



# **Overview of the Upcoming Annual Program Monitoring of LME-MCOs**

**Division of Mental Health, Developmental  
Disabilities, and Substance Abuse Services**

**March 1, 2017**



# Introduction

- **Welcome**
- **Housekeeping Details**
  - ❖ Webinar is for LME-MCO staff only.
  - ❖ Attendance: If group listening in, email [LME.Monitoring@dhhs.nc.gov](mailto:LME.Monitoring@dhhs.nc.gov), subject line: Webinar Attendees; list names of all Attendees in group.
  - ❖ Put phones on mute, but not on hold.
  - ❖ Two presentations – Programmatic Review and Clinical Services Review. Will only be able to answer a few questions.
  - ❖ During webinar, please type questions into chat box for response at end of presentation and/or on FAQ page.
  - ❖ Send questions to LME Monitoring mailbox so they can be captured and compiled into a FAQ document.
  - ❖ PowerPoint presentation from webinar will be posted on the web ~ 1 week – some tweaks will be made based on today’s session.



# Background

- **The Annual Systems Review is a part of the Division's subrecipient monitoring responsibility.**
  - ❖ **DMH/DD/SAS – Pass-through entity (PTE) – receives funds from the Feds and the General Assembly, which in turn are awarded to the LME-MCOs to carry out specific mental health, intellectual/developmental disabilities and substance use programs and services.**
    - **LME-MCOs – Subrecipients of DMH/DD/SAS**
    - **Providers – Subrecipients of LME-MCOs**
- **The strings attached to State and Block Grant funds – laws, regulations, requirements – are passed on to the LME-MCOs and entities with which the Division contracts.**



# Monitoring Authority

2 CFR Part 200.331(a)(2)(3)(d)

## Responsibilities of Pass-Through Entities (PTEs)

Monitor the activities of the subrecipient as necessary to **ensure that the subaward is used for authorized purposes**, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward **and that performance goals are achieved.**

**Ensure that any additional requirements needed by the PTE to meet its own responsibility to the Federal awarding agency are met**, including identification of any required financial and performance reports.



# Monitoring Authority

## DHHS Policy on Monitoring Programs

Each division shall routinely evaluate subrecipients to whom funds are provided to carry out the programs of the department..

Division program monitoring functions shall include, but not be limited to the following activities:

1. For governmental agencies, **determine compliance with the Federal and state programmatic and financial requirements for the particular program being monitored.**
2. **Perform site visits to review financial and programmatic records and observe operations.**



# Monitoring Authority

## G.S. § 122C-143.1. Policy guidance.

(c) **The Secretary shall ensure that the payment policy provides incentives designated to target resources consistent with legislative policy and with the State's long-range plans and to promote equal accessibility to services for individuals regardless of their catchment area.**

## G.S. § 122C-112.1. Powers and duties of the Secretary.

(a) The Secretary shall do all of the following:

- (6) Establish comprehensive, cohesive **oversight and monitoring procedures and processes to ensure continuous compliance** by area authorities, county programs, and all providers of public services with State and federal policy, law, and standards. The procedures shall include the development and use of critical performance measures and report cards for each area authority and county program.
- (7) **Conduct regularly scheduled monitoring and oversight** of area authority, county programs, and all providers of public services. Monitoring and oversight shall be used to assess compliance with the LME business plan and implementation of core LME functions. Monitoring shall also include the examination of LME and provider performance on outcome measures including adherence to best practices, the assessment of consumer satisfaction, and the review of client rights complaints.



# DMH/DD/SAS Accountability

- **DMH/DD/SAS Assurance of Proper Management and Oversight of Federal and State Awards**
  - ❖ **Federal Awarding Agency – SAMHSA**
  - ❖ **NC Office of State Auditor – Annual Federal Compliance Audit / Program and Investigative Audits (as needed)**
  - ❖ **Secretary of Department of Health and Human Services**
    - **Office of Internal Auditor**
      - **Risk Management and Audit Resolution**
      - **EAGLE Review – G.S. § 143D-6 - Office of State Controller**



