

To: All Providers

From: Cindy Ehlers, MS, LPC - Vice President of Clinical Operations

Date: February 13, 2018

Subject: SFY 17-18 Supplemental Short-term Assistance for Group Homes (10A NCAC 27G.5601(c)(1) & 10A NCAC 27G .5601 (c)(3)), Children with Complex Needs- Murdoch Developmental Center Children's Assessment Clinic, New Statewide Administrator/New Web-Based Provider Training Curriculum, and Updates from Trillium's Global Quality Improvement Committee, IRIS update

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### **SFY 17-18 Supplemental Short-term Assistance for Group Homes (10A NCAC 27G.5601(c)(1) & 10A NCAC 27G .5601 (c)(3))**

Per Session law 2017-57 Section 11F.18 A, the General Assembly has appropriated five million dollars (\$5,000,000) in non-recurring supplemental short-term assistance funds for individuals living in group homes for each year of the 2017 - 2019 fiscal biennium. The Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH/DD/SAS) is the division responsible for determining the process to disburse these funds. These funds will be distributed through the LME-MCOs to the group homes with 10A NCAC 27G .5601 (c)(1) and 10A NCAC 27G .5601 (c)(3) designations that house individuals with a primary diagnosis of mental illness or a developmental disability and meet the criteria described below in the operational instructions.

#### **Operational Instructions for the LME/MCO Supplemental Short-term Assistance for Group Homes:**

The following process shall be used for group home providers and LME-MCOs to request use of short-term supplemental funds for a(n) individual(s) who meet the identified criteria for fund use stated in Session Law 2017-57 Section 11F.18 A.(b):

1. The resident was eligible for Medicaid-covered Personal Care Services prior to January 1, 2013.
2. The resident was determined to be ineligible for Personal Care Services on or after January 1, 2013 due to Medicaid State Plan changes in PCS eligibility criteria.
3. The resident has been a continuous resident in a group home since December 31, 2012. If the bed was held due to a temporary leave of absence (i.e. hospitalization), the resident is still eligible. However, if the individual was discharged (not a result of a change in providers), the resident is NOT eligible.

**NOTE: ALL criteria MUST be met in order for a person to be eligible for short-term assistance.** The recipient may not receive this funding if a Medicaid appeal has been filed and Maintenance of Service (MOS) has been granted for PCS.

1. DMH/DD/SAS has sent an allocation letter to each LME-MCO based upon previous use of short-term supplemental funds. Funding allocated to the LME-MCO will be used as one-time short-term assistance, is \$464.30 per month per resident of a 10A NCAC 27G .5601 (c)(1) or 10A NCAC 27G .5601 (c)(3) designated group home who meets the identified criteria.
  - a. It is expected that \$464.30 per beneficiary per month will be dispersed until funds are exhausted or the end of the fiscal year.
  - b. Providers may only request short-term assistance for months that services were provided to the beneficiary from July 1, 2017- June 30, 2018.
    - i. For example, if a beneficiary moved into the group home August 1, 2017, the provider would not be eligible for July payments.
      1. Providers should include a cover letter if such exclusions apply.
  - c. The LME-MCO may request an additional allocation for funding based on the number of short-term assistance requests received. New allocation needs will be reviewed quarterly and any additional allocations will be based on the availability of remaining funds in the appropriation.
  - d. Short-term assistance funding is only available until funds are exhausted.
2. Individuals currently receiving Innovations waiver funding are not eligible for this funding.
3. Individuals who reside in Intermediate Care Facilities - Individuals with Intellectual Disabilities (ICF-IID) receiving Medicaid ICF-IID payments are not eligible for this group home short-term assistance funding.
4. Individuals that have transitioned from group home funding to an in-lieu of ICF service definition on or after January 1, 2013 are not eligible to receive this assistance.
5. LME-MCOs are NOT required to have a contract with the group home in order to issue payment. LME-MCOs are responsible for ensuring systems are in place for end of year reconciliation. LME-MCOs will receive updated allocation letter to update the Special Conditions section #7.
6. LME-MCOs: For-profit group homes are eligible for this funding. LME-MCOs have received updated allocation letters that update the Special Conditions section #11.
7. It is the provider's responsibility to determine eligibility, maintain documentation to support eligibility and notify the LME-MCO of any potential errors. In the event the LME-MCO requests repayment from a provider, those funds may go towards additional persons that are to receive this short-term assistance.
  - a. In the past, a list was created with individuals who received funding. We are unable to release the document at this time due to PHI contents. However, if you would like to verify if a beneficiary name is listed, please contact LaToya Chancey or Mya Lewis. If a list is created that can be shared per LME-MCO that information will be sent out accordingly.

