



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


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To: Joint Legislative Oversight Committee Members on HHS
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MH/DD/SAS Stakeholder Organizations and Groups
NC Association of County DSS Directors

From: Dave Richard 

Communication Bulletin # 137
State Funded ACT Service Update



The Department of Health and Human Services (DHHS) is working to implement measures to provide high-fidelity Assertive Community Treatment (ACT) services to individuals with a diagnosis of serious mental illness (SMI), who are in or at risk of entry to an adult care home. Through the settlement agreement 5,000 individuals with a diagnosis of SMI will have access to ACT services by July 1, 2019.

DHHS has expanded the ACT service definition based on the requirements set forth in the DHHS settlement agreement with the Department of Justice (DOJ). The new service definition is supportive of high-fidelity evidence-based practice implementation and aligns with the Tool for Measurement of ACT (TMACT) Fidelity Scale. Some of the key changes include:

- Direction regarding specific functions staff should fulfill with treatment and within the team, as well as training recommendations.
- Detailed interventions and activities to be directly delivered by ACT teams such as psychiatric rehabilitation. Furthermore, per the settlement, all individuals receiving ACT services will receive Supported Employment and Tenancy Support services from staff on their ACT teams.
- Guidance around embedding additional Evidence-Based Practices within the ACT team structure such as Integrated Dual Disorders Treatment, Supported Employment (Individual Placement and Support Model), Family Psychoeducation, Illness Management and Recovery, Wellness Recovery Action Plan, Supportive Housing.

The new state-funded ACT service definition can be found in the August 1, 2013 State-Funded Enhanced Mental Health and Substance Abuse Services document posted on the Division of Mental Health, Developmental Disabilities and Substance Abuse Services Service (DMH/DD/SAS) Definition webpage at:

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

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Per the new service definition, the billing for this service will be on a per diem basis. The rate for the service definition will be \$152.50 per diem. LME-MCOs desiring a higher per diem rate may submit a rate request procedure to the Division Financial Operations Team with appropriate supporting documentation. For a per diem rate to be generated, a 15 minute face-to-face contact that meets all requirements outlined in the ACT service definition must occur. Only one per diem may be billed per individual per day. All other contacts, meetings, travel time, etc. is considered indirect costs and is accounted for in the build-up of the per diem rate. Please note, the per diem rate schedule is a change from the previous case rate schedule. The ACT rate is based on an average of 1.4-2.1 contacts per week. LME-MCOs will need to determine the appropriate number of contacts based on individual need and state resource availability.

The DMH/DD/SAS Best Practices Team and the ACT Technical Assistance Center have provided initial training to providers and LME-MCOs and will continue to offer consultation and assistance during the implementation process and on this year's initiation of TMACT fidelity screening for providers. Details on fidelity screenings will be shared with the LME-MCOs and data collection on number of people served by teams meeting fidelity will be collected for DOJ accountability. For any questions, please contact Emery Cowan at emery.cowan@dhhs.nc.gov.

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