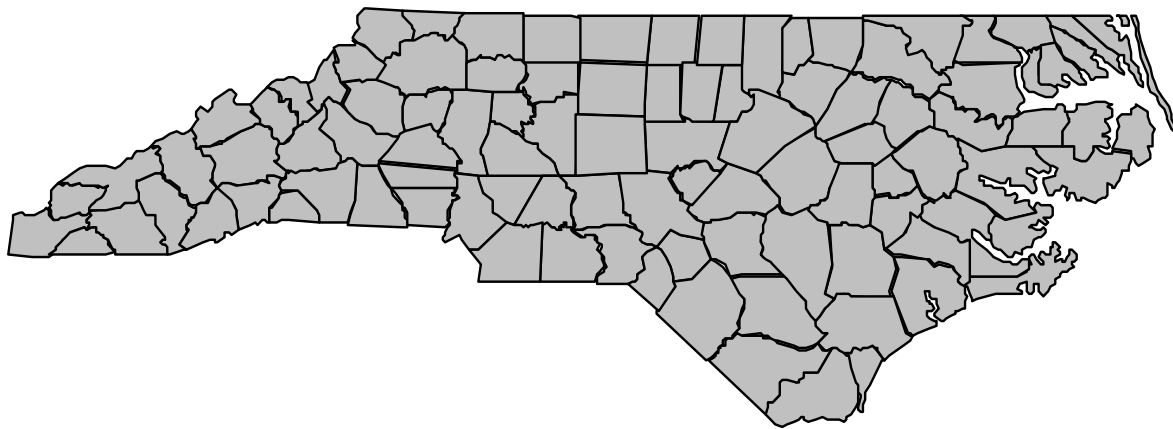


**North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities,  
and Substance Abuse Services**

**SFY 2016 Performance Contract  
With Local Management Entities - Managed Care Organizations  
Report/Data Submission Requirements**

**Second Quarter Report  
October 1, 2015 - December 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

February 2016



## Introduction

This is the **Second Quarter Report** for SFY 2015-2016 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 100 percent of the seven report submission requirements and 91 percent of the ten 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 2016 Performance Contract  
 Report/Data Submission Requirements  
 Second Quarter Report

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## SFY 2016 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
8. Client Data Warehouse (CDW) - Admissions	X	X	X	X
9. Client Data Warehouse (CDW) - Diagnosis Record	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 (3-Month Update)	X	X	X	X
16. NC Treatment Outcomes and Program Performance System (6-Month Update)	X	X	X	X
16. NC Treatment Outcomes and Program Performance System (12-Month 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 2016 Performance Contract Report/Data Submission Requirements Summary Of Performance**  
**Second Quarter Report**  
**October 1, 2015 - December 31, 2015**

**Report Submission Measures**

**Data Submission Measures**

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	18. System of Care Quarterly Report	19. SAPTBG Compliance Semi-Annual Report	Number of Data Submission Measures Met	Total Number of Data Submission Measures	Percent of Data Submission Measures Met	7. CDW - Diagnosis Record	8. CDW - Unknown Data (Admissions)	9. CDW - Unknown Data (Discharges)	10. CDW - Identifying and Demographic Records	11. CDW - Drug of Choice	12. CDW - Episode Completion Records (SA Clients)	14. NC TOPPS - 3 Month Update	15. NC TOPPS - 6 Month Update	16. NC TOPPS - 12 Month Update	17. NC-SMAP
Alliance Behavioral Healthcare	7	7	100%	★	★	★	★	★	★	★	7	10	70%	★	★	★	★	★				★	★
Cardinal Innovations Healthcare Solutions	7	7	100%	★	★	★	★	★	★	★	7	9	78%	★	★	★	★	★				★	N/A
CenterPoint Human Services	7	7	100%	★	★	★	★	★	★	★	10	10	100%	★	★	★	★	★	★	★	★	★	★
Eastpointe	7	7	100%	★	★	★	★	★	★	★	10	10	100%	★	★	★	★	★	★	★	★	★	★
Partners Behavioral Health Management	7	7	100%	★	★	★	★	★	★	★	10	10	100%	★	★	★	★	★	★	★	★	★	★
Sandhills Center	7	7	100%	★	★	★	★	★	★	★	9	10	90%	★	★	★	★	★			★	★	★
Smoky Mountain Center	7	7	100%	★	★	★	★	★	★	★	9	10	90%	★	★	★	★		★	★	★	★	★
Trillium Health Resources	7	7	100%	★	★	★	★	★	★	★	10	10	100%	★	★	★	★	★	★	★	★	★	★
<b>STATEWIDE - Number</b>			<b>100%</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>			<b>91%</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>6</b>	<b>5</b>	<b>6</b>	<b>8</b>	<b>7</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>100.0%</b>	<b>100.0%</b>				<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>75.0%</b>	<b>62.5%</b>	<b>75.0%</b>	<b>100.0%</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.