# Federal Programs That Will be Monitored

- **SAPTBG - \$43 Million**
  - ❖ Adult and Child SUD Treatment
  - ❖ 20% Prevention
  - ❖ 5% IV Drug Use
  - ❖ Women's Set Aside Funding (WSAF)
  - ❖ CASAWORKS for Families Residential Initiative
  - ❖ Work First/CPS Substance Use Initiative
  - ❖ JJSAMHP
- **CMHSBG - \$12 Million**
  - ❖ Adults with SMI; children and youth with SED
  - ❖ 10% set aside for Individuals Experiencing a First Episode Psychosis
  - ❖ System of Care Practice
- **System of Care Expansion Grant – \$3.3 Million**  
(High Fidelity Wraparound Sites)
- **Social Services Block Grant – \$7.5 Million**
  - ❖ ADVP
  - ❖ Group Living – Moderate
  - ❖ Sample Chosen for SUD/MH Clinical Monitoring





# Guidance for Monitoring Compliance

SAPTBG - 45 CFR § 96.120-137      CFDA 93.959

CMHSBG – 42 CFR § 300x-1      CFDA 93.958

SOC Expansion Grant      CFDA 93.104

**2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (i.e., Uniform Guidance)**



# Guidance for Monitoring Compliance

## Programmatic Review Focuses on the Following Federal Compliance Areas

- Allowable Activities
- Eligibility
- Reporting
- Special Tests and Provisions

### Transparency

- Citations, Guidelines and Tool Posted on Audit Information Page



# Preparation for SFY 2017

- **Review Overall Efficiency of Prior Year Review**
  - ❖ Feedback from Monitoring Team and LME-MCOs
- **Review Overall Performance of LME-MCOs**
  - ❖ Predominant Areas Requiring a Plan of Correction
  - ❖ Recurring Findings
- **Incorporate Feedback from External and Internal Audits of DMH Monitoring and Oversight of Subrecipient Award Programs (All three BGs were audited by OSA)**
- **Determine if there are new federal or state requirements**
  - ❖ Incorporate new requirements in upcoming reviews
    - CMHSBG (including SOC Practice)
    - SOC Expansion Grant (new)
    - First Episode Psychosis
    - JJSAMHP – Incorporated Plan of Work (POW) requirements, revised record review tool and developed program tool



# Enhancements for SFY 2017 Review

- Webinar
  - Special mailbox set up to receive questions – [LME.Monitoring@dhhs.nc.gov](mailto:LME.Monitoring@dhhs.nc.gov)
  - Topical Index with FAQs posted on web
- 

## Overview of SFY 2017 Review

- Program Administrators in Collaboration with Program Audit Team
- Highlights of What's New or Different
- What documentation needs to be available



# **2017 Block Grant Review: Overview of Program and Record Guidelines and Tools**



# Community Mental Health Services Block Grant - System of Care Practice

- **Includes**
  1. Individualized service planning;
  2. A robust service array and fostering the use of evidence based practices;
  3. Community Collaboratives coordinating services and supports at the system level; and
  4. Family and Youth voice and supports.
- **System of Care is applied to all child and adolescent behavioral health services in NC.**
- **Well run System of Care ensures we are getting good outcomes for children and families.**



# Community Mental Health Services Block Grant - First Episode Psychosis

- In 2014 SAMHSA was directed by Congress to require states to set aside 5% of their MHBG allocation to support “evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders”.
- NC is using Coordinated Specialty Care (CSC) model to address FEP in NC.
- CSC is a team approach that provides assertive outreach/engagement, individual and family psychoeducation and therapy, medication management and supportive employment and education.
- Two existing teams - RHA in Wilmington and UNC-CH in Raleigh.
- Carolinas Health System in Charlotte preparing to implement an FEP program.



