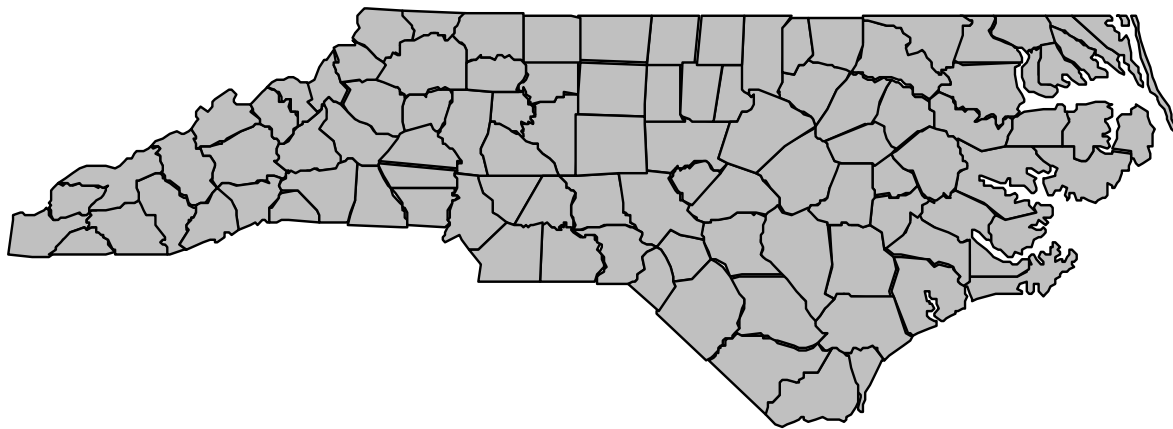


**North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities,  
and Substance Abuse Services**

**SFY 2015 Performance Contract  
With Local Management Entities - Managed Care Organizations  
Report/Data Submission Requirements**

**Third Quarter Report  
January 1, 2015 - March 31, 2015**



Prepared by

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

May 2015



## Introduction

This is the **Third Quarter Report** for SFY 2014-2015 under the Performance Contract between the LME-MCOs and NC DHHS.

This report tracks LME-MCO performance (timeliness, completeness, accuracy) in submitting required data/reports to the Division of MH/DD/SAS. Some requirements are quarterly while others are semi-annual or annual requirements. For reasons of economy, only those requirements with a report due in the current quarter are included in this report.

The tables on the following pages list the report schedule, provide the performance requirements, and show LME-MCO performance for the current quarter. Data submission/report requirements that have been met are depicted with a star (★) in the standard met column for each report. If the requirement was not met, this column will be blank, and the element that caused the standard not to be met will be shaded red.

Overall, the LME-MCOs met 98 percent of the five report submission requirements and 85 percent of the nine data submission/report requirements measured this quarter. Items that are marked "N/A" on the Summary of Performance matrix indicate reports or data submission requirements that do not apply to a specific LME-MCO.

### **Questions or Concerns**

If staff of an LME-MCO have questions about any of the individual requirements or believe that information contained in this report is in error, they should contact their LME-MCO liaison within 30 days of the report date. The LME-MCO liaison will assist in getting answers to questions and/or having errors corrected. The Division will publish a revised report at the time of the next quarterly report if corrections are necessary due to Division errors.

SFY 2015 Performance Contract  
 Report/Data Submission Requirements  
 Third Quarter Report  
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## SFY 2015 Performance Contract Report Schedule

The table below shows which requirements will be reported by quarter\*

Requirement	1st Qtr Nov 30	2nd Qtr Feb 28	3rd Qtr May 30	4th Qtr Aug 30
1. Monthly Financial Reports	X	X	X	X
2. Substance Abuse/Juvenile Justice Initiative Quarterly Report	X	X	X	X
3. Work First Initiative Quarterly Reports	X	X	X	X
4. Traumatic Brain Injury (TBI) Services Quarterly Report	X	X	X	X
5. Projects For Assistance In Transitions From Homelessness (PATH) Report	X	X	X	X
6. Quarterly Complaints Report	X	X	X	X
7. Client Data Warehouse (CDW) - Screening Record	X	X	X	X
8. Client Data Warehouse (CDW) - Admissions	X	X	X	X
9. Client Data Warehouse (CDW) - ICD-9 Diagnosis	X	X	X	X
10. Client Data Warehouse (CDW) - Unknown Data (Admissions)	X	X	X	X
11. Client Data Warehouse (CDW) - Unknown Data (Discharges)	X	X	X	X
12. Client Data Warehouse (CDW) - Identifying and Demographic Records	X	X	X	X
13. Client Data Warehouse (CDW) - Drug of Choice	X	X	X	X
14. Client Data Warehouse (CDW) - Episode Completion Record (SA Clients)	X	X	X	X
15. NC Treatment Outcomes and Program Performance System (Initial)	<b>Report under revision</b>			
16. NC Treatment Outcomes and Program Performance System (Update)	X	X	X	X
17. NC Support Needs Assessment Profile (NC-SNAP)	X	X	X	X
18. System of Care Report		X		X
19. SAPTBG Compliance Report		X		X
20. National Core Indicators (NCI) Consents, Pre-Surveys, and Mail Surveys				X

