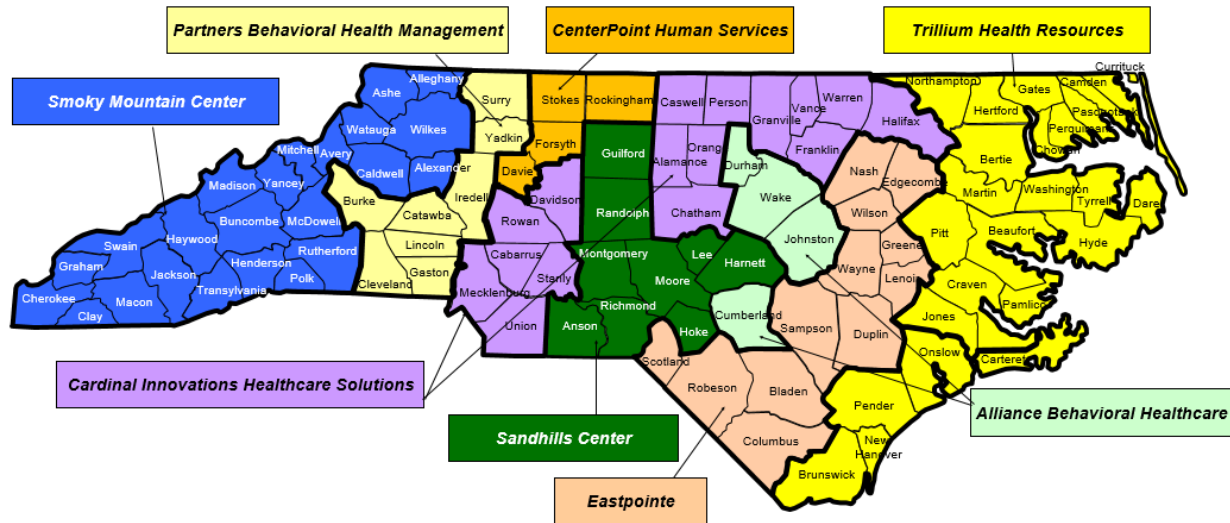


North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities,  
And Substance Abuse Services

Local Management Entities/ Managed Care Organizations  
Administrative Functions Monitoring Report  
August 2015



Prepared by:

Quality Management Section  
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services  
North Carolina Department of Health and Human Services  
3004 Mail Services Center, Raleigh, NC 27699-3004  
(919) 733-0696

[ContactDMHQuality@dhhs.nc.gov](mailto:ContactDMHQuality@dhhs.nc.gov)

Version: 9/28/2015



# NC DHHS LME/MCO Performance Summary

August 2015 Report

9/28/2015

## Meets Standards?

DMA Performance Measures	Standard	Meets Standards?							
		Alliance	Cardinal	CenterPoint	Eastpointe	Partners	Sandhills	Smoky Mountain	Trillium
% of Community Inpatient Readmits assigned to Care Coord.	85%	Y	Y	Y	Y	Y	Y	Y	Y
Total % of Auth Requests Processed in Required Timeframes	95%	Y	Y	Y	Y	Y	Y	Y	Y
% Routine Auths Processed in 14 Days	95%	Y	Y	Y	Y	Y	Y	Y	Y
% Expedited/Inpt Auths Processed in 3 Days	95%	Y	Y	Y	Y	Y	Y	Y	Y
% of Claims Processed within 30 Days	90%	Y	Y	Y	Y	Y	Y	Y	Y
% of Complaints resolved in 30 days	90%	Y	Y	Y	Y	Y	Y	Y	Y
<b>DMH Performance Measures</b>									
Total % of Auth Requests Processed in Required Timeframes	95%	Y	Y	Y	Y	Y	Y	Y	Y
% Routine Auths Processed in 14 Days	95%	Y	Y	Y	Y	Y	Y	Y	Y
% Expedited/Inpt Auths Processed in 3 Days	95%	Y	Y	Y	Y	Y	Y	Y	Y
% of Claims Processed within 30 Days	90%	Y	Y	Y	Y	Y	Y	Y	Y
% of Complaints resolved in 30 days	90%	Y	Y	Y	Y	Y	Y	Y	Y
<b>Combined Performance Measures</b>									
% of calls Abandoned	<5%	Y	Y	Y	Y	Y	Y	Y	Y
% Answered within 30 seconds	95%	Y	Y	Y	Y	Y	Y	Y	Y

Yellow Highlights indicate the MCO did not meet the Standard for one or two consecutive months.