# **Community Mental Health Services Block Grant – System of Care Practice Program Monitoring**

- **New: System of Care, which includes Community Collaborative and Semi-Annual Report**
- **Documentation Needed:**
  - ❖ Evidence of a contract between LME-MCO and provider for services rendered
  - ❖ Intake and screening information
  - ❖ Evidence of signed/current MOA between LME-MCO with provider
  - ❖ Flyers or brochures
  - ❖ Applicable Policies and Procedures
  - ❖ Evidence of participation by individual and family member(s)
  - ❖ Progress notes





# Community Mental Health Services Block Grant – System of Care Practice Program Monitoring

- **Documentation Needed:**
  - ❖ **SOC Coordinator documentation on number of outreach efforts (by system category), number of trainings provided (including Child and Family Team trainings, number of CFTs to whom technical assistance is provided, and number of collaborative meetings that are staffed/supported**
  - ❖ **SOC Coordinator documentation regarding outreach, training and technical assistance efforts by family partners or advocates with whom they collaborate**
  - ❖ **DMH Performance Contract reports**
  - ❖ **Quality Management or Care Coordination or SOC staff policy and procedure for submitting SOC semi-annual reports**



# Community Mental Health Services Block Grant - System of Care Practice Record Review

- **New: PCP planning process; Referral for Treatment for Trauma, if needed (child only)**
- **Documentation Needed:**
  - ❖ Signed release of information
  - ❖ Person-Centered Plan
  - ❖ Progress Notes
  - ❖ Individual's record
  - ❖ Evidence of completed assessment



# Community Mental Health Services Block Grant - First Episode Psychosis Program Tool

*Only Applies to Alliance Behavioral Healthcare and Trillium Health Resources*

- **New Area of Review**
- **Documentation Needed:**
  - ❖ **Contracts with providers**
  - ❖ **Intake and screening information**
  - ❖ **Evidence of a contract between LME-MCO and provider for services rendered**
  - ❖ **Flyers and brochures**
  - ❖ **Policy and Procedure**
  - ❖ **Meeting minutes**
  - ❖ **Staff qualifications**
  - ❖ **Documentation to reveal if the crisis service is in-house or contracted**
  - ❖ **Documentation that the LME-MCO ensures services are provided to specific target population.**



# Community Mental Health Services Block Grant - First Episode Psychosis Record Review

*Only Applies to Alliance Behavioral Healthcare and Trillium Health Resources*

- **New Area of Review: Qualifications for Receiving Service, Referral to Alternative Services**
- **Documentation Needed:**
  - ❖ **Individual's record**
    - History
    - Assessment
    - Notes
    - Diagnoses
    - Intake
    - Screenings
    - Referrals
    - Discharge/Disposition



# System of Care Expansion Grant - High Fidelity Wraparound

- Four year grant with primary purpose of piloting Wraparound with youth/families with complex needs.
- Five pilot sites in three LME-MCO catchment areas: Cardinal, Eastpointe, and Vaya
- Intensive care coordination with 1:10 team to family ratio
- Includes family and youth support within the Wraparound team



# System of Care Expansion Grant - High Fidelity Wraparound Program Monitoring

*System of Care-High Fidelity Wraparound (SOC-HFW) will only be reviewed at Cardinal Innovations Healthcare Solutions, Eastpointe and Vaya Health.*

- **New Monitoring Tool: Sustainability Wraparound Activities**
- **Documentation Needed:**
  - ❖ Evidence of monthly Sustainability Meetings occurring
  - ❖ Evidence of participation by Family Partner Coordinator (FPC) in support of HFW team
    - FPC Quarterly Reports and other supporting documentation



# System of Care Expansion Grant - High Fidelity Wraparound Record Review

*System of Care-High Fidelity Wraparound (SOC-HFW) will only be reviewed at Cardinal Innovations Healthcare Solutions, Eastpointe and Vaya Health.*

- **Documentation Needed:**

- ❖ **Recipient's Record**

- **Strength, Needs, and Culture Discovery (SNCD) Assessment completed with the child/family.**
    - **Completed Person-Centered Plan**
    - **Progress Notes**



# SAPTBG Review

- **Conducted to ensure compliance with 45 CFR Part 96, Subpart I, SAPTBG**
- **Review includes both program and record review for:**
  - ❖ **Substance Abuse Prevention**
  - ❖ **SAPTBG IV Drug**
  - ❖ **SAPTBG Women's Set-Aside Fund**
  - ❖ **SAPTBG CASAWORKS for Families Residential Initiative**
  - ❖ **SAPTBG Work First / Child Protective Services Substance Use Initiative**
  - ❖ **JJSAMHP**





# JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP)

- Local teams across work together to deliver effective, family-centered services and supports for youth involved with the juvenile justice system who have issues with substance use, mental health challenges or both.
- Teams consists of 3 groups: LME-MCO representatives, Juvenile Court Counselor Chiefs and local providers.
- Teams use a person-centered approach incorporating system of care principles.
- Currently there are 20 teams across the state.
- The Partnership's work centers around 5 domains:
  - Screening/Referral
  - Assessment
  - Engagement
  - Evidence-Based Treatment
  - Recovery-Oriented Systems of Care (Beyond Treatment)



# **JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP)**

- **This fiscal year teams have developed a two-year Plan of Work (POW) and begun working to implement strategies to achieve goals as prioritized on their plans.**
- **In line with these plans, the audit this year had added a Program Monitoring component to the standard Record Review.**
- **Some of the items required as part of the team's POW will be reviewed in both the Program and Record Review process.**
- **This is the first year these items have been looked at by the monitoring team; therefore, the focus will be on collecting baseline data for future comparison.**
- **It is expected that some teams may not meet expectations in all of these new areas this first year so the baseline data will provide valuable information for the process next year and in the years to follow.**



# JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP) PROGRAM MONITORING

## *What to Expect*

- New program monitoring tool (to establish baseline)
- Part of review will focus on the partnership's Plan of Work.
- Each partnership in the LME-MCO catchment area will be monitored.



# JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP) PROGRAM MONITORING

- **Documentation Needed:**
  - ❖ **Plan of Work**
    - ❖ **Required Signatures**
    - ❖ **JJSAMHP - 5 Domains**
      - **Screening/Referral**
      - **Assessment**
      - **Engagement**
      - **Evidence-based Treatment**
      - **Beyond Treatment/Recovery Oriented Systems of Care**
  - ❖ **Signed Memoranda of Agreement between local team members**
  - ❖ **Juvenile Justice's invitation to participate in the LME-MCO's Gaps and Needs Analysis reporting**
  - ❖ **JJSAMHP Gaps and Needs identified in the LME-MCO's report**
  - ❖ **Activities conducted by the Partnership for the fiscal year**
  - ❖ **Evidence of a contract between LME-MCO and provider for services rendered**
  - ❖ **Provider informed of the Block Grant requirements**



# JUVENILE JUSTICE SUBSTANCE ABUSE MENTAL HEALTH PARTNERSHIP (JJSAMHP) RECORD REVIEW

- **New items: Assessment, Service Planning, 5 Domains**
- **Documentation Needed:**
  - ❖ **Approved evidence-based assessment (EBA) tool**
    - Global Appraisal of Individual Needs (GAIN)
    - Global Appraisal of Individual Needs Lite (GAIN Lite)
    - Child Behavior Checklist (CBCL)
    - Comprehensive Health Assessment Tool (CHAT)
  - ❖ **Evidence of completion of NC-TOPPS within required timeframes**
  - ❖ **Signed authorization to release information to juvenile court and the JJSAMHP**
  - ❖ **Participation in the initial Child and Family Team Meeting**
  - ❖ **Child and family participation in the service planning process**
  - ❖ **Activities within the JJSAMHP 5 Domains included in individual's service record**



# Rationale for Changes to Substance Abuse Prevention Monitoring

- Previous SAMHSA Block Grant Review called for changes:
  - Inaccurate, inconsistent, or underreporting across CSAP 6 strategies
  - Funds not aligned with priority prevention problems, consequences and target populations
  - 2% of population being served, primarily in individual strategies for selected and indicated populations which compromises ability to achieve population level outcomes
- Expectations for prevention have increased in both complexity and scope
  - Call to work with other disciplines
  - Call for population level impact
  - Call for prevention as a core component of health
- Advancements in prevention science support a comprehensive prevention approach as the best way to prevent substance use.



## Outreach and Input for Revisions

- After last year's audit, the Division hosted meetings with LME-MCOs to discuss what worked and what was problematic about the new audit process. We also received feedback from prevention providers.
- The Division formed a workgroup of LME-MCO staff and representatives from prevention providers to review the tool and make recommendations for changes.
- Most of the changes for this year reflect the recommendations from this workgroup and feedback by the Division.