\*The dates listed for the quarterly reports are the scheduled dates for the Division to publish the Performance Contract Report. For this to happen, LME-MCO required reports are due to the Division's Report Contact/Requirement Sponsor by the due date indicated on the report (typically the end of the month prior to publishing), and the Report Contact/Requirement Sponsor's reports are due to the Division's Quality Management Team by the 15th of the month indicated above.

**SFY 2015 Performance Contract Report/Data Submission Requirements Summary Of Performance  
Third Quarter Report  
January 1, 2015 - March 31, 2015**

LME-MCO	Report Submission Measures								Data Submission Measures															
	Number of Report Submission Measures Met	Total Number of Report Submission Measures *	Percent of Report Submission Measures Met	1. Monthly Financial Report	2. SAJJ Initiative Quarterly Report	3. Work First Initiative Quarterly Report	4. TBI Services Quarterly Report	5. Quarterly Complaints Report	Number of Data Submission Measures Met	Total Number of Data Submission Measures	Percent of Data Submission Measures Met	6. CDW - Screening Record	8. CDW - ICD-9 Diagnosis	9. CDW - Unknown Data (Admissions)	10. CDW - Unknown Data (Discharges)	11. CDW - Identifying and Demographic Records	12. CDW - Drug of Choice	13. CDW - Episode Completion Records (SA Clients)	14. NC TOPPS - Initial	15. NC TOPPS - Update	16. NC-SNAP			
Alliance Behavioral Healthcare	5	5	100%	★	★	★	★	★	6	9	67%		★	★	★	★	★				★			
Cardinal Innovations Healthcare Solutions	5	5	100%	★	★	★	★	★	7	8	88%	★	★	★	★	★	★	★			N/A			
CenterPoint Human Services	5	5	100%	★	★	★	★	★	9	9	100%	★	★	★	★	★	★	★		★	★			
Coastal Care	5	5	100%	★	★	★	★	★	9	9	100%	★	★	★	★	★	★	★		★	★			
East Carolina Behavioral Health	5	5	100%	★	★	★	★	★	4	9	44%		★	★						★	★			
Eastpointe	5	5	100%	★	★	★	★	★	9	9	100%	★	★	★	★	★	★	★		★	★			
Partners Behavioral Health Management	5	5	100%	★	★	★	★	★	8	9	89%	★	★	★	★	★	★			★	★			
Sandhills Center	5	5	100%	★	★	★	★	★	8	9	89%	★	★	★	★	★	★			★	★			
Smoky Mountain Center	4	5	80%	★	★	★	★		8	9	89%	★	★	★	★	★				★	★			
<b>STATEWIDE - Number</b>			<b>98%</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>9</b>	<b>8</b>			<b>85%</b>	<b>7</b>	<b>9</b>	<b>9</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>4</b>	<b>0</b>	<b>7</b>	<b>8</b>			
<b>STATEWIDE - Percent</b>			<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>88.9%</b>			<b>77.8%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>88.9%</b>	<b>88.9%</b>	<b>88.9%</b>	<b>44.4%</b>	<b>0.0%</b>	<b>77.8%</b>	<b>100.0%</b>				

- \* This column shows the total number of **report submission** measures that apply this quarter. Some reports are due quarterly, two are due semi-annually, and one is due annually.
- ★ Indicates the LME-MCO met the performance standard for the measure.
- % Percents that are highlighted green indicate the LME-MCO met the performance standards for at least 65% of the measures in the respective category (e.g. report submission and/or data submission). Meeting the performance standards for at least 65% of the measures is one of the factors considered in LME-MCO monitoring decisions.
- N/A Indicates measures that were not applicable this quarter.

