LME QI/PR Manager gave the following updates:</p> <p><u>Human Rights Committee</u> – The LME is still recruiting members for Human Rights Committee. The committee meets quarterly. If you are interested, please contact Ms. Meacham.</p>	Next Steps: Quarterly Reports due to LME by October 10 th		Open

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p><u>Crisis Intervention Training (CIT)</u> – The CIT Training will be held October 19 – October 23rd, if providers are interested in being a part of the “role play” activities, please let her know.</p> <p><u>Quarterly Reports</u> – All quarterly reports are due to the LME by October 10th. The reports are as follows:</p> <ul style="list-style-type: none"> • Provider Capacity • QI • Incident Reports <p>For any questions or concerns, please contact Ms. Meacham at (336) 513-4200 ext. 4123 or jmeacham@acmhdds.org.</p>			
<p>UR/STR Updates</p>	<p>Ms. Lynnette Gordon, LME UR/STR Manager gave the following updates:</p> <p><u>New Crisis Process</u> - Ms. Gordon reported to providers the new Crisis process for Crisis Walk-Ins at the LME. Ms. Gordon expressed to providers to call the LME and let us know ahead of time that is coming in, if so; please bring over any clinical information that would be useful for MD & clinician. MD’s will send back information to provider agency. With the new process, the wait time has been dropped from 36 minutes to 8 minutes. The walk-in hours are 8am – 5pm here at the LME.</p> <p><u>Question: What about Caswell Clinic?</u> <i>Answer: We are working on plans for Caswell Clinic regarding MD services.</i></p> <p><u>Implementation Update #60</u> – (Please see handout “Highlights of Implementation Update #60) Ms. Gordon announced to providers there will be no changes to authorizations for CS as of now – the LME will grant up to 3 months (one more time) until date is effective October 12th for no new admissions. Please use Attachment A (DMA Child/Adolescent Discharge Plan) with the completed ITR, the updated PCP & any other supporting documentation for reauthorization of CS.</p> <p>Ms. Gordon touched on the medically necessity for CS with the exception of EPSDT.</p> <p><u>Question: What happens to Therapeutic Foster Care – CS was a necessity</u></p>	<p>Next Steps: Please continue to read all Implementation Updates & LME Provider Newsletter</p>		<p>Open</p>

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>to be placed in Therapeutic Foster Care? <i>Answer: The clinical home will change – (Note: pg. 2 of IU#60)</i></p> <p><u>Question: What is the official date to submit an authorization – 5pm or 12am?</u> <i>Answer: Midnight</i></p> <p>To contact Ms. Gordon for any questions – (336) 513-4200 ext. 4116 or via email: lgordon@acmhdds.org.</p>			
Provider Spotlight	<ul style="list-style-type: none"> • Old Vineyard • Residential Treatment Services <p>If you would like to present at “Provider Spotlight”, please contact Jean Gibson, Provider Liaison.</p>	None		Closed
Jail Visitation	<p>Mr. Richard Bruton, LME Community & Affairs Specialist announced the Alamance County Detention Center has discussed with the LME regarding the high number of “mental health workers” coming into the jail to see consumers. Very few services constitute the need for consumers to be seen while incarcerated. Providers need to aware they must follow all jail policies concerning visitation. Provider employees must present photo identification & state the purpose of their visit when requesting to see consumers in the jail.</p>	None		Closed
Next Meeting:	<p>Meeting was adjourned. The next Provider Forum will be held on November 19, 2009 at 1:30pm in Education Rooms A & B, HSC Building.</p>	None		Closed

Respectfully Submitted By:

_____ Date _____
 Carmen Morrow