Pink Highlights indicate the MCO did not meet the Standard for 3 or more consecutive months.

### EXPLANATIONS

Count	%
0	0%
0	0%
0	0%

Number of Standards Not Met:

Number of Standards Not Met for 2 or more Months (pinks):

Number of LME/MCOs with 2 or more Standards Not Met:

**LME/MCO Monthly Monitoring Report**  
**Medicaid and State Combined**

August 2015 Report

9/28/2015

Monitoring Area	Standard	Alliance	Cardinal	Center-Point	Eastpointe	Partners	Sandhills	Smoky Mountain	Trillium	NC Total	STD DEV
<b>Call Center</b>											
Total Number of Calls (re: services for consumers)		5,478	5,369	3,212	5,076	3,705	2635	4,949	2,685	33,109	
# of Calls Abandoned		33	92	74	133	73	59	111	45	620	
% of calls Abandoned	<5%	0.6%	1.7%	2.3%	2.6%	2.0%	2.2%	2.2%	1.7%	1.9%	
Avg Speed to Answer Calls (seconds)	o	7.0	5.0	5.5	3.0	8.0	5.0	6.0	4.0	5.4	1.49
# of Calls Answered within 30 seconds		5,445	5,273	3,191	5,003	3,536	2,576	4808	2,640	32,472	
% Answered within 30 seconds	95%	99.4%	98.2%	99.3%	98.6%	95.4%	97.8%	97.2%	98.3%	98.1%	
<b>IDD Wait List</b>											
Number of Persons on the IDD Waitlist (snapshot on 1st of Month)		2,089	1,867	1,224	829	909	1,251	1,241	735	10,145	
# of Persons on Registry of Unmet Needs for Innovations Waiver		2,050	1,796	1,223	829	870	1,153	1,034	627	9,582	
% of Persons waiting who are on the Reg. of Unmet Needs	o	98%	96%	100%	100%	96%	92%	83%	85%	94%	6%
# of Persons waiting for residential services		13	55	-	-	26	32	54	20	200	
% of Persons waiting for residential services	o	1%	3%	0%	0%	3%	3%	4%	3%	2%	1%
# of Persons waiting for ADVP		15	81	-	-	5	59	-	12	172	
% of Persons waiting for ADVP	o	1%	4%	0%	0%	1%	5%	0%	2%	2%	2%
# of Persons waiting for vocational services		-	2	5	-	19	7	28	4	65	
% of Persons waiting for vocational services	o	0%	0%	0%	0%	2%	1%	2%	1%	1%	1%
<b>Service Status of Persons on the Waiting List</b>											
# of Persons on Waitlist receiving B3 Services		285	562	317	59	111	290	240	64	1,928	
% of Persons on Waitlist receiving B3 Services	o	14%	30%	26%	7%	12%	23%	19%	9%	19%	8%
# of Persons on Waitlist receiving State Services		658	203	435	243	237	158	764	315	3,013	
% of Persons on Waitlist receiving State Services	o	31%	11%	36%	29%	26%	13%	62%	43%	30%	15%
# of Persons on Waitlist receiving State and/or B3 services (undup)		686	695	494	302	348	448	828	331	4,132	
% of Persons on Waitlist receiving State and/or B3 Services	o	33%	37%	40%	36%	38%	36%	67%	45%	41%	10%
# of Persons on Waitlist not receiving any LME/MCO funded svcs		1,403	1,172	730	527	561	803	413	404	6,013	
% of Persons on Waitlist not receiving any LME/MCO funded svcs	o	67%	63%	60%	64%	62%	64%	33%	55%	59%	10%
<b>Incidents</b>											
Number of Level 2 Critical Incident Reports received		195	214	46	94	145	114	185	100	1,093	
Number of Level 3 Critical Incident Reports received *		12	18	4	5	11	10	12	11	83	
* All Level 3 Critical Incidents are reviewed by the LME/MCO to ensure Provider conduct internal investigation.											
<b>Department of Justice Settlement</b>											
Individuals in In-reach		367	795	223	302	369	304	583	593	3,536	
Number of individuals in Transition Planning process		48	50	14	16	29	24	28	38	247	
Number of Individuals Housed - Total		52	92	47	63	45	73	69	113	554	

DOJ In Reach numbers are as of 8/31/15.

