



Alamance • Caswell • Rockingham

Local Management Entity

PROVIDER HIGHLIGHTS

Volume 1, Issue 1

January 27, 2009

What's New at the LME

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New Monitoring Tool

The new DMH/DD/SAS Provider Monitoring Tool has been implemented! This tool was created to promote standardization of the monitoring process, and as a means of identifying strengths and areas of noncompliance within provider agencies. Additionally, it focuses on certain key areas that are important in accessing the status of a provider with regard to compliance requirements. The tool may

be accessed at

http://www.dhhs.state.nc.us/mhddsas/provider_monitor_tool/index.htm.

Crisis Services in Rockingham and Caswell

Alamance-Caswell-Rockingham LME is pleased to announce that Daymark Recovery Services is now providing walk in crisis and mobile crisis services in Rockingham County. In addition, Youth Haven is providing walk-in crisis in Caswell County. Referrals are

welcome from all sectors of the community including self-referrals, public agencies, law enforcement, schools, emergency departments, and physicians.

Daymark Recovery Services is located at:
405 NC Hwy 65 Wentworth,
NC 27375
888-543-1444

Youth Haven Services is located at:
339 Wall St.
Yanceyville, NC 27379
336-694-4333

Division Updates

Implementation Update #51

Rate Reduction for TCM: DMA Procedures for NEA Withdrawal; Reinstatement of Provider Numbers; Reporting a Change in Provider Status; ValueOptions Updates; START Teams and Crisis Respite; CAP-MR/DD Update; PCP Form & Manual Revisions; Provisionally Licensed Assessments, CAP Monitoring Procedure / Acknowledgement Letter. Please refer to the Division Webpage for additional information.

<http://www.dhhs.state.nc.us/mhddsas/servicedefinitions>

Implementation Update #52

Community Support Services Tiered Rates; Day Treatment Rate Change; Provider # Changes to Completed Authorizations; Procedures for Change of Ownership; Reporting Withdrawal, Revocation or Suspension; Alternative Definitions & Performance Measures; Clinical Policy 8A Update; NC-TOPPS at a Glance Dashboard; Accreditation Update;

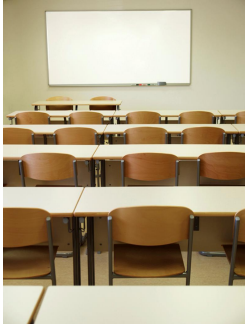
Complete CAP-MR/DD Requests; CAP-MR/DD Update.

New PCP

Due to incomplete legislative reporting requirements, the new PCP format and Instruction Manual will *NOT* be effective January 1, 2009. The new effective date will be posted as soon as possible.



Upcoming Training Events



Mark your calendars for February 5th, 2009. Lisa Bunting will be teaching Person Centered Planning. She will be training on the new PCP.

Lisa will discuss changes to the new PCP as well as give important key points to remember. She is an excellent trainer and both "new" and "old" will gain from this training.

If your organization has additional training needs,

please contact Carmen Morrow at (336)513.4200 ext. 4108.

Coming Soon

NC-TOPPS training will be provided by Trina Powell, Provider Relations Specialist, in February 2009. This free training is mandatory for **all** NC-TOPPS Superusers. This training will address provider agency's responsibilities, the LME's responsibilities, qualifying services for

NC-TOPPS, timeframes for completing NC-TOPPS, and the responsibilities of the Superuser. Additional information will be sent at a later date.



What is CFAC?

Consumer and Family Advisory Committee is a formalized group of consumers and family members appointed in accordance with the requirements of NCGS 122c-170.

The Alamance-Caswell-Rockingham LME has a Consumer & Family Advisory Committee (CFAC) that is made up of current/past consumers and/or family members. CFAC members represent the disabilities of mental health, developmental disabilities and substance abuse and must also be representative of the ethnicity of the communities served.

