



MECKLENBURG COUNTY
Area Mental Health, Developmental Disabilities and
Substance Abuse Services
December 3, 2010

PROVIDER HOT SHEET

⇒ **PATHWAYS TO MANAGE CAP MR/DD UR**

The State recently announced that Pathways LME will begin managing CAP MR/DD Utilization Review for Mecklenburg County effective January 20, 2011. Pathways staff plans to meet with CFAC and Mecklenburg County providers during January to discuss the transition. Details of those meetings will be forthcoming.

⇒ **Geriatric/Adult Mental Health Specialty Team (GAST)**

GAST is a team of mental health professionals who provide educational and consultative assistance to staff in long term care facilities located in Mecklenburg, Cabarrus, Rowan, Davidson, Stanly and Union counties. Their purpose is to increase staff understanding of the special needs of residents with mental illness. They also provide consultation to caregivers in private homes for:

- Persons who are age 60 or older who have a mental illness and are at risk of psychiatric hospitalization or
- Persons younger than age 60 but who have "geriatric needs" such as early onset dementia.

More information is available at <http://www.pbhsolutions.org/gast/> or you may contact the Team Leader, Dawn Lillard, RN at 704-721-2781.

⇒ **Immediate Notification of the LME in Response to a Level III Incident:** By rule, providers are required to notify the LME immediately to report a level III incident that occurs on the provider's premises or while the provider is delivering a billable service. Providers billing for 24/7 services, including Intensive In-home, ACTT, Community Support Team, and Residential Services are considered to be actively engaged in service delivery at all times. **Please contact Linda Margerum LCSW, ACSW at 704-336-7187** to fulfill this requirement. If the incident occurs after hours, leave a detailed message describing the incident, along with appropriate contact information. Please do not contact MeckLINK in an attempt to fulfill this requirement. Reference: NCAC 27G .0603 (b) (3)

⇒ **Timely Submission of Incident Reports:** Please note that incidents must be correctly submitted to IRIS in order to be evaluated for timeliness (reported within 72 hours of provider knowledge of the occurrence). If you do not receive the "thumbs up" screen following incident submission, you have not submitted a report. The LME receives a list of incident reports that have been initiated but not successfully submitted. Providers will receive email notification of these incomplete reports but they will not be considered timely submissions by the LME.

⇒ **Monthly IRIS Training for New Users:** IRIS training is scheduled on the second Tuesday of each month from 9:00-11:00am at the Carlton Watkins Center. Please refer to the Provider Training Calendar for further details and registration.

⇒ Mecklenburg County General Manager Michelle Lancaster-Sandlin has discussed the current July 2011 implementation date for the 1915 b/c Medicaid Waiver with the Secretary of the North Carolina DHHS, Lanier Cansler. The date has been revised and the new implementation date is **July 2012**. We will begin adjusting our implementation plan and proceed with the revised date of July 2012 in mind.

Should you have any questions, please forward them on to Jill Scott at Jill.Dineen-Scott@mecklenburgcountync.gov or 704-336-3793. We will keep you posted on any new information as it arises.

⇒ **[Implementation Update #82](#)**

- CS Authorizations

Mecklenburg Area MH/DD/SA Services
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- Authorization Reminder for CST, IIH, DT, CS
- PRTF/In-Patient Authorization Request Forms
- Adverse Determination Notification Changes
- Additional SOC Training Site Added
- CST, IIH, Day Treatment Training Requirements
- Utilization Review for CAP/MR-DD Services
- CAP/MR-DD Residential/Home Support Services
- Rules for CABHA Posted
- Performance Bonds for CABHAs
- Peer Support Service Status

⇒ **Mecklenburg County Sliding Fee Scale:** On 1/1/2011 the following sliding fee scale will go into effect. The amounts are based on the 2009 Federal Poverty Guidelines.