Yellow Highlights indicate the MCO did not meet the Standard

Pink Highlights indicate the MCO did not meet the Standard for 3 consecutive months.

Blue highlights indicate possible outliers.

**MCO Monthly Monitoring Report  
Medicaid Only**

**August 2015 Report  
LME/MCO:**

9/28/2015

<b>Monitoring Area</b>	<b>Standard</b>	<b>Alliance</b>	<b>Cardinal</b>	<b>Center-Point</b>	<b>Eastpointe</b>	<b>Partners</b>	<b>Sandhills</b>	<b>Smoky Mountain</b>	<b>Trillium</b>	<b>Statewide</b>	<b>STD DEV</b>
		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	
<b>Persons Served</b>											
Unduplicated Count of Medicaid Members		206,453	351,440	76,790	189,906	126,738	170,792	154,269	167,044	<b>1,443,432</b>	
# Persons Receiving MH Services		11,810	15,248	2,629	7,593	7,307	6,795	8,017	7,810	<b>67,209</b>	
% of Members Receiving MH Services	o	<b>5.7%</b>	<b>4.3%</b>	<b>3.4%</b>	<b>4.0%</b>	<b>5.8%</b>	<b>4.0%</b>	<b>5.2%</b>	<b>4.7%</b>	<b>4.7%</b>	0.8%
# Persons Receiving SA Services		872	1,596	165	1,105	1,468	692	1,349	1,165	<b>8,412</b>	
% of Members Receiving SA Services	o	<b>0.4%</b>	<b>0.5%</b>	<b>0.2%</b>	<b>0.6%</b>	<b>1.2%</b>	<b>0.4%</b>	<b>0.9%</b>	<b>0.7%</b>	<b>0.6%</b>	0.3%
# Persons Receiving DD Services		2,757	3,931	864	1,350	1,826	1,286	1,780	1,547	<b>15,341</b>	
% of Members Receiving DD Services	o	<b>1.3%</b>	<b>1.1%</b>	<b>1.1%</b>	<b>0.7%</b>	<b>1.4%</b>	<b>0.8%</b>	<b>1.2%</b>	<b>0.9%</b>	<b>1.1%</b>	0.2%
Unduplicated # that received MH/DD/SA Services		14,867	20,775	3,580	9,284	10,142	8,773	10,888	9,569	<b>87,878</b>	
% of Members Receiving MH/DD/SA Services	o	<b>7.2%</b>	<b>5.9%</b>	<b>4.7%</b>	<b>4.9%</b>	<b>8.0%</b>	<b>5.1%</b>	<b>7.1%</b>	<b>5.7%</b>	<b>6.1%</b>	1.1%
<b>Community Psychiatric Hospitalization</b>		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	
# of MH Admissions to Community Psychiatric Inpatient		161	302	79	126	173	54	210	173	<b>1,278</b>	
Rate of MH Admissions per 1,000 Medicaid Members	o	0.78	0.86	1.03	0.66	1.37	0.32	1.36	1.04	<b>0.89</b>	0.33
# of MH Admissions that were Readmissions within 30 days		20	29	10	15	18	7	30	16	<b>145</b>	
% of MH Admissions that were Readmissions within 30 days	o	<b>12.4%</b>	<b>9.6%</b>	<b>12.7%</b>	<b>11.9%</b>	<b>10.4%</b>	<b>13.0%</b>	<b>14.3%</b>	<b>9.2%</b>	<b>11.3%</b>	1.7%
# of MH Inpatient Discharges		175	251	64	168	84	81	214	207	<b>1,244</b>	
<b>MH Inpt Average Length of Stay (days)</b>	o	6.20	8.70	5.40	5.00	6.30	4.80	8.85	9.66	<b>7.4</b>	1.79
# of SA Admissions to Community Psychiatric Inpatient		2	26	9	5	24	10	2	4	<b>82</b>	
Rate of SA Admissions per 1,000 Medicaid Members	o	0.01	0.07	0.12	0.03	0.19	0.06	0.01	0.02	<b>0.06</b>	0.06
# of SA Admissions that were Readmissions within 30 days		0	1	2	0	2	0	0	2	<b>7</b>	
% of SA Admissions that were Readmissions within 30 days	o	<b>0.0%</b>	<b>3.8%</b>	<b>22.2%</b>	<b>0.0%</b>	<b>8.3%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>50.0%</b>	<b>9%</b>	16.5%