The voting body of this committee is appointed by the Alamance-Caswell-Rockingham LME Area Board and serves in an advisory capacity to the Area Board, the governing unit of the LME. However, all meetings are open to the public. Please encourage consumers and their families to attend.

Some activities of the CFAC include:

- Advising and commenting on the Local Business Plan, including observing and reporting on the implementation of State and Local Business Plans.
- Making recommendations on areas of service eligibility and service array, including identifying gaps in services, assisting in the identification of under-served populations, providing advice and consultation regarding development of additional services and new modes of services
- Participating in monitoring of service development and delivery Reviewing and commenting on the State and Local Service budgets.
- Observing and reporting on the implementation of State and Local Business Plans Participating in quality improvement activities including

outcome measures and performance indicators.

- Ensuring consumer and family participation in all quality improvement projects at both the provider and Local Management Entity levels.

2009 CFAC Schedule

January 27
 February 24
 March 24
 April 28
 May 26
 June 23
 July (no meeting)
 August 25
 September 22
 October 27
 November 24
 December (TBA)

All meetings begin promptly at 6:30pm at the Human Service Center, 1st Floor Boardroom, 319 N. Graham Hopedale Road (McKinney Street Entrance), Burlington NC.

"The insight of family and friends can compliment and enhance the expertise of professionals on the team."

Q-Tips

Crisis Plans - Remember to enter the name of the clinical home agency and if possible, the individual within the clinical home agency responsible for ensuring first responder in case of emergency. For persons in residential services, that service provider is the first responder (pg. 30 of PCP Instruction Manual).

All Person-Centered Plans must be re-written annually based on the Date of Plan (pg. 14 of PCP Instruction Manual).

Person-Centered Plans must be reviewed if the person's needs change, if there is a change in provider and/or based on assigned target dates (pg. 37 of PCP Instruction Manual).

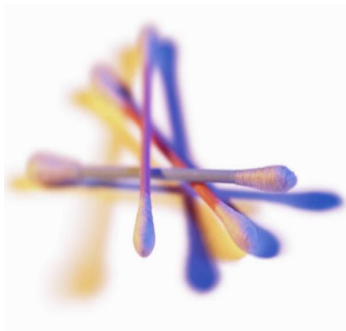
If any review results in a new service being added or a new goal(s) being added, or anything that cannot be explained in the "justification" space next to the Status Code, use the PCP Update/Revision page (pg. 37 of PCP Instruction Manual).

The LME Consumer Admission and Discharge

Form has been revised effective 12/31/08. To access the revised form and instructions:

<http://www.dhhs.state.nc.us/MHDDSAS/statspublications/manuals/forms/lmeconsumeradmissionform12-05-08.doc>

Please note that there are several code changes on the revised form. For example, code "09" for employment status at time of discharge no longer exists.



Community Information

G.A.N.G. - Gangs Are No Good

Right now we are facing one of the most crucial battles that we could ever imagine concerning our youth.....**GANGS!**

Gangs have an effect on our children whether they join them or not. Once inducted into a gang, youth become very rebellious and begin to engage in delinquent behavior. Those youth that choose not to join in with the gangs live with the fear of retaliation for not joining.

Many citizens of Alamance County do not realize the seriousness of this issue in our community. Many of us are not aware of some of the tell-tale signs of gang activity among our children and their friends. We all must become educated about gangs and their effect on our children

and our community.

A three part series of educational gang awareness presentations will be held at the Paramount Theater during 2009. The presentations are free and open to all citizens of Alamance County.

The first session, "Gangs Around Us" is scheduled for **Tuesday, January 27th**

The second session, "Gangs in Alamance County" is scheduled for **Tuesday, February 10th**.

The third session, "What We Have and What We Need in Alamance County" is scheduled for **Tuesday, March 3rd**.

Each two hour session will allow time for questions and discussion following the presentation. The sessions

will begin at 6:00 p.m. and end at 8:00 p.m. This initiative is being hosted by Allen Blue, Alamance County Gang Coordinator, Burlington Housing Authority, NBC Outreach, Burlington Neighborhood Involvement Association, Weed and Seed, Project Safe Alamance and all Alamance County law enforcement agencies.

