



MECKLENBURG COUNTY
Area Mental Health, Developmental Disabilities and
Substance Abuse Services
April 09, 2012

PROVIDER HOT SHEET

- ⇒ **Monthly IRIS Training for All Users:** IRIS training is held on the second Tuesday of each month from 9:00-12:30 at the Carlton Watkins Center. Please contact Nancy Cody at 704-336-6027 for registration. The next training is scheduled for Tuesday, April 10 – it is not too late to register.
- ⇒ **Provider Quarterly Incident Reports** are due by April 10th, 2012. These reports are no longer accepted by fax. Please email the Provider Quarterly Incident Report to nancy.cody@mecklenburgcountync.gov. All Category A and B providers are required to submit a Provider Quarterly Incident Report, form QM11. This form can be found on the DMH website at: [Stats Publications](#)
- ⇒ **InfoShare Presentation** - At the InfoShare meeting on April 4th, 2012 Kathy Nichols, NC Division of Medical Assistance and Mark O'Donnell, NC Division of Mental Health Developmental Disabilities and Substance Abuse Services made a presentation on "Providers Network Operations to include: Network Analysis, Provider Selection, Enrollment and Credentialing and Provider Monitoring" ([Presentation Link](#))
- ⇒ **The 32nd Annual NCHIMA Behavioral Health Section Conference** will be held June 13 - 15, 2012 in Cary, NC. This is a great opportunity for those working in the areas of health information management (client records) to hear helpful information related to quality improvement, compliance, documentation, and HIPAA. This year's theme is "Opening the Doors to Change." Details and registration information are available at: [NCHIMA](#)
- ⇒ **CMS has approved the amendment to the NC Innovations** waiver with an effective date of October 1, 2011. This approval authorizes DMA to expand the covered service area from the previously approved five PBH counties to 65 counties. This approval allows for the implementation of NC Innovations for the PBH expansion counties, Western Highlands Network LME/MCO effective January 3, 2012, for ECBH LME/MCO effective April 1, 2012, and for Smokey Mountain and Sandhills LME/MCOs effective July 1, 2012. The waiver will be posted on the DMA website in the near future. A copy is on the AMH website for your reference. [waiver](#)
- ⇒ **The following LME policies have been updated in the Provider Resource Library on the AMH Public Website:**
- IM-03: Confidentiality and Protection of Consumer Information
 - IM-05: Designated Record Set for the LME
 - IM-07: Notice of Privacy Practices
 - IM-08: Records Retention and Disposition
 - IM-09: Release of Confidential Consumer Information
 - IM-10: Requests for Data
 - IM-25: Special Protection of Protected Health Information
 - IM-28: Security or Privacy Breach of Protected Health Information
- All LME policies are reviewed at least annually and revised and updated as needed. If you have any questions regarding one of the policies please contact the Service Analyst assigned to your agency.

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- ⇒ Your single point of contact for all suggestions, input, feedback, questions and concerns regarding the Hot Sheet should be directed to Dennis Knasel, LME Director of Network Development and Provider Relations at Dennis.Knasel@MecklenburgCountyNC.gov. [Subscribe](#) to the weekly Hot Sheet releases

NETWORK DEVELOPMENT AND PROVIDER RELATIONS

- ⇒ **Procedures for Local Reconsideration** - The LME has revised the Procedures for Local Reconsideration. These procedures are applicable for reconsideration of involuntary withdrawals and denials of endorsement. To access the procedures visit the AMH Public Website at the following link: [Manual/Guide](#)
- ⇒ **Elements of a Functional Responder System** - The Mecklenburg County Consumer and Family Advisory Committee (CFAC) and LME consider the following elements to constitute a Functional First Responder System (FFRS):
- The provider has a 911 prompt for medical crisis on their voicemail system.
 - The provider has a prompt that provides a phone or pager number for assistance with "urgent" or "crisis" needs that cannot wait until the next business day (**It is recommended that this number connect to a person and not to another telephone number or voicemail.**)
 - If crisis number contacts a pager, the message explains briefly what the caller will hear and how to respond.
 - If the caller does not reach a live person, the voicemail message gives the caller a wait time of no more than 15 minutes to expect a return call.
 - If the caller does not reach a live person, the call is returned within 15 minutes.
 - **Each CABHA shall adhere to all requirements as outlined in Implementation Update #86 which require the following:**
 - Consistent with 10A NCAC 22P .0302(e), CABHAs shall perform "first responder" crisis response 24 hours a day, 7 days a week, 365 days a year to all consumers accessing CABHA services, as follows: CABHAs shall serve as first responder when any consumer who has been assessed by the CABHA and is receiving services from the CABHA undergoes a crisis. For purposes of first responder requirements, crisis is defined as: a high level of mental or emotional distress, or an episode, which without immediate intervention will foreseeably result in the person's condition worsening, environmental instability or could result in harm to self or others.
 - All CABHAs shall be accessible 24/7/365 to respond directly to consumers and to collaborate with and provide guidance to other crisis responders regarding coordination of treatment for CABHA consumers in crisis. The first responder shall use the crisis plan developed with the consumer to coordinate and communicate with all other crisis responders (*in accordance with HIPAA and 42 CFR Part 2*) to ensure that the crisis plan is implemented.
 - All CABHAs shall have written policies and procedures in place that will be made available to all consumers, and shall include contact information for the consumer to first contact the CABHA rather than other crisis responders, such as hospital emergency departments and mobile crisis management teams. Each CABHA shall provide all consumers with a phone number to contact a live person 24/7/365 for use when crises occur. First response may be telephonic, but face to face intervention shall be attempted prior to referral or if necessary, in conjunction with other crisis responders. If a CABHA refers the consumer to an emergency facility or other crisis responder, the CABHA shall communicate with the crisis responder in order to facilitate coordination of care.