8. Providers should submit short-term assistance Invoice Requests Forms directly to the LME-MCO from which the beneficiary's Medicaid originates (resident's Medicaid county). Please note this form contains PHI and must be sent via secure method.
9. LME-MCOs are responsible for paying each group home for funding starting from July 1, 2017 forward unless the individual was later determined to be ineligible or otherwise noted by the provider. Therefore, LME-MCOs will track submitted invoices and continue payments to the listed providers each month until the end of the fiscal year or all funds are exhausted, whichever is first. This should reduce administrative burden on all parties.
  - a. The Short-term Assistance Invoice Request Form has been updated to reflect the start date and the LME-MCO. If the beneficiary was denied PCS on or after January 1, 2013, you will note a start date of July 1, 2017. In the event that the denial took place after July 1, 2017, you will note that day.
  - b. While these forms do NOT require DMH/DD/SAS approval, copies of all Short-term Group Home Assistance Invoice Request Forms must be submitted by the LME-MCO to Mya Lewis, IDD & TBI Section Chief, monthly with a copy of the LME-MCOs Financial Status Report (FSR). DMH/DD/SAS will track submitted invoices during SFY18. During SFY 19, LME-MCOs will be provided a spreadsheet to continue tracking.
  - c. LME-MCO Point of Contact for Trillium is:
    - i. Trillium: Michelle Martin [Michelle.Martin@TrilliumNC.org](mailto:Michelle.Martin@TrilliumNC.org)
10. Group home providers must also submit a list of all funding sources for the operating cost of the group home for the preceding two years. (Refer to Funding Sources Notification.) **The list of all funding sources should be submitted to Mya Lewis, IDD & TBI Section Chief, by January 31, 2018 at [mya.lewis@dhhs.nc.gov](mailto:mya.lewis@dhhs.nc.gov).** A revision has been made to this document to include the LME-MCO for tracking purposes. One form per group home is required. If multiple persons reside in the same group home, only one form is required.

Should you have any questions regarding the implementation of this process, please contact Mya Lewis at [mya.lewis@dhhs.nc.gov](mailto:mya.lewis@dhhs.nc.gov) or LaToya Chancey at [latoya.chancey@dhhs.nc.gov](mailto:latoya.chancey@dhhs.nc.gov).

Per Session law 2017-57 Section 11F.18A.(c). (7) requires that “each group home that receives the monthly payments authorized by shall submit to the Department a list of all funding sources for the operational costs of the group home for the preceding two years, in accordance with the schedule and format prescribed by the Department”.

Group home providers will use this form to report all funding sources. Directions are noted below.

1. Complete the demographics section.
2. Please place an ‘X’ by the funding source used during the state-fiscal-years noted. If a funding source is not noted, write in the sources using the ‘other’ category.

**Demographics:**

LME-MCO:

Provider Name: \_\_\_\_\_ Group Home Name: \_\_\_\_\_

Group Home Site Address: \_\_\_\_\_

Street City Zip

**Funding Sources:**

Funding Source	SFY 2016-2017	SFY 2015-2016
Special Assistance	<input type="checkbox"/>	<input type="checkbox"/>
Supplemental Security Income	<input type="checkbox"/>	<input type="checkbox"/>
General Assembly Appropriated Non-Medicaid Funds (State Funded)	<input type="checkbox"/>	<input type="checkbox"/>
Innovations Waiver Funding	<input type="checkbox"/>	<input type="checkbox"/>
Enhanced Mental Health	<input type="checkbox"/>	<input type="checkbox"/>
Private funds	<input type="checkbox"/>	<input type="checkbox"/>
Third Party Insurance	<input type="checkbox"/>	<input type="checkbox"/>
Medicaid Personal Care Services (PCS)	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>



## Children with Complex Needs- Murdoch Developmental Center Children's Assessment Clinic New Statewide Administrator/New Web-Based Provider Training Curriculum

The Department of Health and Human Services (DHHS) and Disability Rights North Carolina (DRNC) entered into a Settlement Agreement on October 14, 2016 to outline a plan to assist children with complex needs. The Settlement Agreement defines children with complex needs as Medicaid Eligible Children ages 5 and under 21, who have been diagnosed with a developmental disability (including Intellectual Disability (IDD) and/or Autism Spectrum Disorder) and a mental health disorder who are at risk of not being able to return to, or maintain placement in a community setting.