This measure is under revision and the results were not reported this quarter.

SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

**1. Monthly Financial Reports**

**Performance Requirement:** LME-MCO submits all required monthly financial reports in acceptable format, completeness, and accuracy by the 20th of the month (or next business day if the due date is a weekend or holiday) following the month covered by the report. For example, the

**SFY 2015 Standard:** Reports are accurate, complete, and received by the due date.

LME-MCO	DEC Report Due 1/20/15		JAN Report Due 2/20/15		FEB Report Due 3/20/15		Standard Met <sup>1</sup>
	Date Received <sup>2</sup>	Accurate, Complete	Date Received <sup>2</sup>	Accurate, Complete	Date Received <sup>2</sup>	Accurate, Complete	
Alliance Behavioral Healthcare	1/16/15	Yes	2/20/15	Yes	3/19/15	Yes	★
Cardinal Innovations Healthcare Solutions	1/20/15	Yes	2/18/15	Yes	3/20/15	Yes	★
CenterPoint Human Services	1/16/15	Yes	2/19/15	Yes	3/19/15	Yes	★
CoastalCare	1/20/15	Yes	2/20/15	Yes	3/11/15	Yes	★
East Carolina Behavioral Health	1/20/15	Yes	2/13/15	Yes	3/20/15	Yes	★
Eastpointe	1/20/15	Yes	2/19/15	Yes	3/12/15	Yes	★
Partners Behavioral Health Management	1/8/15	Yes	2/12/15	Yes	3/4/15	Yes	★
Sandhills Center	1/20/15	Yes	2/20/15	Yes	3/19/15	Yes	★
Smoky Mountain Center	1/20/15	Yes	2/20/15	Yes	3/20/15	Yes	★

Number and Percent of LME-MCOs that met the Performance Standard: 9 (100%)

**Notes:**

- ★ = Met the Performance Contract Standard.
- Red shading indicates reports that are not received by the due date or are not accurate and complete.

**2. Substance Abuse/Juvenile Justice Initiative Quarterly Reports**

Performance Requirement: LME-MCO submits a quarterly SA/Juvenile Justice Initiative Report by the 20th of the month following the end of the quarter (or next business day if the due date is a weekend or holiday).

SFY 2015 Standard: All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	3rd Qtr Report Due 4/20/15				Standard Met <sup>1</sup>
	Juvenile Detention		JJSAMH Partnership		
	Date Received <sup>2</sup>	Accurate And Complete	Date Received <sup>2</sup>	Accurate And Complete	
Alliance Behavioral Healthcare	4/10/15	Yes	4/10/15	Yes	★
Cardinal Innovations Healthcare Solutions	4/10/15	Yes	4/10/15	Yes	★
CenterPoint Human Services	4/8/15	Yes	4/8/15	Yes	★
CoastalCare	4/8/15	Yes	4/13/15	Yes	★
East Carolina Behavioral Health	4/13/15	Yes	4/13/15	Yes	★
Eastpointe	4/10/15	Yes	4/10/15	Yes	★
Partners Behavioral Health Management	4/17/15	Yes	4/17/15	Yes	★
Sandhills Center	4/8/15	Yes	4/10/15	Yes	★
Smoky Mountain Center	4/10/15	Yes	4/10/15	Yes	★

Number of Percent of LME-MCOs that Met the SFY2015 Standard:

9 (100%)

Notes:

- ★ = Met the Performance Contract Standard. N/A = Not Applicable this quarter.
- Reports that are not complete or that were received >10 days after the due date are shaded red.
- Reports with *Italicized* dates and yellow shading were received within 10 days after the due date.

SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

### 3. Work First Initiative Quarterly Reports

Performance Requirement: LME-MCO submits a quarterly Work First Initiative Report by the 20th of the month following the end of the quarter (or next business day if the due date is a weekend or holiday).

SFY 2015 Standard: All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	3rd Qtr Report Due 4/20/15		Standard Met <sup>1</sup>
	Date Received <sup>2</sup>	Accurate And Complete	
Alliance Behavioral Healthcare	4/21/2015	Yes	★
Cardinal Innovations Healthcare Solutions	4/20/2015	Yes	★
CenterPoint Human Services	4/14/2015	Yes	★
CoastalCare	4/13/2015	Yes	★
East Carolina Behavioral Health	4/20/2015	Yes	★
Eastpointe	4/6/2015	Yes	★
Partners Behavioral Health Management	4/20/2015	Yes	★
Sandhills Center	4/16/2015	Yes	★
Smoky Mountain Center	4/20/2015	Yes	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard: 9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.
2. Dates that are shaded red indicate reports received >10 days after the due date.  
Dates with yellow shading are within 10 days after the due date.



SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

**4. Quarterly Traumatic Brain Injury (TBI) Services Report**

Performance Requirement: LME-MCO submits all required Traumatic Brain Injury (TBI) Services reports in acceptable format by the following due dates (or next business day if the due date is a weekend or holiday):

- First quarter report = Dec 31.
- Second quarter report = Mar 31.
- Third quarter report = Jun 30.
- Fourth quarter report = Aug 31.

SFY 2015 Standard: Reports are accurate, complete, and received by the due date.

LME-MCO	2nd Qtr Report Due 3/31/15		
	Date Received <sup>2</sup>	Accurate, Complete	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	3/31/15	Yes	★
Cardinal Innovations Healthcare Solutions	3/26/15	Yes	★
CenterPoint Human Services	3/25/15	Yes	★
CoastalCare	3/12/15	Yes	★
East Carolina Behavioral Health	3/31/15	Yes	★
Eastpointe	3/23/15	Yes	★
Partners Behavioral Health Management	3/30/15	Yes	★
Sandhills Center	3/26/15	Yes	★
Smoky Mountain Center	3/31/15	Yes	★

Number and Percent of LME-MCOs that met the Performance Standard: 9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Red shading indicates reports that are not received by the due date or are not accurate and complete.

SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

## 5. Quarterly Complaints Report

Performance Requirement: LME-MCO submits all required Complaints reports in acceptable format by the following due dates (or next business day if the due date is a weekend or holiday):

- First quarter report = Nov 15.
- Second quarter report = Feb 15.
- Third quarter report = May 15.
- Fourth quarter report = Aug 15.

SFY 2015 Standard:

Reports are accurate, complete, and received by the due date.

LME-MCO	3rd Qtr Report Due 5/15/15		
	Date Received <sup>2</sup>	Accurate, Complete	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	5/8/15	Yes	★
Cardinal Innovations Healthcare Solutions	5/15/15	Yes	★
CenterPoint Human Services	5/11/15	Yes	★
CoastalCare	5/13/15	Yes	★
East Carolina Behavioral Health	5/15/15	Yes	★
Eastpointe	5/15/15	Yes	★
Partners Behavioral Health Management	5/15/15	Yes	★
Sandhills Center	5/6/15	Yes	★
Smoky Mountain Center	5/18/15	Yes	

Number and Percent of LME-MCOs that met the Performance Standard:

8 (88.9%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Red shading indicates reports that are received before the quarter has ended, not received by the due date, or are not accurate and complete.

SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

**6. Client Data Warehouse (CDW)  
 Screening Records**

**Performance Requirement:** LME-MCO submits required CDW record types by the 15th of each month. Consumers who are screened by the LME-MCO's Access Unit and determined to have a mh/dd/sa problem will have a completed cross-reference to the Common Name Data Service (CNDS) in CDW within 30 days of the initial contact.

The table below shows the percentage of consumers screened by the LME-MCO's Access Unit during the prior quarter (October 1, 2014 - December 31, 2014) with a cross-reference to the CNDS completed within 30 days of initial contact.

**SFY 2015 Standard:** 90% of consumers screened by the LME-MCO's Access Unit who are determined to have a mh/dd/sa problem have a completed cross-reference to the CNDS within 30 days of initial contact.

LME-MCO	Number Screened With A MH/DD/SA Problem	Number Missing CNDS Cross-reference	Number Completed within 30 days	Percent With Records Completed Within 30 Days <sup>2</sup>	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	8	2	6	75%	
Cardinal Innovations Healthcare Solutions	1,406	80	1,326	94%	★
CenterPoint Human Services	452	0	452	100%	★
CoastalCare	46	0	46	100%	★
East Carolina Behavioral Health	0		0	0%	
Eastpointe	4,277	5	4,272	100%	★
Partners Behavioral Health Management	6	0	6	100%	★
Sandhills Center	722	7	715	99%	★
Smoky Mountain Center	15	1	14	93%	★
<b>TOTAL</b>	<b>6,932</b>	<b>95</b>	<b>6,837</b>	<b>99%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2015 Performance Standard: 7 (77.8%)

**Notes:**

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

**7. Client Data Warehouse (CDW)  
 Admissions**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Submitted admission records (record type 11) are complete and accurate.