# of SA Inpatient Discharges		1	34	6	6	17	13	3	6	<b>86</b>	
<b>SA Inpt Average Length of Stay (days)</b>	o	2.0	4.7	4.8	5.0	5.5	3.9	4.7	5.0	<b>4.8</b>	1.02
<b>Care Coordination</b>		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Jul 2015	
# of MH and SA Readmits assigned to a Care Coordinator		19	30	12	15	20	7	30	18	<b>151</b>	
% of Readmits assigned to Care Coordination	85.0%	95.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	<b>99.3%</b>	
<b>Emergency Dept Utilization (3 month lag)</b>		May 2015	May 2015	May 2015	May 2015	May 2015	May 2015	May 2015	May 2015	Apr 2015	
# of ED Admits for persons with MHDDSA diagnoses		-	778	239	351	-	-	488	-	<b>1,856</b>	
Rate of ED Admits per 1,000 Medicaid Members	o	-	2.2	2.5	1.9	-	-	3.1	-	<b>1.29</b>	1.25
# of ED Admits for persons who are active consumers		-	52	112	52	-	-	146	-	<b>954</b>	
% of ED Admits that were for active consumers	o	-	6.8%	14.1%	14.2%	-	-	16.9%	-	<b>51%</b>	20.0%
# of ED Admits which were readmissions within 30 days		-	131	55	114	-	-	76	-	<b>376</b>	
% of ED Admissions Readmitted within 30 days	o	-	16.8%	23.0%	32.5%	-	-	15.6%	-	<b>20%</b>	6.7%
<b>Authorization Requests</b>		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Jul 2015	
Total Number of Auth Requests Received		3,190	4,501	1,171	2,155	3,798	2,675	3,757	2,875	<b>24,122</b>	
# Standard Auth. Request Decisions		2,781	3,663	967	1,677	3,587	2,190	3004	1,872	<b>19,741</b>	
# Standard Auth Requests Processed in 14 Days		2,771	3,660	963	1,677	3,587	2,190	3002	1,872	<b>19,722</b>	
% Processed in 14 Days	95.0%	99.6%	99.9%	99.6%	100.0%	100.0%	100.0%	99.9%	100.0%	<b>99.9%</b>	0.2%
# Auth Requests requiring Expedited Decisions, inclusive of Inpatient		409	838	204	478	211	485	753	1,003	<b>4,381</b>	
# Expedited and Inpatient Auth Requests Processed in 3 Days		409	836	204	464	211	484	752	999	<b>4,359</b>	
% Processed in 3 Days	95.0%	100.0%	99.8%	100.0%	97.1%	100.0%	99.8%	99.9%	99.6%	<b>99.5%</b>	1.0%
Total % of Auth Requests Processed in Required Timeframes	95.0%	99.7%	99.9%	99.7%	99.4%	100.0%	100.0%	99.9%	99.9%	<b>99.8%</b>	0.2%
# of Auth Requests Denied for Clinical Reasons		71	179	37	167	170	105	76	81	<b>886</b>	
% of Total Auth Requests Denied for Clinical Reasons	o	<b>2.2%</b>	<b>4.0%</b>	<b>3.2%</b>	<b>7.7%</b>	<b>4.5%</b>	<b>3.9%</b>	<b>2.0%</b>	<b>2.8%</b>	<b>3.7%</b>	1.7%
# of Administrative Denials		75	-	9	-	20	-	12	413	<b>529</b>	
% of Total Auth Requests Denied for Admin Reasons	o	<b>2.4%</b>	<b>0.0%</b>	<b>0.8%</b>	<b>0.0%</b>	<b>0.5%</b>	<b>0.0%</b>	<b>0.3%</b>	<b>14.4%</b>	<b>2.2%</b>	4.6%
Total # of Auth Requests Denied		146	179	46	167	190	105	88	494	<b>1,415</b>	
% of Total Auth Requests Approved	o	<b>95.4%</b>	<b>96.0%</b>	<b>96.1%</b>	<b>92.3%</b>	<b>95.0%</b>	<b>96.1%</b>	<b>97.7%</b>	<b>82.8%</b>	<b>94.1%</b>	4.4%
Number of Consumer Authorization Appeals received		15	25	2	21	17	18	10	6	<b>114</b>	