The Settlement Agreement included the establishment of a Children's Assessment Clinic at Murdoch Developmental Center (MDC), beginning April 1, 2017 for children from the Central Region of the state with complex needs who required a thorough interdisciplinary team assessment.

***Effective immediately, the MDC Children's Assessment Clinic will begin to accept referrals from the entire state of North Carolina.***

The MDC Children's Assessment Clinic provides a thorough review and assessment of the clinical needs of the children referred. It is an interdisciplinary process which provides the individual, guardian, LME/MCO and existing providers (if applicable) the opportunity to meet with the clinical team. The clinical team includes a: social worker, psychologist, physician, psychiatrist and registered nurse. Additional staff are included as indicated, including a: pharmacist, behavior specialist, a speech-language pathologist, physical therapist, occupational therapist, dietician, dentist and/or educator.

The referral process is as follows:

- Children who have been identified as having complex needs are eligible for referral to the Clinic by LME-MCO staff as clinically indicated. Guardians can request a referral for their child from their LME-MCO.
- LME-MCO staff, along with the child's guardian, will complete the MDC Children's Assessment Clinic Referral Form. This form can be found at: <https://www.ncdhhs.gov/about/department-initiatives/children-complex-needs>.
- The LME-MCO will submit the Referral Form and additional documentation to Elizabeth Hayes, Admissions/Discharge Coordinator for MDC at [elizabeth.hayes@dhhs.nc.gov](mailto:elizabeth.hayes@dhhs.nc.gov) or fax 919-575-1104. If information is sent via email, you must encrypt the information.
- Ms. Hayes will work with the LME-MCO and guardian until the referral information is complete and will then forward the referral package to the Intake Coordinator. The Intake Coordinator will confirm the child's acceptance and schedule the Clinic appointment. Please see the attached FAQ document for families which provides helpful information for what guardians can expect at the appointment.

MDC Children's Assessment Clinic staff will ask guardian/families to complete a survey at the close of the clinic appointment to capture information regarding their satisfaction with the referral process, planning, the appointment experience and the travel to the clinic.

MDC Children's Assessment Clinic staff will send a follow-up survey six months post-clinic appointment to gather information about outcomes experienced by the child, to the need for establishment of regional Children's Assessment Clinics will be assessed by DHHS on a regular basis utilizing this data. MS. Hayes can be contacted at 919-575-1073.

### **Statewide Administrator:**

Beginning February 1, 2018, Rachel Johnson will be the Division of Mental Health, Developmental Disabilities and Substance Abuse Services Statewide Administrator and primary point of contact for the Children with Mental Health (MH), IDD and Complex Needs Settlement Agreement. She can be contacted at Rachel.Johnson@dhhs.nc.gov or 919-733-7011.

### **MH/IDD Web-Based Provider Training Curriculum:**

New MH/IDD web-based provider training is available for access at no cost. This curriculum is designed for MH and IDD staff, health care providers, caregivers and others to expand their knowledge of IDD and MH conditions, behavioral concerns, and evidence-based strategies to treat these conditions. The courses are self-paced and certificates will be available for individual modules as well as for the series.

There is also a professional track of the course for obtaining Continuing Education (CE) hours, available at: <https://bhs.unc.edu/intro-children-and-young-people-mh-idd> .

## Trillium's Global Quality Improvement Committee (GQIC) Updates

The Trillium Global Quality Improvement Committee (GQIC) serves as a fair, impartial committee representing the Provider Network. The GQIC discusses and explores an open forum of ideas related to quality improvement issues among the provider network, in order to maintain and achieve best practices that enable providers to help members reach their goals.