SFY 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 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 2016 Standard:** Reports are accurate, complete, and received by the due date.

LME-MCO	SEP Report Due 10/20/15		OCT Report Due 11/20/15		NOV Report Due 12/21/15		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	10/20/15	Yes	11/20/15	Yes	12/18/15	Yes	★
Cardinal Innovations Healthcare Solutions	10/20/15	Yes	11/20/15	Yes	12/18/15	Yes	★
CenterPoint Human Services	10/20/15	Yes	11/19/15	Yes	12/18/15	Yes	★
Eastpointe	10/20/15	Yes	11/20/15	Yes	12/18/15	Yes	★
Partners Behavioral Health Management	10/14/15	Yes	11/10/15	Yes	12/9/15	Yes	★
Sandhills Center	10/19/15	Yes	11/19/15	Yes	12/9/15	Yes	★
Smoky Mountain Center	10/20/15	Yes	11/20/15	Yes	12/18/15	Yes	★
Trillium Health Resources	10/20/15	Yes	11/20/15	Yes	12/18/15	Yes	★

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

8 (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 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 31, 2015

**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 2016 Standard: All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	2nd Qtr Report Due 1/20/16				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	1/8/16	Yes	1/8/16	Yes	★
Cardinal Innovations Healthcare Solutions	1/19/16	Yes	1/20/16	Yes	★
CenterPoint Human Services			1/20/16	Yes	★
Eastpointe			1/5/16	Yes	★
Partners Behavioral Health Management			1/11/16	Yes	★
Sandhills Center	1/4/16	Yes	1/13/16	Yes	★
Smoky Mountain Center	1/7/16	Yes	1/7/16	Yes	★
Trillium Health Resources	1/7/16	Yes	1/13/16	Yes	★

Number of Percent of LME-MCOs that Met the SFY2016 Standard:

8 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.      **N/A** = Not Applicable this quarter.
2. Reports that are not complete or that were received >10 days after the due date are shaded red.
3. Reports with ***Italicized*** dates and yellow shading were received within 10 days after the due date.
4. Reports that are shaded gray do not have a program and do not have a reporting requirement.

SFY 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 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 2016 Standard: All reports are accurate and complete and are received no later than 10 days after the due date.

LME-MCO	2nd Qtr Report Due 1/20/16		Standard Met <sup>1</sup>
	Date Received <sup>2</sup>	Accurate And Complete	
Alliance Behavioral Healthcare	1/15/2016	Yes	★
Cardinal Innovations Healthcare Solutions	1/20/2016	Yes	★
CenterPoint Human Services	1/13/2016	Yes	★
Eastpointe	1/13/2016	Yes	★
Partners Behavioral Health Management	1/20/2016	Yes	★
Sandhills Center	1/14/2016	Yes	★
Smoky Mountain Center	1/20/2016	Yes	★
Trillium Health Resources	1/20/2016	Yes	★

Number and Percent of LME-MCOs that met the SFY 2016 Standard: 8 (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 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 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 2016 Standard:** Reports are accurate, complete, and received by the due date.