Percent of Poverty Scale	0-200%	201-300%	301-400%	
# in Family	0%	25%	40%	100%
1	0-21,660	21,661-32,490	32,491-43,320	43,321 and above
2	0-29,140	29,141-43,710	43,711-58,280	58,281 and above
3	0-36,620	36,621-54,930	54,931-73,240	73,241 and above
4	0-44,100	44,101-66,150	66,151-88,200	88,201 and above
5	0-51,580	51,581-77,370	77,371-103,160	103,161 and above
6	0-59,060	59,061-88,590	88,591-118,120	118,120 and above
7	0-66,540	66,541-99,810	99,811-133,080	133,081 and above
8	0-74,020	74,021-111,030	111,031-148,040	148,041 and above

For families with more than 8 members, add \$3,740 for each additional member.

⇒ **CAP-MR/DD Policy Changes-**The following links serve to revise the implementation of Utilization Review Guidelines posted in IU #76 on July 7, 2010, and the *CAP-MR/DD Policy Requirements: Extension/Exception Request Form* and instructions posted 10/1/10.

Implementation of the CAP-MR/DD Clinical Policy/Manuals and Technical Amendment Number One: Read these documents for additional clarification regarding policy changes within the CAP-MR/DD Clinical Policy, Technical Amendment and Manuals.

- [CAP-MR/DD UR Guidelines Extension-Exception Process](#) REVISED (11-1-10)
- [CAP-MR/DD Utilization Review Guidelines REVISED](#) (PPT) (11-1-10)
- [CAP-MR/DD Policy Requirements Extension/Exception Request Form](#) (Word) (11/1/10)
- [CAP-MR/DD UR Guidelines Extension-Exception Process Table](#) REVISED (11/1/10)

⇒ **Attn Providers Who Complete LME Admission and Discharge Forms:**

As a reminder the LME Admission and Discharge Form was modified on 7/9/10 to include two new items (25A and 42A) which document consumer attendance in self-help programs. The previous LME Admission and Discharge form is no longer valid for registration purposes. Please be sure your staff is utilizing the correct form located on the division website at:

<http://www.ncdhhs.gov/mhddsas/statspublications/manualsforms/lmeconsumeradmission07-9-10.doc>

Effective November 22, 2010, MeckLINK will not accept the previous LME Admission and Discharge form for registration purposes. If you have any questions, please contact Martha Joslin at 704-432-1978.

Mecklenburg Area MH/DD/SA Services
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PROVIDER COUNCIL REMINDERS AND UPDATES

- ⇒ **Provider Council Minutes** for the Executive Board, General Membership and Committees are published and available on-line at the following website:
<http://charmec.org/MECKLENBURG/COUNTY/AREAMENTALHEALTH/FORPROVIDERS/Pages/MPCouncil.aspx>
- ⇒ **Provider Council Sub-Committees** – Three standing subcommittees have been formed by the Provider Council. If you are interested or want more information, please contact the committee chairs. The three committees are:
- **Training and Development Committee** Trasha Black (Co-Chair), Genesis Project, tblack@genesisproject1.org, 704-596-0505
 - ◆ Angela R. Simmons (Co-Chair), The Right Choice MWM, 704-537-3650 x1105, angela@trcmwm.com.
 - > The next scheduled meeting is **Wednesday, January 19, 2011 at 9 AM** in the Carlton Watkins Center Multipurpose room.
 - **Provider Relations Sub-Committee**
 - ◆ Kira Wilson (Co-Chair), The Arc of NC, 704-568-0112, kwilson@arcnc.org
 - ◆ Tim R. Holland (Co-chair) Person Centered Partnerships, 704-319-7609, Tim.Holland@pcpartnerships.org
 - > **Stay tuned for future notification of the next meeting date.**
 - **Provider Outreach Sub-Committee** – The Provider Outreach Committee is a new sub-committee, the general purpose of which is to establish mechanisms for the Provider Council to connect with new providers, to provide them basic resource information and to introduce them to the Provider Council.
 - ◆ Miranda Little (Co-Chair), Family Preservation Services, Inc., 704-344-0491, MIittle@fpscorp.com
 - ◆ Becky Millis (Co-Chair), Family Preservation Services, Inc., 704-334-0491, Rmills@fpscorp.com
 - >The next meeting will be on **Wednesday, January 19, 2011 at 1:30 PM** in the Carlton Watkins Center Multipurpose Room.
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EDUCATION AND TRAINING OPPORTUNITIES