GQIC meets on the 4<sup>th</sup> Tuesday of the month following each quarter. A complete list of members and other GQIC related documents can be found on the Trillium website under "About Us". Members are listed below:

GQIC MEMBERS					
Name	Email	Specialty Area (1 needed in each area listed)	Provider Agency	Term End Date	Term
Brandy Burns (Chair)	<a href="mailto:bburns@acisupport.com">bburns@acisupport.com</a>	Child MH Provider	ACI Support	Ends December 2020	2 <sup>nd</sup> Term
Diane Berth (Co-chair)	<a href="mailto:Dianeberth50@gmail.com">Dianeberth50@gmail.com</a>	LIP/Outpatient Provider	Berth Behavior Consultation, PLLC	Ends December 2020	1 <sup>st</sup> Term
Richard Walker	<a href="mailto:R.Walker@corabell.com">R.Walker@corabell.com</a>	IDD Provider/ICF-IID	Corabell	Ends December 2019	1 <sup>st</sup> Term
Elizabeth Leggett	<a href="mailto:ELeggett@bcdcsolutions.org">ELeggett@bcdcsolutions.org</a>	IDD Provider	Beaufort County Developmental Center	Ends December 2019	1 <sup>st</sup> Term
Lindsay Joines	<a href="mailto:Ljoines@coastalhorizons.org">Ljoines@coastalhorizons.org</a>	Substance Use Provider	Coastal Horizons	Ends December 2019	1 <sup>st</sup> Term
English Albertson	<a href="mailto:English.albertson@monarchnc.org">English.albertson@monarchnc.org</a>	Provider Network Council Member	Monarch	Ends December 2019	1 <sup>st</sup> Term
Ann Holland	<a href="mailto:ann.holland@riinternational.com">ann.holland@riinternational.com</a>	Adult MH Provider	RI International	Ends December 2020	1 <sup>st</sup> Term



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Name	Email	Specialty Area (1 needed in each area listed)	Provider Agency	Term End Date	Term
VACANT		<i>Substance Use Provider</i>			
Cassandra Sloan	<a href="mailto:cassandra.sloan@Vidanthealth.com">cassandra.sloan@Vidanthealth.com</a>	Hospital	Vidant Health	Ends December 2017	1 <sup>st</sup> Term
Catreta Flowers	<a href="mailto:catretaa@yahoo.com">catretaa@yahoo.com</a>	Central Region CFAC Member	CFAC	Ends December 2017	1 <sup>st</sup> Term
Jonathan Ellis	<a href="mailto:ellisjs114@gmail.com">ellisjs114@gmail.com</a>	Northern Region CFAC Member	CFAC	Ends December 2017	1 <sup>st</sup> Term
Robin Mitchell	<a href="mailto:carolinamooooon@gmail.com">carolinamooooon@gmail.com</a>	Southern Region CFAC Member	CFAC	Ends December 2017	1 <sup>st</sup> Term

#### Objectives of the GQIC:

- Review quality and compliance concerns developing in the provider network
- Assess training needs of the network related to Quality Assurance (QA) and Quality Improvement (QI) issues
- Collaborate with Trillium staff regarding QI plans and initiatives of the MCO and provider network
- Utilize available data to identify trends related to provider QA/QI systems

If interested in becoming a member, please contact Krissy Vestal at [Krissy.Vestal@TrilliumNC.org](mailto:Krissy.Vestal@TrilliumNC.org).

#### **G-QIC Blinded Peer Review**

Trillium's Global Quality Improvement Committee offers the option for providers to request a review of their Quality Improvement Projects (QIPs) through a blinded peer review. As part of the review process, the committee will provide feedback regarding how the provider may more fully meet the expectations outlined by Trillium and improve their scores with the next submission. Prior to the committee receiving the QIP for review, Trillium staff will remove all

identifying provider information to ensure the committee does not know who the provider is and to enable the committee to review the QIP impartially. For any providers wishing to participate in the blinded peer review, please contact Krissy Vestal at [Krissy.Vestal@TrilliumNC.org](mailto:Krissy.Vestal@TrilliumNC.org). All QIPs will need to be submitted by 2/28/2018 to be included in the blinded peer review. Blinded peer reviews conducted in 2017 yielded a 50% improvement in overall QIP scores for providers who participated in the review.