LME-MCO	1st Qtr Report Due 12/31/15		
	Date Received <sup>2</sup>	Accurate, Complete	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	12/30/15	Yes	★
Cardinal Innovations Healthcare Solutions	12/30/15	Yes	★
CenterPoint Human Services	12/29/15	Yes	★
Eastpointe	12/21/15	Yes	★
Partners Behavioral Health Management	12/22/15	Yes	★
Sandhills Center	12/17/15	Yes	★
Smoky Mountain Center	12/30/15	Yes	★
Trillium Health Resources	12/22/15	Yes	★

Number and Percent of LME-MCOs that met the Performance Standard: 8 (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 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 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 2016 Standard: Reports are accurate, complete, and received by the due date.

LME-MCO	2nd Qtr Report Due 2/15/16		
	Date Received <sup>2</sup>	Accurate, Complete	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	2/11/16	Yes	★
Cardinal Innovations Healthcare Solutions	2/12/16	Yes	★
CenterPoint Human Services	2/11/16	Yes	★
Eastpointe	2/5/16	Yes	★
Partners Behavioral Health Management	2/15/16	Yes	★
Sandhills Center	1/27/16	Yes	★
Smoky Mountain Center	2/15/16	Yes	★
Trillium Health Resources	2/15/16	Yes	★

Number and Percent of LME-MCOs that met the Performance Standard: 8 (100%)

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 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 31, 2015

**6. 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 January 31, 2016.

LME-MCO	Facility Code	OCT	NOV	DEC	Second Quarter Adm SFY2016	Second Quarter Adm SFY2015	Monthly Average SFY2016	Monthly Average SFY2015
Alliance Behavioral Healthcare	23141	932	793	759	2,484	2,767	828	922
Cardinal Innovations Healthcare Solutions	13121	1,503	1,169	754	3,426	3,105	1,142	1,035
CenterPoint Human Services	23021	382	305	334	1,021	1,296	340	432
Eastpointe	43081	288	255	233	776	3,689	259	1,230
Partners Behavioral Health Management	13114	629	548	537	1,714	1,935	571	645
Sandhills Center	33031	1,090	871	796	2,757	3,508	919	1,169
Smoky Mountain Center	13010	1,126	1,038	1,031	3,195	2,925	1,065	975
Trillium Health Resources	43071	1,139	1,111	834	3,084	3,505	1,028	1,168
<b>TOTAL ADMISSIONS</b>		<b>7,089</b>	<b>6,090</b>	<b>5,278</b>	<b>18,457</b>	<b>22,730</b>	<b>6,152</b>	<b>7,577</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 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 31, 2015

**7. 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 (NCTRAKS or Medicaid) or a Record Type 13.

The table below shows the percentage of clients admitted during the prior quarter (July 1, 2015 - September 30, 2015) with a diagnosis completed within 30 days of beginning date of service.

SFY 2016 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	2,771	102	2,669	96%	★
Cardinal Innovations Healthcare Solutions	4,391	0	4,391	100%	★
CenterPoint Human Services	950	1	949	100%	★
Eastpointe	794	8	786	99%	★
Partners Behavioral Health Management	1,851	10	1,841	99%	★
Sandhills Center	3,345	19	3,326	99%	★
Smoky Mountain Center	3,279	27	3,252	99%	★
Trillium Health Resources	6,203	0	6,203	100%	★
<b>TOTAL</b>	<b>23,584</b>	<b>167</b>	<b>23,417</b>	<b>99%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2016 Standard: 8 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

SFY 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 31, 2015

**8. 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 (July 1, 2015 - September 30, 2015) where all mandatory data fields contain a value other than 'unknown'.

SFY 2016 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	Education	Employment	Veteran Status	Family Income	Family Size	Arrests 30 Days	Health Med Ins	Primary Language	Attention Self Help	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	2,771	100%	97%	97%	99%	98%	97%	100%	100%	100%	100%	100%	100%	98%	100%	★
Cardinal Innovations Healthcare Solutions	4,391	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
CenterPoint Human Services	950	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
Eastpointe	794	99%	100%	99%	100%	100%	97%	100%	100%	100%	100%	100%	100%	100%	100%	★
Partners Behavioral Health Management	1,851	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
Sandhills Center	3,345	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
Smoky Mountain Center	3,279	100%	100%	99%	100%	99%	95%	100%	100%	100%	100%	100%	100%	100%	100%	★
Trillium Health Resources	6,203	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	★
<b>TOTAL</b>	<b>23,584</b>	<b>100%</b>	<b>100%</b>	<b>99%</b>	<b>100%</b>	<b>100%</b>	<b>99%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</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 2016 Standard:

8 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.
2. Percentages less than 90% are shaded red.