The table below shows the number of admissions for which data was submitted to the CDW as of April 30, 2015.

LME-MCO	Facility Code	JAN	FEB	MAR	Third Quarter Adm SFY2015	Third Quarter Adm SFY2014	Monthly Average SFY2015	Monthly Average SFY2014
Alliance Behavioral Healthcare	23141	889	698	890	<b>2,477</b>	1,747	826	582
CenterPoint Human Services	23021	409	326	329	<b>1,064</b>	1,296	355	432
CoastalCare	43141	331	281	321	<b>933</b>	905	311	302
East Carolina Behavioral Health	43071	1,098	902	1,149	<b>3,149</b>	3,873	1,050	1,291
Eastpointe	43081	342	269	327	<b>938</b>	78	313	26
Partners Behavioral Health Management	13114	669	562	588	<b>1,819</b>	1,618	606	539
Cardinal Innovations Healthcare Solutions	13121	1,008	709	441	<b>2,158</b>	2,423	719	808
Sandhills Center	33031	1,169	988	1,174	<b>3,331</b>	3,614	1,110	1,205
Smoky Mountain Center	13010	1,240	898	1,123	<b>3,261</b>	1,914	1,087	638
<b>TOTAL ADMISSIONS</b>		<b>7,155</b>	<b>5,633</b>	<b>6,342</b>	<b>19,130</b>	<b>17,468</b>	<b>6,377</b>	<b>5,823</b>

Data that are shaded are incomplete or appear to be inaccurate (e.g. <100 or <40% of the prior year's quarter total).

SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

**8. Client Data Warehouse (CDW)  
 Diagnosis Records**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Open clients who are enrolled in a target population and receive a billable service will have a completed diagnosis in CDW within 30 days of the beginning date of service (1 quarter lag time is allowed for submission). A missing diagnosis is defined as DHHS not being able to secure a diagnosis from a service claim (NCTRACKS or Medicaid) or a Record Type 13.

The table below shows the percentage of clients admitted during the prior quarter (October 1, 2014 - December 31, 2014) with a diagnosis completed within 30 days of beginning date of service.

SFY 2015 Standard: 90% of open clients who are enrolled in a target population and receive a billable service have a diagnosis in CDW within 30 days of beginning service.

LME-MCO	Number of Admissions	Number Missing Diagnosis	Number Completed within 30 days	Percent With Records Completed Within 30 Days <sup>2</sup>	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	2,690	125	2,565	95%	★
Cardinal Innovations Healthcare Solutions	2,796	1	2,795	100%	★
CenterPoint Human Services	1,280	1	1,279	100%	★
CoastalCare	1,036	2	1,034	100%	★
East Carolina Behavioral Health	1,042	47	995	95%	★
Eastpointe	3,675	14	3,661	100%	★
Partners Behavioral Health Management	1,928	38	1,890	98%	★
Sandhills Center	3,072	316	2,756	90%	★
Smoky Mountain Center	3,014	154	2,860	95%	★
<b>TOTAL</b>	<b>20,533</b>	<b>698</b>	<b>19,835</b>	<b>97%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

SFY 2015 Performance Contract Data/Report Submission Requirements  
Third Quarter Report  
January 1, 2015 - March 31, 2015

## 9. Client Data Warehouse (CDW) 'Unknown' Value In Mandatory Fields (Admissions)

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Mandatory fields contain a value other than 'unknown'.

The table below shows the percentage of clients admitted during the prior quarter (October 1, 2014 - December 31, 2014) where all mandatory data fields contain a value other than 'unknown'.

SFY 2015 Standard: 90% of all mandatory data fields for the prior quarter contain a value other than 'unknown'.