**MCO Monthly Monitoring Report  
Medicaid Only**

**August 2015 Report  
LME/MCO:**

9/28/2015

<b>Monitoring Area</b>	<b>Standard</b>	<b>Alliance</b>	<b>Cardinal</b>	<b>Center-Point</b>	<b>Eastpointe</b>	<b>Partners</b>	<b>Sandhills</b>	<b>Smoky Mountain</b>	<b>Trillium</b>	<b>Statewide</b>	<b>STD DEV</b>
Rate of Consumer Auth. Appeals per 1,000 persons svd	o	1.0	1.2	0.6	2.3	1.7	2.1	0.9	0.6	1.3	0.60
Number of Authorizations overturned due to Consumer Appeals		-	-	-	4	1	6	1	-	12	
<b>Claims</b>		7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	6/16 - 7/15	
Total # Clean Claim Received during Month (detail lines)		93,981	313,900	64,204	141,606	173,779	132,565	181,606	122,416	1,224,057	
Rate of Claims Rcpt per Person Served	o	6.3	15.1	17.9	15.3	17.1	15.1	16.7	12.8	13.9	3.44
# Paid		86,241	268,530	59,377	120,088	153,571	126,137	157,225	103,325	1,074,494	
# Denied		7,739	45,333	4,827	21,518	20,208	6,428	24,240	17,652	147,945	
# Pended or in Process		1	37	-	-	-	-	141	1,439	1,618	
Percent Denied	o	8.2%	14.4%	7.5%	15.2%	11.6%	4.8%	13.4%	14.6%	12.1%	3.6%
# Paid or Denied within 30 Days		92,773	313,863	64,011	140,841	173,779	132,544	178,505	120,977	1,217,293	
Percent Processed within 30 Days	90.0%	98.7%	100.0%	99.7%	99.5%	100.0%	100.0%	98.3%	98.8%	99.4%	0.6%
Avg # days for Processing (from Receipt to Payment )	o	8.7	8.3	9.0	6.0	9.0	8.7	8.7	6.7	8.1	1.07
Number of Provider claim Appeals received		2	33	0	1	0	0	17	0	53	
Rate of Provider Claim appeals per 1,000 persons served	o	0.1	1.6	-	0.1	-	-	1.6	-	0.6	0.67
Number of claim denials overturned due to Provider Appeals		0	2	0	0	0	0	9	0	11	
<b>Complaints/Grievances</b>		Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	June 2015	
Total number of complaints received (1 month prior)		61	62	18	19	19	14	39	22	254	
Rate of Complaints per 1,000 Persons Served	o	3.6	2.7	3.8	2.3	1.6	1.2	2.9	1.7	2.9	0.89
# Consumer complaints against provider		21	44	14	12	17	9	21	16	154	
% Consumer complaints against provider	o	34.4%	71.0%	77.8%	63.2%	89.5%	64.3%	53.8%	72.7%	61%	15.5%
# Consumer complaints against LME/MCO		-	18	4	2	1	2	9	6	42	
% Consumer complaints against LME/MCO	o	0.0%	29.0%	22.2%	10.5%	5.3%	14.3%	23.1%	27.3%	17%	9.9%
# Provider complaints against LME/MCO		1	-	-	-	-	1	-	-	2	
% Provider complaints against LME/MCO	o	1.6%	0.0%	0.0%	0.0%	0.0%	7.1%	0.0%	0.0%	1%	2.3%
# of Other Types of Complaints		39	-	-	5	1	2	9	-	56	
# of Complaints Resolved in 30 Days		61	62	18	19	19	14	39	22	254	
Percent of Complaints resolved in 30 days	90.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
<b>Program Integrity--Fraud, Waste and Abuse</b>		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Jul 2015	
Number of Provider fraud and abuse cases under investigation by LME/MCO-New		7	8	15	27	20	3	8	8	96	
Number of Provider fraud and abuse cases under investigation by LME/MCO-Ongoing from previous month		7	28	5	3	48	11	81	1	184	
Number of Enrollee fraud and abuse cases investigated by LME/MCO		0	0	0	0	0	0	0	0	0	
Number of Cases Referred to DMA Program Integrity		0	1	2	0	0	0	0	0	3	