Parents, teachers, clergy and service providers to children and youth are urged to attend.

Please make plans to come out and support these efforts to fight the growing number of gangs and gang related crimes in Alamance County.



Reminders

Consumer admission information is required to be completed on all consumers served and updated periodically when new consumer data is collected or when existing data is modified. Discharge data is required to be completed at the conclusion of an LME episode of care. A copy of the new LME Consumer Admission and Discharge Form can be found at

<http://www.ncdhhs.gov/mhddsa/statspublications/manualsforms/lmeconsumeradmission>

The ACR LME will be reassigning a target population for consumers whose target population group has been eliminated. The current expiration date will remain in effect. Thus, providers will be required to complete the new target population eligibility form for these new consumers upon

Alamance-Caswell-
Rockingham LME

319 N. Graham-
Hopedale Road

Suite A

Burlington, NC
27215

Phone:

(336) 513.4200

Fax:

(336) 513-4422

See us at:

www.acmhdds.org

expiration of the date on the record.

For example, if a consumer was admitted on May 15, 2008, and identified as AMSPM (Adult with Severe and Persistent Mental Illness) the LME will automatically reassign the consumer into the appropriate revised population, AMI (Adult with Mental Illness). Submission of a new target population form indicating AMI would be required by the provider no later than May 14, 2008.

Please note the following revisions to the IPRS Target Populations:

Adult with Mental Illness (AMI)

consolidates the following former target populations for consumer eligibility to services within IPRS: Adult with Severe and Persistent Mental Illness (AMSPM), Adult with Serious Mental Illness (AMSMI), Deaf or Hard of Hearing (AMDEF), and Homeless (PATH) - (AMPAT).

Adult Substance Abuse Treatment Engagement and Recovery (ASTER)

consolidates the following former target populations for consumer eligibility to services within IPRS: Adult Substance Abuse Treatment Engagement and Recovery (ASTER), Adult Substance Abuse High Management (ASHMT), Adult Substance Abuse DWI Treatment (ASDWI), Adult Substance Abuse Deaf and Hard of Hearing (ASDHH), and Adult Substance Abuse Homeless (ASHOM).

Child Mental Health Seriously Emotionally Disturbed (CMSED)

consolidates the following former target populations for consumer eligibility to services within IPRS: Child Mental Health Seriously Emotionally Disturbed with Out-of-Home Placement (CMSED), Child Mental Health Seriously Emotionally Disturbed (CMMED), Child Mental Health Deaf or Hard of Hearing (CMDEF), and Child Mental Health Homeless (PATH) - (CMPAT).

Child with a Substance Abuse Disorder (CSSAD)

consolidates the following former target populations for consumer eligibility to services within IPRS: Child Substance Abuse Criminal Justice Offender (CSCJO), Child Substance Abuse Women (CSWOM), and Child Substance Abuse DWI Treatment (CSDWI).

The following new target populations are intended to provide increased outreach and support to military service members (veterans) who have served and are serving in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) and their dependent family members:

Adult Mental Health Veteran and Family (AMVET)

Child Mental Health Veteran and Family (CMVET)

The LME will not automatically reassign consumers who are currently enrolled in the following target populations that have been eliminated: Child

Substance Abuse Indicated Prevention (CSIP), Child Substance Abuse Selective Prevention (CSSP), or Cross Disability Funded (CDF). Consumers currently enrolled in either of these target populations must have no later than February 28th, 2009. It is essential that providers document the consumer's target population eligibility in the consumer record. This documentation will be reviewed during site visits and post payment reviews. The ACR LME has attached Target Population Assignment Worksheets for this purpose; these forms will be posted on the LME Provider website (www.acmhdds.net) by January 20, 2009. If you have any questions, please contact me at 513-4200, ext. 4228 or Jean Gibson, Provider Liaison at ext. 4142.