SFY 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 31, 2015

**9. 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 (July 1, 2015 - September 30, 2015) where all mandatory data fields contain a value other than 'unknown'.

SFY 2016 Standard: 90% of all mandatory data fields for the prior quarter contain a value other than 'unknown'.

LME-MCO	Discharge Records	Discharge Reason	Employment Status	Arrests Prior 30 Days	Referral To	Living Arrangement	Attention Self Help	Standard Met <sup>1</sup>
Alliance Behavioral Healthcare	127	100%	98%	100%	100%	100%	100%	★
Cardinal Innovations Healthcare Solutions	2,332	100%	100%	100%	100%	100%	100%	★
CenterPoint Human Services	195	100%	99%	100%	100%	100%	100%	★
Eastpointe	9,135	100%	100%	100%	100%	100%	100%	★
Partners Behavioral Health Management	607	100%	100%	100%	100%	100%	100%	★
Sandhills Center	3,501	100%	100%	100%	100%	100%	100%	★
Smoky Mountain Center	732	100%	95%	100%	100%	100%	100%	★
Trillium Health Resources	1,942	100%	100%	100%	100%	100%	100%	★
<b>TOTAL</b>	<b>18,571</b>	<b>100%</b>	<b>100%</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 2016 Standard:

8 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.
2. Percentages less than 90% are shaded red.

SFY 2016 Performance Contract Data/Report Submission Requirements  
 Second Quarter Report  
 October 1, 2015 - December 31, 2015

**10. 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 (July 1, 2015 - September 30, 2015) with an identifying record and demographic record completed within 30 days of the beginning date of service.

SFY 2016 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	8,703	130	8,573	99%	★
Cardinal Innovations Healthcare Solutions	7,136	273	6,863	96%	★
CenterPoint Human Services	3,994	0	3,994	100%	★
Eastpointe	2,765	124	2,641	96%	★
Partners Behavioral Health Management	7,373	18	7,355	100%	★
Sandhills Center	6,753	43	6,710	99%	★
Smoky Mountain Center	8,736	30	8,706	100%	★
Trillium Health Resources	5,442	428	5,014	92%	★
<b>TOTAL</b>	<b>50,902</b>	<b>1,046</b>	<b>49,856</b>	<b>98%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

Notes:

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

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**11. 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 (July 1, 2015 - September 30, 2015) with a drug of choice record completed within 60 days of the beginning date of service.

SFY 2016 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	1,562	50	1,512	97%	★
Cardinal Innovations Healthcare Solutions	1,006	73	933	93%	★
CenterPoint Human Services	686	0	686	100%	★
Eastpointe	370	1	369	100%	★
Partners Behavioral Health Management	1,383	11	1,372	99%	★
Sandhills Center	882	1	881	100%	★
Smoky Mountain Center	1,391	9	1,382	99%	★
Trillium Health Resources	1,060	49	1,011	95%	★
<b>TOTAL</b>	<b>8,340</b>	<b>194</b>	<b>8,146</b>	<b>98%</b>	<b>★</b>

Number and Pct of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

Notes:

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



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**12. 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 (July 1, 2015 - September 30, 2015) have had a billable service, administrative activity, or if neither occurred for at least 60 days, have submitted an episode completion record.

**SFY 2016 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	426	98	328	77%	
Cardinal Innovations Healthcare Solutions	1,241	21	1,220	98%	★
CenterPoint Human Services	132	4	128	97%	★
Eastpointe	111	11	100	90%	★
Partners Behavioral Health Management	518	33	485	94%	★
Sandhills Center	344	9	335	97%	★
Smoky Mountain Center	559	157	402	72%	
Trillium Health Resources	1,414	38	1,376	97%	★
<b>TOTAL</b>	<b>4,745</b>	<b>371</b>	<b>4,374</b>	<b>92%</b>	<b>★</b>

Number and Pct of LME-MCOs that met the SFY 2016 Standard:

6 (75%)

**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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**14. NC Treatment Outcomes and Program Performance System (NC-TOPPS)  
 3 Month 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, the updates reported below were for initial assessments that occurred 6 months ago.