**LME/MCO Monthly Monitoring Report**  
**State/Federal Block Grant Only**

**August 2015 Report**  
**LME/MCO:**

9/28/2015

<b>Monitoring Areas</b>	<b>Standard</b>	<b>Alliance</b>	<b>Cardinal</b>	<b>Center-Point</b>	<b>Eastpointe</b>	<b>Partners</b>	<b>Sandhills</b>	<b>Smoky Mountain</b>	<b>Trillium</b>	<b>Statewide</b>	<b>STD DEV</b>
<b>Persons Served</b>		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	
Estimated number of Uninsured in Catchment Area		242,665	368,759	75,722	127,820	135,125	169,370	167,109	184,151	1,470,721	
# Persons Receiving MH Services		3,165	2,664	879	1,559	1,523	1,450	2,464	1,586	15,290	
% of Uninsured Receiving MH Services	o	1.3%	0.7%	1.2%	1.2%	1.1%	0.9%	1.5%	0.9%	1.0%	0.24%
# Persons Receiving SA Services		887	1,136	254	561	670	523	820	1,236	6,087	
% of Uninsured Receiving SA Services	o	0.4%	0.3%	0.3%	0.4%	0.5%	0.3%	0.5%	0.7%	0.4%	0.12%
# Persons Receiving DD Services		785	700	228	494	465	418	522	588	4,200	
% of Uninsured Receiving DD Services	o	0.3%	0.2%	0.3%	0.4%	0.3%	0.2%	0.3%	0.3%	0.3%	0.06%
Unduplicated # Persons Receiving MH/DD/SA Services		4,726	4,500	1,327	2,415	2,589	3,199	3,734	2,988	25,478	
% of Uninsured Receiving MH/DD/SA Services	o	1.9%	1.2%	1.8%	1.9%	1.9%	1.9%	2.2%	1.6%	1.7%	0.28%
<b>Community Psychiatric Hospitalization</b>		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	
# of MH Admissions to Community Psychiatric Inpatient		88	182	93	39	247	27	107	37	820	
Rate of MH Admissions per 1,000 Uninsured	o	0.36	0.49	1.23	0.31	1.83	0.16	0.64	0.20	0.56	0.55
# of MH Admissions that were Readmissions within 30 days		5	10	9	5	7	1	6	2	45	
% of MH Admissions that were Readmissions within 30 days	o	5.7%	5.5%	9.7%	12.8%	2.8%	3.7%	5.6%	5.4%	5.5%	3.06%
# of MH Inpatient Discharges		84	75	51	44	110	33	123	52	572	
MH Inpt Average Length of Stay (days)	o	5.0	6.8	5.8	5.6	5.5	4.4	8.0	6.9	6.2	1.08
# of SA Admissions to Community Psychiatric Inpatient		0	11	29	22	4	8	14	10	98	
Rate of SA Admissions per 1,000 Uninsured	o	-	0.03	0.38	0.17	0.03	0.05	0.08	0.05	0.07	0.12
# of SA Admissions that were Readmissions within 30 days		0	1	3	2	0	0	1	0	7	
% of SA Admissions that were Readmissions within 30 days	o	-	9.1%	10.3%	9.1%	0.0%	0.0%	7.1%	0.0%	7%	4.5%
# of SA Inpatient Discharges		0	10	26	21	3	10	10	9	89	
SA Inpt Average Length of Stay (days)	o	-	7.2	5.6	5.6	2.3	4.2	5.5	7.4	5.7	1.63
<b>Authorizations</b>		Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	Aug 2015	
Total Number of Auth Requests Received		961	1,318	645	428	914	1,001	702	426	6,395	
# Standard Auth. Request Decisions		784	721	415	379	862	666	399	205	4,431	
# Standard Auth Requests Processed in 14 Days		784	720	414	379	862	666	399	205	4,429	
% Processed in 14 Days	95.0%	100.0%	99.9%	99.8%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.00
# Auth Requests requiring Expedited Decisions, inclusive of Inpatient		177	597	230	49	52	335	303	221	1,964	
# Expedited and Inpatient Auth Requests Processed in 3 Days		177	597	230	49	52	335	303	219	1,962	
% Processed in 3 Days	95.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.1%	99.9%	-
Total % of Auth Requests Processed in Required Timeframes	95.0%	100.0%	99.9%	99.8%	100.0%	100.0%	100.0%	100.0%	99.5%	99.9%	0.00
# of Auth Requests Denied for Clinical Reasons		12	3	19	56	13	6	5	6	120	
% of Total Auth Requests Denied for Clinical Reasons	o	1.2%	0.2%	2.9%	13.1%	1.4%	0.6%	0.7%	1.4%	1.9%	4.0%
# of Administrative Denials		-	-	19	-	5	-	3	76	103	
% of Total Auth Requests Denied for Admin Reasons	o	0.0%	0.0%	2.9%	0.0%	0.5%	0.0%	0.4%	17.8%	1.6%	5.8%
Total # of Auth Requests Denied		12	3	38	56	18	6	8	82	223	
% of Total Auth Requests Approved	o	98.8%	99.8%	94.1%	86.9%	98.0%	99.4%	98.9%	80.8%	97%	6.6%
Number of Consumer Authorization Appeals received		2	-	1	5	2	3	2	-	15	
Rate of Consumer Auth. Appeals per 1,000 persons svd	o	0.4	-	0.8	2.1	0.8	0.9	0.5	-	0.6	0.61
Number of Authorizations overturned due to Consumer Appeals		-	-	-	1	-	-	1	-	2	
<b>Claims</b>		7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	7/16 - 8/15	
<b>Total # Clean Claim Received during Month (header)</b>		<b>21,586</b>	<b>53,122</b>	<b>10,005</b>	<b>27,658</b>	<b>28,438</b>	<b>27,325</b>	<b>41,504</b>	<b>36,721</b>	246,359	
Rate of Claims Rcpt per Person Served	o	4.6	11.8	7.5	11.5	11.0	8.5	11.1	12.3	9.67	2.50
# Paid		19,266	45,104	9,228	22,513	25,729	26,155	34,646	25,933	208,574	
# Denied		2,320	8,017	777	5,145	2,709	1,170	6,823	10,489	37,450	
# Pended or in Process		0	1	-	-	-	-	35.0	299	335	
Percent Denied	o	10.7%	15.1%	7.8%	18.6%	9.5%	4.3%	16.5%	28.8%	15.2%	7.2%
# Paid or Denied within 30 Days		21,342	53,121	9,987	27,614	28,438	27,324	41,187	36,422	245,435	