LME-MCO	Admission Records	County	Race	Ethnicity	Gender	Marital Status	Employment	Education	Veteran Status	Family Income	Family Size	Arrests 30 Days	Attention Self Help	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	2,477	100%	98%	99%	100%	99%	99%	100%	97%	100%	100%	100%	100%	★
Cardinal Innovations Healthcare Solutions	1,064	100%	99%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
CenterPoint Human Services	933	100%	100%	100%	100%	99%	99%	100%	99%	100%	100%	100%	100%	★
CoastalCare	3,149	100%	100%	100%	100%	100%	98%	100%	99%	100%	100%	100%	100%	★
East Carolina Behavioral Health	938	100%	97%	94%	100%	97%	91%	100%	93%	100%	100%	100%	100%	★
Eastpointe	1,819	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
Partners Behavioral Health Management	2,158	99%	100%	100%	100%	100%	99%	100%	99%	100%	100%	100%	100%	★
Sandhills Center	3,331	100%	100%	100%	100%	100%	99%	100%	99%	100%	100%	100%	100%	★
Smoky Mountain Center	3,261	100%	99%	99%	100%	98%	91%	100%	98%	100%	100%	100%	100%	★
<b>TOTAL</b>	<b>19,130</b>	<b>100%</b>	<b>99%</b>	<b>99%</b>	<b>100%</b>	<b>99%</b>	<b>97%</b>	<b>100%</b>	<b>98%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

9 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

SFY 2015 Performance Contract Data/Report Submission Requirements  
 Third Quarter Report  
 January 1, 2015 - March 31, 2015

**10. Client Data Warehouse (CDW)  
 'Unknown' Value In Mandatory Fields (Discharges)**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Mandatory fields contain a value other than 'unknown'.

The table below shows the percentage of clients discharged during the prior quarter (October 1, 2014 - December 31, 2014) where all mandatory data fields contain a value other than 'unknown'.

SFY 2015 Standard: 90% of all mandatory data fields for the prior quarter contain a value other than 'unknown'.

LME-MCO	Discharge Records	Discharge Reason	Referral To	Living Arrangement	Employment Status	Arrests Prior 30 Days	Attention Self Help	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	84	100%	100%	100%	100%	100%	100%	★
Cardinal Innovations Healthcare Solutions	429	100%	100%	100%	100%	100%	100%	★
CenterPoint Human Services	110	100%	100%	100%	100%	100%	100%	★
CoastalCare	168	100%	100%	100%	100%	100%	100%	★
East Carolina Behavioral Health	0	0%	0%	0%	0%	0%	0%	
Eastpointe	28	100%	100%	100%	100%	100%	100%	★
Partners Behavioral Health Management	609	100%	100%	100%	100%	100%	100%	★
Sandhills Center	3,467	100%	100%	100%	100%	100%	100%	★
Smoky Mountain Center	2,701	100%	94%	100%	100%	100%	100%	★
<b>TOTAL</b>	<b>7,596</b>	<b>100%</b>	<b>98%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>★</b>

Number and Pct of LME-MCOs that met the SFY 2015 Standard:

8 (88.9%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

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**11. Client Data Warehouse (CDW)  
 Identifying and Demographic Records**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. Open clients who are enrolled in a target population and receive a billable service will have a completed identifying record (record type 10) and a completed demographic record (record type 11) in CDW within 30 days of the beginning date of service on the paid claims record.

The table below shows the percentage of clients admitted during the prior quarter (October 1, 2014 - December 31, 2014) with an identifying record and demographic record completed within 30 days of the beginning date of service.

SFY 2015 Standard: 90% of open clients who are enrolled in a target population and receive a billable service have completed identifying and demographic records within 30 days of the beginning date of service.

LME-MCO	Number of Claims <sup>3</sup>	Number Missing Records	Number Completed within 30 days	Percent With Records Completed Within 30 Days <sup>2</sup>	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	5,984	171	5,813	97%	★
Cardinal Innovations Healthcare Solutions	4,885	39	4,846	99%	★
CenterPoint Human Services	3,500	0	3,500	100%	★
CoastalCare	3,497	2	3,495	100%	★
East Carolina Behavioral Health	2,977	945	2,032	68%	
Eastpointe	3,177	18	3,159	99%	★
Partners Behavioral Health Management	5,246	46	5,200	99%	★
Sandhills Center	4,211	44	4,167	99%	★
Smoky Mountain Center	6,262	39	6,223	99%	★
<b>TOTAL</b>	<b>39,739</b>	<b>1,304</b>	<b>38,435</b>	<b>97%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2015 Standard: 8 (88.9%)

Notes:

- ★ = Met the Performance Contract Standard.
- Percentages less than 90% are shaded red.
- Only includes NCTRACKS claims.