### Provider QIPs

Provider agencies with a state-funded contract are required to submit *three* Quality Improvement Projects (QIPs) each year to the Quality Management (QM) department for review. The deadline for Fiscal Year 16-17 QIP submission was July 31, 2017.

For FY16-17 Trillium received QIPs from 100% of the providers required to submit and the QM Performance Improvement Unit reviewed and scored 204 total projects. All QIPs were scored using a tool that can be found on Trillium's website. Elements on the scoring tool include: goals and objectives, baseline and post baseline measurements, barriers and interventions, and analysis of the project. Scores were sent via email to providers with individual feedback for each project submitted.

Overall, FY16-17 project scores improved from FY15-16 scores. Providers that received 60% or less on any of their 3 submitted projects will receive technical assistance (TA). In 2016, 40% of the providers who submitted QIPs received TA, and in 2017 the number receiving TA has decreased to 19%.

Blinded peer reviews conducted by the Global Quality Improvement Committee in 2017 yielded a 50% improvement in overall QIP scores for those providers who participated in the review.

Below were some common issues noted in the QIPs that were reviewed:

- #1 – Not indicating a measurable goal.
- #2 – Not including data for baseline measurements and/or post-baseline outcome measurements.
- #3 – Not including a numerator and denominator for any measurement that is a percentage.

Provider QIP scores and projects were discussed in both the Trillium Quality Improvement Committee (QIC) and Global Quality Improvement Committee (GQIC) for suggestions and feedback. Providers will continue to be reminded of Trillium's GQIC offer to participate in a blinded peer review of QIPs. If a provider would like specific feedback on and/or a review of projects at any time by GQIC, they should contact Krissy Vestal at [Krissy.Vestal@TrilliumNC.org](mailto:Krissy.Vestal@TrilliumNC.org).

For FY16-17 several providers submitted QIPs who do not have a state contract. Please be reminded that **ONLY** providers with state contracts should submit QIPs to Trillium.

If an agency is unsure of if they meet this requirement, they should contact Krissy Vestal at [Krissy.Vestal@TrilliumNC.org](mailto:Krissy.Vestal@TrilliumNC.org) to confirm whether the QIP requirement applies to that agency for FY17-18 submission.

### Important IRIS Update:

IRIS will be unavailable from 8:00 a.m. until 9:30 a.m. on Wednesday, February 14<sup>th</sup> due to maintenance. In order to adhere to the 72-hour reporting guidelines, please fax a hard copy of the report to 252-215-6880 or scan to [incidentreporting@trilliumnc.org](mailto:incidentreporting@trilliumnc.org). As a reminder, the hard copy will need to be submitted in IRIS once it is available again. If you have any questions please contact Julie McCall or Wylanda Jones.

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Any questions about this Communication Bulletin may be sent to the following email:

[NetworkManagement@TrilliumNC.org](mailto:NetworkManagement@TrilliumNC.org). These questions will be answered in a Q&A format and published on Trillium's website.

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In order to ensure the highest security standards, Zix will be implementing additional security upgrades to the secure email portal/ZixPort on **June 3, 2018**.

The security upgrades will only allow a message recipient to access their messages using browsers that support TLS 1.2 or higher. Older browsers that do not support TLS 1.2 cannot be used to access the secure email portal/ZixPort after this date. Most browsers already have implemented this security feature, but you may need to check that you have the most updated version on your computer.

This change is necessary to improve security and is also a requirement for those customers that need PCI compliance.

Zix will be following the industry lead by email providers such as Google and Microsoft. Because most browsers and email platforms such as Google, Outlook.com and Yahoo have supported TLS 1.2 for the last few years, end-users are unlikely to be affected by this change. However, any browsers that do not support TLS 1.2 will need to be updated.

After June 3rd 2018, users that attempt to access the secure email portal/ZixPort with a browser that does not support TLS 1.2 will get a "connection refused" message.

A comprehensive list of browsers that support TLS 1.2 is available here:

<https://www.ssllabs.com/ssltest/clients.html>

Please review the list above and make sure you are ready by June 3. If you update your browser and still run into issues after June 3, please email Zix Customer Support at [support@zixcorp.com](mailto:support@zixcorp.com)