# Substance Abuse Prevention

- During the last fiscal year ('15-'16) , substantial changes were made to the Substance Abuse Prevention program and record reviews.
- Building on that work, and with the goal of Continuous Quality Improvement (CQI), we have made a few changes for this fiscal year ('16-'17).
- This review will focus on verifying information submitted on the 2016-2017 Semi-Annual Block Grant Compliance Report.

***\*Documentation to be reviewed is for activities that occurred from July 1 through December 31, 2016. \****

- For services reviewed, required training must have occurred before or during service delivery time period for this review.





# Substance Abuse Prevention

## CSAP Six Strategies

Core Strategies (Must be implemented)	Optional Strategies (Can only be implemented with a Core Strategy)
Education	Information Dissemination
Community Based Process	Alternatives
Environmental Strategies	Problem ID and Referral

**Example: Pam is part of the Healthy Carolinians Task Force and provides brochures and pamphlets to the group on Smoking Cessation. (Community Based Process and Information Dissemination)**



# Substance Abuse Prevention

## *Environmental Strategies*

- **What's New**
- **This item will be scored**
- **Deleted the phases**
- **Example Item:**

*There is documentation that the problem priority is based on the information collected.*
- **Documentation Needed:**
  - ❖ meeting notes, formal/informal reports, surveys, etc.



# Substance Abuse Prevention

## *Educational Strategies*

### Documentation Needed:

Review the documented evidence of the educational strategies used for skill building through structured learning processes to increase the individuals' understanding of the severity of alcohol and drug usage/abuse.

- **Note:** A modified service record (Selective and Indicated) or attendance sheet (Universal) will need to be reviewed to determine the information below.



# Substance Abuse Prevention

## *Community-Based Process*

- **Documentation Needed:**

Examples of activities and strategies include **one or more** of the following activities that occurred between July 1, 2016 - December 31, 2016.

There is evidence of organizing and planning of service implementation.  
Documentation with the:

- ❖ Date of service
- ❖ Minutes from meetings
- ❖ Attendance sheet

There is evidence of multi-agency collaboration, networking or coalition building. Documentation with the:

- ❖ Date of service
- ❖ Minutes from meetings
- ❖ Attendance sheet



# Substance Abuse Prevention

## *Problem Identification and Referral (Optional)*

There is documentation of inter-agency collaboration and coordination to refer consumers to additional services that may be needed and/or services not offered by the provider agency.

- **Documentation needed:**
  - ❖ Interagency agreements,
  - ❖ Referral form,
  - ❖ Referral process and notes of coordination.



# Substance Abuse Prevention

## *Alternatives (Optional)*

**Youth/adult leadership activities were planned and delivered.**

- **Documentation needed:**
  - ❖ planning notes
  - ❖ promotional materials



# Substance Abuse Prevention

## *Information Dissemination (Optional)*

Health fairs/other health promotion were attended; materials were disseminated at conferences, meetings, seminars, etc.

- **Documentation needed:**

- ❖ Copy of the email/letter that requests participation, one that shows confirmation/acceptance of the request, one from the requestor expressing gratitude for participation
- ❖ Pictures with the date of service



# Substance Abuse Prevention

## *What's New*

- **Deleted:** There is evidence of that a needs assessment has been completed by the LME-MCO and the provider.

## *Pre-site Visit Preparation*

- DMH/DD/SAS Audit Team will verify non-profit status (Secretary of State only) of provider prior to the on-site review.





# Substance Abuse Prevention Record Review

- No major changes to the record review or tool
- Documentation Needed\*:
  - ❖ Sample Risk Profile/Assessment
  - ❖ Sample Grid
  - ❖ Sample Plan

\* Revised Substance Abuse Prevention documentation is located in Appendix D of the Records Management and Documentation Manual (RM&DM) Appendices [APSM 45-2].



# Substance Abuse Prevention

## *SAMPLE*

From the Semi-Annual Compliance Report, a list of the Selective and Indicated curricula being reviewed along with the start and end dates is sent to the LME-MCO for each curriculum requested.

The LME-MCO should bring to the review all records associated with the curricula and start/end dates as indicated above. For Providers using Project Alert, which has booster sessions, the timeframe is from 7/1/15 - 12/31/16.