**LME/MCO Monthly Monitoring Report**  
**State/Federal Block Grant Only**

**August 2015 Report**  
**LME/MCO:**

9/28/2015

<b>Monitoring Areas</b>	<b>Standard</b>	<b>Alliance</b>	<b>Cardinal</b>	<b>Center-Point</b>	<b>Eastpointe</b>	<b>Partners</b>	<b>Sandhills</b>	<b>Smoky Mountain</b>	<b>Trillium</b>	<b>Statewide</b>	<b>STD DEV</b>
Percent Processed within 30 Days	90.0%	98.9%	100.0%	99.8%	99.8%	100.0%	100.0%	99.2%	99.2%	99.6%	0.00
Avg # days for Processing (from Receipt to Payment )	o	8.9	8.4	7.4	4.5	8.6	9.8	8.7	7.0	8.0	1.52
<b>Complaints</b>		Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	Jul 2015	
<b>Total number of complaints received (1 month prior)</b>		27	8	9	18	10	2	8	10	92	
Rate of Complaints per 1,000 Persons Served	o	4.5	1.6	4.8	6.0	3.3	0.5	1.8	2.5	3.61	1.74
# Consumer complaints against provider		11	3	9	3	6	2	5	8	47	
% Consumer complaints against provider	o	41%	38%	100%	17%	60%	100%	63%	80%	51%	28.1%
# Consumer complaints against LME/MCO		1	-	-	3	-	-	3	-	7	
% Consumer complaints against LME/MCO	o	4%	0%	0%	17%	0%	0%	38%	0%	8%	12.6%
# Provider complaints against LME/MCO		2	-	-	5	-	-	-	-	7	
% Provider complaints against LME/MCO	o	7%	0%	0%	28%	0%	0%	0%	0%	8%	9.2%
# of Other Types of Complaints		13	5	-	7	4	-	-	2	31	
<b># of Complaints Resolved in 30 Days</b>		27	8	9	18	10	2	8	10	92	
Percent of Complaints resolved in 30 days	90.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	-
<b>Yellow Highlights indicate the MCO did not meet the Standard</b> <b>Pink Highlights indicate the MCO did not meet the Standard for 3 consecutive months.</b> <b>Blue highlights indicate possible outliers.</b>											

## Notes Regarding Data

Explain below any items where there are significant changes from prior month(s) and/or standards are not met. Also include alerts when data integrity is an issue.