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**12. Client Data Warehouse (CDW)  
 Drug Of Choice Data**

Performance Requirement: LME-MCO submits required CDW record types by the 15th of each month. A drug of choice record (record type 17) is completed within 60 days of the beginning date of service for clients enrolled in any of the following target populations: ASCDR, ASCJO, ASCS, ASDSS, ASTNC, CSTNC, ASTER, ASWOM, CSCS, CSMAJ, and CSSAD.

The table below shows the percentage of open clients in the designated target populations (October 1, 2014 - December 31, 2014) with a drug of choice record completed within 60 days of the beginning date of service.

SFY 2015 Standard: 90% of open clients in the designated target populations have a drug of choice record completed within 60 days.

LME-MCO	Number of Claims <sup>3</sup>	Number Missing Records	Number Completed within 60 days	Percent With Records Completed Within 60 Days <sup>2</sup>	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	1,298	43	1,255	97%	★
Cardinal Innovations Healthcare Solutions	642	49	593	92%	★
CenterPoint Human Services	793	3	790	100%	★
CoastalCare	901	5	896	99%	★
East Carolina Behavioral Health	831	373	458	55%	
Eastpointe	846	6	840	99%	★
Partners Behavioral Health Management	1,238	15	1,223	99%	★
Sandhills Center	642	49	593	92%	★
Smoky Mountain Center	1,496	16	1,480	99%	★
<b>TOTAL</b>	<b>8,687</b>	<b>559</b>	<b>8,128</b>	<b>94%</b>	<b>★</b>

Number and Pct of LME-MCOs that met the SFY 2015 Standard:

8 (88.9%)

Notes:

1. ★ = Met the Performance Contract Standard.
2. Percentages less than 90% are shaded red.
3. Only includes NCTRACKS claims.

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**13. Client Data Warehouse (CDW)  
 Episode Completion (Discharge) Record - Substance Abuse Clients**

**Performance Requirement:** LME-MCO submits required CDW record types by the 15th of each month. An episode completion (discharge) record (Record Type 12) is completed for all consumers (except for members of the AMSRE target population) who have had no billable service for at least 60 days. This report separately focuses on **SA clients** who are identified for reporting to TEDS (Treatment Episodes Data System).

The table below shows the percentage of SA clients admitted since October 1, 2006, when this measure began, who during the prior quarter (October 1, 2014 - December 31, 2014) have had a billable service, administrative activity, or if neither occurred for at least 60 days, have submitted an episode completion record.

**SFY 2015 Standard:** 90% of SA clients admitted since October 1, 2006, who are not in the AMSRE target population, have had a billable service, administrative activity, or if neither occurred for at least 60 days, have submitted an episode completion record.

LME-MCO	Number of Clients Admitted Since October 1, 2006, Not in the AMSRE Target Population	Number <u>without</u> Appropriate Activity or an Episode Completion Record <sup>3</sup>	Number <u>with</u> Appropriate Activity or an Episode Completion Record <sup>4</sup>	Percent <u>with</u> Appropriate Activity or an Episode Completion Record <sup>2</sup>	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	327	146	181	55%	
Cardinal Innovations Healthcare Solutions	407	8	399	98%	★
CenterPoint Human Services	203	4	199	98%	★
CoastalCare	290	1	289	100%	★
East Carolina Behavioral Health	242	192	50	21%	
Eastpointe	546	16	530	97%	★
Partners Behavioral Health Management	383	53	330	86%	
Sandhills Center	219	80	139	63%	
Smoky Mountain Center	570	86	484	85%	
<b>TOTAL</b>	<b>3,187</b>	<b>586</b>	<b>2,601</b>	<b>82%</b>	

Number and Pct of LME-MCOs that met the SFY 2015 Standard:

4 (44.4%)

**Notes:**

1. ★ = Met the Performance Contract Standard.
2. Percentages less than 90% are shaded red.
3. Number without a billable service or administrative activity for at least 60 days, and an Episode Completion Record was not submitted.
4. Number with a billable service, administrative activity, or if neither occurred for at least 60 Days, an Episode Completion Record was submitted.