All providers of enhanced Medicaid services that are required to serve as First Responders should ensure that these elements are included in your First Responder System. (These expectations are not only for clinical home providers who have service sites within Mecklenburg County, but also apply to out of county clinical home providers who have a current Memorandum of Agreement or contract with Mecklenburg LME.) The LME and representatives from CFAC will periodically test providers through Mock Calls to ensure compliance with these requirements.

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Recommendations to providers:

- Keep the LME informed with up to date contact information.
- Check the LME's website under Provider Services for your agency's web pages. These web pages for designed for consumers so it is extremely important for all information to be accurate.
- Implement the 15 minute time limit for calls to be returned and include that time in all phone messages.
- Tell callers what to do if they do not receive a response within 15 minutes. This is an important element that needs to be added to almost all providers' messages – even those who succeeded in the mock calls.
 - Some agencies recommend calling 911 or give the Mecklenburg Mobile Crisis Team number as a back-up if a consumer receives no response to their crisis call.
 - CFAC does not recommend referring to 911 as a back-up. 911 is for true health related emergencies. It is an inappropriate and expensive resource for someone in a crisis that can better be addressed by a mental health professional.
 - Using the Mobile Crisis Team as a back-up responder is acceptable as long as this is not a substitute for an agency's implementation of its own first responder system.
- Identify the agency or say "crisis line" when answering the crisis line. Most providers answered the crisis line with "hello".
- Periodically do an internal check of your own system after hours to make sure it is working. This should include if it is easy to understand the message – is it loud enough, clear enough, are phone numbers clearly announced and repeated a second time.

PROVIDER COUNCIL REMINDERS AND UPDATES

- ⇒ **Provider Council Sub-Committees** – Two standing subcommittees have been formed by the Provider Council. If you are interested or want more information, please contact the committee chairs. The two committees are:
- **Quality Training Management Committee (QTM)** – The purpose of the meetings is to promote best practices collaborative growth in the areas of training and quality management, and understanding and support with regard to state and local processes.
 - ◆ Lisa Davis ,Genesis Project 1, 704-596-0505 ldavis@genesisproject1.org
 - ◆ Angela Bunting, BWB Connections, 704-596-5553 Angela.Bunting@connectionsbw.com
 - ◆ Sonyia Richardson. Another Level Counseling & Consultation, 704-548-5298 srichardson@anotherlevels.com
- ⇒ > **The next scheduled meeting is Wednesday, April 18th, 2012 at 9 AM in the Carlton Watkins Center Multipurpose room.**
- **Provider Outreach Sub-Committee has transformed into the Network Development Sub-committee**
 The purpose is to provide recommendations and feedback to the LME specific to the development of a provider network within a waiver environment and to develop information and learning sessions to assist providers in becoming waiver ready.
 - ◆ Shari Wright (Co-Chair) Connections BWB, Inc. 704-596-5553, shari.wright@connectionsbw.com
- ⇒ > **The next scheduled meeting is Wednesday, April 18th, 2012 at 11 AM in the Carlton Watkins Center Multipurpose room.**

EDUCATION AND TRAINING OPORTUNITIES

- ⇒ **MeckCARES Training Institute offers a full range of high-quality classroom and now [online courses](#) that meet state service definitions and requirements and will empower you to improve outcomes for youth and families. [Register](#) Today!**
- Learn about System of Care principles and practices
 - See how Child and Family Teams should operate
 - Gain knowledge, power and respect to strengthen families and improve lives

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- ⇒ **Mecklenburg's PROMISE Recovery and Crisis Training Calendar** - MeckPromise is offering free Wellness, Recovery & Crisis Education classes for consumers and providers at our new location 1041 Hawthorne Lane, Charlotte, NC 28205. Please feel free to drop by and see what we've got going on! For more information on our classes please call the main number at 980-321-4021 or John Cunningham at 980-321-4025 or via email at jcunningham@meckpromise.com to request a current calendar.
 - ⇒ **The [LME Monthly AMH Training Calendar](#)** is posted on-line.
 - ⇒ **TIP – Training in Innovation and Practice** –The NC Council of Community Programs and the Administrative Services Organization, a group of providers, continue to offer training to help providers adapt to changing circumstances. For a list of currently scheduled training events and to register, go to www.nc-council.org.
 - ⇒ **Mental Health Association offers various training opportunities to include QPR (Question, Persuade, and Refer) suicide prevention training. Please visit website <http://mhacentralcarolinas.org> or call 704-365-3454 for more information.**
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WEB RESOURCES

- ⇒ [NC Division of MH/DD/SAS](#)
- ⇒ [NC Division of MH/DD/SAS Provider Endorsement Information](#)
- ⇒ [NC Division of MH/DD/SAS Implementation Updates](#)
- ⇒ [Mecklenburg AMH](#)
- ⇒ [AMH Hot Sheet Archive](#)
- ⇒ [1915 \(b\)\(c\) Waiver Updates from Division Medical Assistance](#)
- ⇒ [Comparison: NC Innovations and CAP-MR/DD Waivers](#)
- ⇒ [LME-MCO Appeal Process \(per federal CFR 438.400\)](#)
- ⇒ [AMH Provider Document Library](#)