SFY 2016 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	1,652	1,529	92.6%	1,370	82.9%	
Cardinal Innovations Healthcare Solutions	2,060	1,881	91.3%	1,732	84.1%	
CenterPoint Human Services	507	485	95.7%	471	92.9%	★
Eastpointe	1,195	1,195	100.0%	1,176	98.4%	★
Partners Behavioral Health Management	1,224	1,166	95.3%	1,140	93.1%	★
Sandhills Center	1,242	1,177	94.8%	1,079	86.9%	
Smoky Mountain Center	1,464	1,434	98.0%	1,348	92.1%	★
Trillium Health Resources	1,452	1,442	99.3%	1,427	98.3%	★
<b>Totals</b>	<b>10,796</b>	<b>10,309</b>	<b>95.5%</b>	<b>9,743</b>	<b>90.2%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

5 (62.5%)

Notes:

1. ★ = Met the Performance Contract Standard.
2. Percentages less than 90% are shaded red.

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**15. NC Treatment Outcomes and Program Performance System (NC-TOPPS)  
 6 Month 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 6-month update assessments. The 6-month update assessments shall be administered between 166 and 194 days after the initial assessment. To ensure accuracy and completeness, the updates reported below are for initial assessments that occurred 9 months ago.

SFY 2016 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	1,905	1,758	92.3%	1,648	86.5%	
Cardinal Innovations Healthcare Solutions	2,027	1,876	92.6%	1,813	89.4%	
CenterPoint Human Services	513	502	97.9%	498	97.1%	★
Eastpointe	1,248	1,248	100.0%	1,245	99.8%	★
Partners Behavioral Health Management	1,160	1,144	98.6%	1,126	97.1%	★
Sandhills Center	1,198	1,149	95.9%	1,124	93.8%	★
Smoky Mountain Center	1,498	1,486	99.2%	1,455	97.1%	★
Trillium Health Resources	1,364	1,363	99.9%	1,358	99.6%	★
<b>Totals</b>	<b>10,913</b>	<b>10,526</b>	<b>96.5%</b>	<b>10,267</b>	<b>94.1%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

6 (75%)

Notes:

1. ★ = Met the Performance Contract Standard.
2. Percentages less than 90% are shaded red.

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**16. NC Treatment Outcomes and Program Performance System (NC-TOPPS)  
 12 Month 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 12-month update assessments. The 12-month update assessments shall be administered between 351 and 379 days after the initial assessment. To ensure accuracy and completeness, the updates reported below were for initial assessments that occurred 15 months ago.

SFY 2016 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	1,603	1,565	97.6%	1,531	95.5%	★
Cardinal Innovations Healthcare Solutions	2,138	2,019	94.4%	1,995	93.3%	★
CenterPoint Human Services	451	442	98.0%	440	97.6%	★
Eastpointe	1,444	1,444	100.0%	1,443	99.9%	★
Partners Behavioral Health Management	1,249	1,242	99.4%	1,238	99.1%	★
Sandhills Center	1,332	1,301	97.7%	1,288	96.7%	★
Smoky Mountain Center	1,630	1,620	99.4%	1,591	97.6%	★
Trillium Health Resources	1,395	1,395	100.0%	1,394	99.9%	★
<b>Totals</b>	<b>11,242</b>	<b>11,028</b>	<b>98.1%</b>	<b>10,920</b>	<b>97.1%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

Notes:

1. ★ = Met the Performance Contract Standard.

2. Percentages less than 90% are shaded red.

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**17. 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 2016 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	3,188	3,123	98.0%	★
Cardinal Innovations Healthcare Solutions	LME-MCO submits data through special waiver not the NC-SNAP			N/A
CenterPoint Human Services	1,149	1,149	100.0%	★
Eastpointe	2,281	2,281	100.0%	★
Partners Behavioral Health Management	2,096	1,989	94.9%	★
Sandhills Center	2,233	2,199	98.5%	★
Smoky Mountain Center	2,133	2,128	99.8%	★
Trillium Health Resources	2,958	2,958	100.0%	★
<b>Totals</b>	<b>16,038</b>	<b>15,827</b>	<b>98.7%</b>	<b>★</b>

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

7 (100%)

Notes:

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

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## 18. System of Care

**Performance Requirement:** LME-MCO submits a quarterly System of Care Report by the 15th of the month following the end of the quarter (or next business day if the due date is a weekend or holiday).