- ⇒ **Mecklenburg's PROMISE Recovery and Crisis Training Calendar.** Please feel free to print and post at your locations or pass it on to anyone you feel would benefit from our trainings. To register, go to www.meckpromise.com. If you have any questions or concerns, please feel free to contact us at (704) 525-4398, ext. 207. <http://www.meckpromise.com/node/43>
- ⇒ **The Mecklenburg County Provider Council** has developed a comprehensive Training Calendar designed to serve as a one-stop location to view training events occurring in Mecklenburg County that are supported or sponsored by the provider community, the LME, AHEC or other entities. Following is a link to submit training events: <http://www.meckpromise.com/node/75>. To view training events, click on the following link: <http://www.meckpromise.com/mptc>
- ⇒ **The LME Monthly AMH Training Calendar** is posted on-line at the following link:
<http://charmec.org/mecklenburg/county/AreaMentalHealth/ForProviders/Pages/ProviderTraining.aspx>
- ⇒ **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.
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Mecklenburg Area MH/DD/SA Services
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WEB RESOURCES

- ♦ **NC DIVISION OF MH/DD/SAS:** <http://www.ncdhhs.gov/mhddsas/>
- ♦ **MECKLENBURG AMH:** <http://mecklink.charmeck.org>
- ♦ **AMH BEST PRACTICES COMMITTEES AND SCHEDULE:**
<http://charmeck.org/mecklenburg/county/AreaMentalHealth/ForProviders/Pages/BestPracticeTeams.aspx>
- ♦ **HOT SHEET ARCHIVE:**
<http://charmeck.org/MECKLENBURG/COUNTY/AREAMENTALHEALTH/FORPROVIDERS/Pages/HotSheets.aspx>



MECKLENBURG COUNTY

Area Mental Health, Developmental Disabilities and Substance Abuse Services

429 Billingsley Rd., 2nd Floor
Charlotte, NC 28211-1098

From: Mecklenburg County LME

Re: Requirements for Out of County Residential Placements

Date: November 11, 2010

North Carolina Administrative Rule **10A NCAC 27G .0506** addresses communication procedures that should occur when children/adolescents are placed out of county and served through local public mental health, developmental disabilities and substance abuse services systems. In addition, Implementation Update #47 issued by the Division of Mental Health on August 4, 2008, clarifies that a Memorandum of Agreement is required when an endorsed provider from one LME catchment area serves a consumer living in another county (where the provider does not have a site) outside the LME catchment area.

Please remember, that before a Mecklenburg County consumer is placed out of county in a residential placement, it is the responsibility of the Clinical Home provider to adhere to following requirements:

- **Contact MeckLink at (704) 336-6404 to inform of the placement**
- **Complete** the attached Out of County Placement form and send it to:
Nicole P. McKinney
Mecklenburg LME
3500 Ellington Street
Charlotte NC 28211
(704) 319-9232 (fax)
- If the provider is enrolled with NC Medicaid to provide Residential Level III or Residential Level IV, contact Angie Jackson at (704) 336-6954 with the following information to help facilitate getting a Memorandum of Agreement in place:
 - name of the provider agency
 - date of admission
 - the service that will be provided
 - a contact name and number at the facility

Please note that Memorandum of Agreements will be processed **within 10 business days of receipt of the required information from the provider.**

Clinical Home providers who place consumers out of county in a residential placement and do not submit an Out of County form to the LME will be issued a plan of correction by the LME's Provider Relations Division. As such, if you currently have consumers placed outside of Mecklenburg County and you have not yet submitted the attached Out of County form to the LME, please submit such within 5 business days.

If you have further questions regarding this matter, please contact Nicole P. McKinney at 704-432-5539 or via email at Nicole.McKinney@MecklenburgCountyNC.gov

Notification of Out of Home Community Placement for Children/Adolescents

- A.** North Carolina Administrative Rules require that when children/adolescents served through local public mental health, developmental disabilities and substance abuse services systems are placed in a community program out of their home community or reside in ICF/MR facilities, the home¹ area authority or county program is responsible for notifying the following:
- Legal guardian
 - Others involved in care and treatment
 - Host² community provider
 - Host community representatives (may include the court counselor, county DSS, regional children's developmental services agency (CDSA) or the local education authority)
- B.** This is the official form for such notification.
- C.** Notification shall be made within 3 business days of placement by fax or hard copy.
- D.** In the case of an emergency placement, notification by telephone is acceptable, with written notification the following day.