# SAPTBG IV Program Tool

- One revision to the drug-free workplace question. It now reads: This agency has implemented strategies to promote a drug-free workplace according to their policy.
- Documentation Needed:
  - ❖ Evidence of an outreach program for people who use IV drugs
  - ❖ Evidence of priority admission for people who use IV drugs
  - ❖ Evidence of strategies implemented to promote a drug-free workplace, according to policy
  - ❖ Evidence of a contract between LME-MCO and provider for services rendered
  - ❖ Evidence provider was informed of the Block Grant requirements



# SAPTBG IV Record Review

- No major changes
- Documentation Needed:
  - ❖ Evidence of eligibility
  - ❖ Evidence of TB Screening
  - ❖ Evidence of referral, if TB symptoms were present
  - ❖ Evidence to support ASAM level of care
  - ❖ Signed authorization to release information with all the required elements
  - ❖ Evidence of timely admission or appropriate referral
  - ❖ Evidence of completion of NC-TOPPS within required timeframes
  - ❖ Evidence of a contract between LME-MCO and provider for services rendered
  - ❖ Evidence provider was informed of the Block Grant requirements



# SAPTBG Women's Set-Aside Program Tool

- No major changes
- Documentation Needed:
  - ❖ Written Program Description with all required elements
  - ❖ Evidence of priority admission to pregnant women who have substance use diagnosis
  - ❖ Evidence of a contract between LME-MCO and provider for services rendered
  - ❖ Evidence provider was informed of the Block Grant requirements



# SAPTBG Women's Set-Aside Record Review

- No major changes
- Documentation needed:
  - ❖ Evidence of eligibility
  - ❖ Needs were addressed, as required
  - ❖ Evidence to support ASAM level of care
  - ❖ Evidence of timely admission for pregnant women
  - ❖ Evidence of completion of NC-TOPPS within required timeframes



# **CASAWORKS™ for Families Residential Initiative Program Tool**

- **No major changes on this tool**
- **Documentation needed for review:**
  - ❖ **Evidence of signed/current MOA between provider and county DSS**
  - ❖ **Evidence of Advisory Group meetings**
  - ❖ **Evidence of a contract between LME-MCO and provider for services rendered**
  - ❖ **Evidence the provider was informed of Block Grant requirements**



# **CASAWORKS™ for Families Residential Initiative Record Review Tool**

- **No major changes to tool**
- **Documentation needed:**
  - ❖ **Evidence of eligibility**
  - ❖ **Evidence to support ASAM level of care**
  - ❖ **Evidence of current Person-Centered Plan (PCP) or Employment Self-Sufficiency Plan (ESSP)**
  - ❖ **Signed Authorization to Release Information with all required elements**
  - ❖ **Evidence of completion of NC-TOPPS within required timeframes**





# **SAPTBG Work First / Child Protective Services Substance Use Initiative Program Tool**

- **No major changes**
- **Documentation needed:**
  - ❖ **Signed MOA between LME-MCO/provider and each county DSS**
  - ❖ **Evidence MOA has been reviewed in the past 12 months**
  - ❖ **Evidence of compliance with required elements**



# **SAPTBG Work First / Child Protective Services Substance Use Initiative Record Review Tool**

- **No major changes**
- **Documentation needed:**
  - ❖ **Signed authorization to release information that includes all required elements**
  - ❖ **SUDDS or pre-approved alternate assessment for Referrals**
  - ❖ **Evidence of participant's disposition after meeting with QPSA, (i.e., communication with DSS)**
  - ❖ **Evidence of a contract between LME-MCO and provider for services rendered**
  - ❖ **Evidence provider was informed of the Block Grant requirements**



# SAMPLE

- **UCR**

- ❖ Sample is pulled from NCTracks
- ❖ From the sample pulled, 10 records are chosen
- ❖ The sample will be forwarded to the LME-MCO 10 calendar days prior to the scheduled review

- **Non-UCR (JJSAMHP, Work First, CASAWORKS, First Episode Psychosis, SOC Expansion-High Fidelity Wraparound)**

- ❖ A request has been sent to the LME-MCOs for a list of providers and individuals in the programs above during the fiscal year.
- ❖ Submission of requested information due by March 10, 2017
- ❖ Ten records will be randomly chosen from the list
- ❖ Ten calendar days prior to the review, the sample will be sent to the LME-MCO