**SFY 2016 Standard:** All reports are accurate and complete and are received no later than 7 days after the due date.

LME-MCO	2nd Qtr Report Due 1/15/16		Standard Met <sup>1</sup>
	Date Received <sup>2</sup>	Complete	
Alliance Behavioral Healthcare	1/15/16	Yes	★
Cardinal Innovations Healthcare Solutions	1/15/16	Yes	★
CenterPoint Human Services	1/15/16	Yes	★
Eastpointe	1/13/16	Yes	★
Partners Behavioral Health Management	1/13/16	Yes	★
Sandhills Center	1/12/16	Yes	★
Smoky Mountain Center	1/15/16	Yes	★
Trillium Health Resources	1/8/16	Yes	★

Number and Percent of LME-MCOs that met the SFY 2016 Standard: 8 (100%)

**Notes:**

1. ★ = Met the Performance Contract Standard.

2. Dates that are shaded red indicate reports received >7 days after the due date.

Dates with yellow shading are within 7 days after the due date.

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## 19. SAPTBG Compliance Report

**Performance Requirement:** The LME-MCO shall submit a semi-annual SAPTBG Compliance Report by the 20th of the month (or next business day if on a holiday or weekend) following the end of the semi-annual period. Reports are accurate and complete and show at least 48 hours of Synar activity for the period.

**SFY 2016 Standard:** All reports are accurate and complete, show 48 hours of Synar activity, and are received no later than 10 days after the due date.

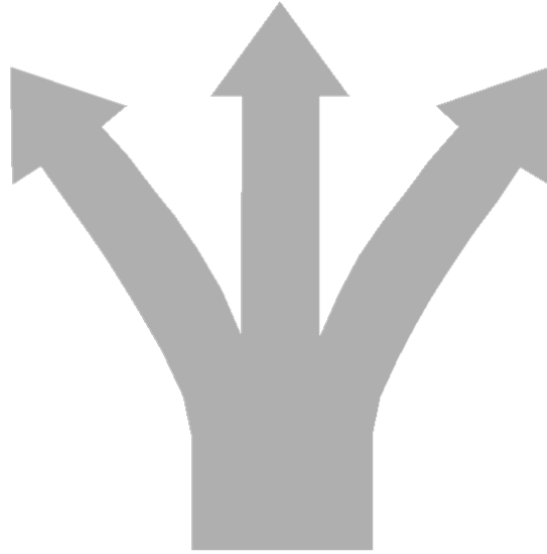
LME-MCO	Mid-Year Report (Due 1/20/16)			Standard Met <sup>1</sup>
	Date Received <sup>2</sup>	Accurate and Complete	48 Hours Of Synar Activity <sup>2</sup>	
Alliance Behavioral Healthcare	1/20/16	Yes	Yes	★
Cardinal Innovations Healthcare Solutions	1/21/16	Yes	Yes	★
CenterPoint Human Services	1/15/16	Yes	Yes	★
Eastpointe	1/20/16	Yes	Yes	★
Partners Behavioral Health Management	1/20/16	Yes	Yes	★
Sandhills Center	1/14/16	Yes	Yes	★
Smoky Mountain Center	1/19/16	Yes	Yes	★
Trillium Health Resources	1/20/16	Yes	Yes	★

Number and Percent of LME-MCOs that met the SFY 2016 Standard:

8 (100%)

**Notes:**

1. ★ = Met the Performance Contract Standard.
2. Dates received more than 10 days after the due date and Synar Activities < 48 hours are highlighted red.
- Dates received within 10 days after the due date are highlighted yellow.
3. Cardinal Innovations was credited with meeting the 7/20/15 deadline. They requested and received an extension until 8/3/15.



**Please give us feedback so we can improve these reports by making them more informative and more useful to you!**

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