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**15. NC Treatment Outcomes and Program Performance System (NC-TOPPS)  
 Update Assessments**

**Performance Requirement:** The LME-MCO, through providers, will collect outcomes information on its consumers following sampling methods and reporting schedules for the instrument being used. The instrument used will depend on the type of consumer. The NC-TOPPS is required for all MH/SA consumers ages six and older and shall be entered in the web-based system within 30 days of completion of the assessment as specified in the NC-TOPPS Implementation Guidelines. An update assessment must be completed within two weeks before or after the required update month (e.g. 3-months, 6-months, 12-months, 18-months, etc). All update assessments shall be complete and accurate. The DMH/DD/SAS shall annually sample consumers with initial assessments to determine the timeliness and accuracy of 3-month update assessments. The 3-month update assessments shall be administered between 76 and 104 days after the initial assessment. To ensure accuracy and completeness, data reported below are for two quarters ago (time-lagged two quarters).

SFY 2015 Standard: 90% of the expected update forms are received and are timely.

LME-MCO	Expected # of Update Instruments	Receipt		Timeliness		Standard Met <sup>1</sup>
		# of Update Assessments Received	% of Expected Assessments Received <sup>2</sup>	# of Update Assessments Received On-Time	% of Expected Assessments Received On-Time <sup>2</sup>	
Alliance Behavioral Healthcare	1,620	1,558	96.2%	1,455	89.8%	
Cardinal Innovations Healthcare Solutions	2,140	1,967	91.9%	1,853	86.6%	
CenterPoint Human Services	453	431	95.1%	422	93.2%	★
CoastalCare	896	896	100.0%	886	98.9%	★
East Carolina Behavioral Health	498	497	99.8%	491	98.6%	★
Eastpointe	1,444	1,444	100.0%	1,430	99.0%	★
Partners Behavioral Health Management	1,251	1,211	96.8%	1,127	90.1%	★
Sandhills Center	1,335	1,296	97.1%	1,248	93.5%	★
Smoky Mountain Center	1,635	1,604	98.1%	1,505	92.0%	★
<b>Totals</b>	<b>11,272</b>	<b>10,904</b>	<b>96.7%</b>	<b>10,417</b>	<b>92.4%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

7 (77.8%)

**Notes:**

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

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**16. NC Support Needs Assessment Profile (NC-SNAP)**

Performance Requirement: The LME-MCO, through providers, will submit to DMH/DD/SAS, by the 15th of each month (or next business day if the due date is a weekend or holiday), an electronically transmitted file (SQL or FTP) containing current assessment forms for all consumers receiving or requesting DD services.

SFY 2015 Standard: 90% of current assessments are no more than 15 months old.

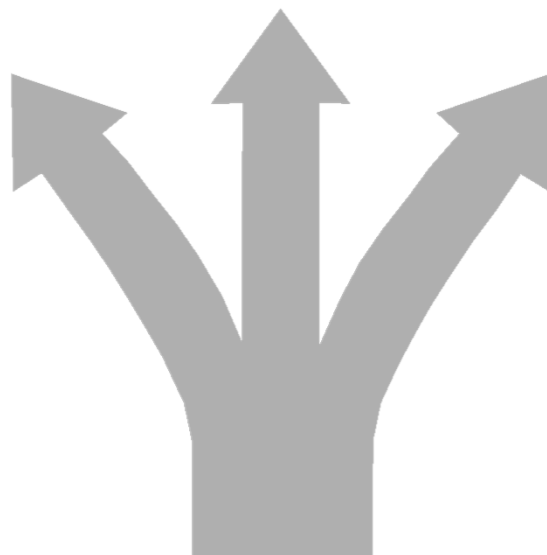
LME-MCO	Currency Of Assessments			Standard Met <sup>1</sup>
	# Received	# No More Than 15 Months Old	% No More Than 15 Months Old <sup>2</sup>	
Alliance Behavioral Healthcare	3,143	3,086	98.2%	★
Cardinal Innovations Healthcare Solutions	LME submits data through special waiver not the NC-SNAP			N/A
CenterPoint Human Services	1,168	1,168	100.0%	★
CoastalCare	1,426	1,426	100.0%	★
East Carolina Behavioral Health	1,609	1,567	97.4%	★
Eastpointe	2,272	2,272	100.0%	★
Partners Behavioral Health Management	2,027	2,004	98.9%	★
Sandhills Center	2,203	2,198	99.8%	★
Smoky Mountain Center	2,068	2,066	99.9%	★
Totals	15,916	15,787	99.2%	★

Number and Percent of LME-MCOs that met the SFY 2015 Standard:

8 (100%)

Notes:

- ★ = Met the Performance Contract Standard. N/A = Not Applicable this quarter.
- Percentages less than 90% are shaded red.



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