LME	Data Sheet	Item	Date Noted	Note
Alliance	DMH Data Sheet	Authorizations	9/1/2015	Alliance is no longer reviewing Holly Hill Hospital - Wake County funded services. This change was implemented with the change in their contract and is reflected in the total auth and expedited auth numbers.
Alliance	DMA Data Sheet	Care Coordination	9/1/2015	The 1 member who did not have a Care Coordinator assigned did not need one, according to the DMA Contract: Care Coordination Definitions dated December 1, 2014.
Cardinal	DMA Data Sheet	Emergency Dept. Utilization	9/16/2015	Emergency Department data was updated for February through April 2015.
Cardinal	DMA Data Sheet	Emergency Dept. Utilization	9/16/2015	There was an increase in Emergency Department admissions and readmissions in May 2015. 53% of the admissions were from Mecklenburg. Nine consumers accounted for 30% of the readmissions in May.
Cardinal	DMA & DMH	Community Psychiatric Hospitalization	9/16/2015	The Community Psychiatric Hospitalization data was updated for May through July 2015.
Cardinal	DMA & DMH	Medicaid Routine and Expedited TAR decreases since July, 2015	9/16/2015	I don't have any known explanations. Those don't appear to be significant enough deviations to seem abnormal. Could just be summer slow down with vacations, etc. (Christine Beck)
CenterPoint	Combined Sheet	I/DD Wait List	9/20/2015	Note a different methodology was utilized this reporting period. For the residential, ADVP and vocational sections, the #s indicated reflect the # of people identified on the 1st of the month measured who indicated that they had an immediate need for the service during the month measured. Regarding those potentially waiting not on the reporting form, please note the following: ADVP: immed needs in mo reported = 0 ADVP: # w/ potential needs since added to the RUN = 508 ADVP: % of potential need that is immediate = 0 Residential: immed needs in mo reported = 0 Residential: # w/ potential needs since added to the RUN = 389 Residential: % of potential need that is immediate = 0 Vocational: immed needs in mo reported = 5 Vocational: # w/ potential needs since added to the RUN = 508 Vocational: % of potential need that is immediate = 1%
CenterPoint	DMH Data Sheet	Claims	9/20/2015	Decrease in the number of claims received is primarily related to delayed claims submission for a single.
CenterPoint	DMA & DMH	Community Psychiatric Hospitalizations - MH State and SA Medicaid		We have seen an increase in SA relapse which lead to hospitalizations or hospitalizations. Some of the people relapse and become SI or it is a combination of things like, death of a family member, lost housing, relapsed and SI thoughts.



LME	Data Sheet	Item	Date Noted	Note
Eastpointe	DMA Data Sheet	Complaints	9/14/2015	FYI- There has been a 58% increase in complaints from June to July. Although there was a 13% increase of the number of complaints filed against providers by members, the driving force of the increase appears to be complaints that are not categorized (LME staff filing complaints, provider/provider complaints, anonymous complaints). There were no complaints in the "Other" category for June; however, this category makes up 26% of the July Medicaid complaints. In looking at the member complaints filed against providers, 25% (3:12) of those were related to appointments issues (members arriving, but told they had no appointment [2-substantiated]; provider failed to send required information for appointment [1-unsubstantiated]. Sixty-six (66%) of the 3 complaints were substantiated. Sixteen percent of the member complaints against providers involved service termination [2-substantiated]. I will ask Analytics to take a closer look at the past data to see if we need to address these issues at the next Provider Meeting.
Partners	DMA & DMH	Claims DMA Rows 66-78 DMH Rows 59-68	9/18/2015 August 2015 Rpt	* Claims data continues to be reported at the claim line level. Header level data for DMA is 73,573 submitted, for DMH is 13,735 submitted. We continue to work toward reporting at header level.  * Measure defs state that this section is expected to be reported with a 1/2 month lag. In discussion between Partners and the State, it was decided that we would not report on a 1/2 month lag. We have historically reported and will continue to report the full month from the first through the last day of the reported month.
Partners	DMA & DMH	Authorizations DMA row 39 DMH row 29	9/18/2015 August 2015 Rpt	Total number of SARs continue to be lower for Medicaid and State funds due to unmanaged and pass through days resetting on July 1, 2015.
Smoky	DMA Data Sheet	Commu Psy Hosp: Lines 16-27, May, 15 Column:	9/16/2015	Updated May, 15 with Claims data
Smoky	DMH Data Sheet	Commu Psy Hosp: Lines 16-27, May, 15 Column:	9/16/2015	Updated May, 15 with Claims data
Smoky	DMA Data Sheet	Commu Psy Hosp: Lines 16, 22, Aug, 15 Column:	9/16/2015	Ratio of MH to SA is skewed this month in favor of MH. Very few of the auths for this month were noted as SA.