Date: _____ Name of Child/Adolescent: _____
Date of Birth: ____ / ____ / ____ Date of Placement out of Home Community: _____
Grade: _____ Common ID#: _____ Social Security #: _____

Parent/Legal Guardian Name(s): _____
Address: _____
Phone: _____ E-mail: _____

Home Area Authority/County Program: _____
Contact Person: _____
Address: _____
Phone: _____ E-mail: _____

Host Area Authority/County Program: _____
Contact Person: _____
Address: _____
Phone: _____ E-mail: _____

Home DSS: _____ Contact Person: _____
Address: _____
Phone: _____ E-mail: _____

¹ A home program is one in the community of the child/adolescent's legal residence.

² A host program is one in the community in which the child will be residing.

Host DSS: _____ Contact Person: _____

Address: _____

Phone: _____ E-mail: _____

Home School: _____

Principal: _____

Special Education Program Administrator: _____

Address: _____

Phone: _____ E-mail: _____

Host School: _____

Principal: _____

Special Education Program Administrator: _____

Address: _____

Phone: _____ E-mail: _____

Physical Custodian/Provider: _____

Address: _____

Phone: _____ E-mail: _____

Person Completing Form: _____

Agency: _____

Address: _____

Phone: _____ E-mail: _____



THE CENTER FOR
START
SERVICES

**National Training Series on Mental Health & Intellectual Disability
2010-2011**

All training occurs via Webinar* from 12 noon to 2 PM Eastern Time

1. November 12, 2010: *Issues in Treating Trauma for People with Intellectual Disability*

Speaker: Nancy Razza, Ph.D.

Elizabeth Boggs Center on Developmental Disabilities, UMDNJ/Robert Wood Johnson Medical School, New Brunswick, New Jersey

2. December 10, 2010: *Clarifying and Understanding Psychotic Symptoms in Youth with Intellectual Disability*

Speaker: Robin Friedlander, MB, FRCPC

Program Director, Developmental Disorders Program, Department of Psychiatry, University of British Columbia; Chair, Developmental Disability Section of the Canadian Psychiatric Association

3. January 14, 2011: *Self-Injury in Persons with Intellectual Disability: Habilitative Mental Health Assessment and Treatment*

Speaker: William I. Gardner, Ph.D.

Professor Emeritus, University of Wisconsin-Madison

4. February 11, 2011: National START Team Meeting

Speaker: Joan B. Beasley, Ph.D.

Director, Center for START Services, Research Associate Professor, Institute on Disability - University of NH

5. March 11: *Mental Health Perspectives for Autism Spectrum Disorders in Adults with Intellectual Disability*

Speaker: Anne Desnoyers Hurley, Ph.D.

Research Associate Professor, Institute on Disability, Institute on Disability - University of NH & Tufts University School of Medicine

6. April 8, 2011: *Medical Conditions of People with Intellectual / Developmental Disabilities and Mental Health Challenges*

Speaker: I. Leslie Rubin, M.D.

President, Institute for the Study of Disadvantage & Disability; Research Associate Professor, Morehouse School of Medicine

7. May 13: *Developmental and Cognitive Limitations & Differences: Support Plans for Individuals with Mental Health Problems and Intellectual Disability*

Speaker: Anne Desnoyers Hurley, Ph.D.,

Research Associate Professor, Institute on Disability – University of New Hampshire & Tufts University School of Medicine

8. June 10, 2011: National START Team Meeting

Speaker: Joan B. Beasley, Ph.D.

Director, Center for START Services & Research Associate Professor, Institute on Disability - University of NH

**Registration information for webinars will be sent separately*



INSTITUTE ON DISABILITY / UCED
UNIVERSITY of NEW HAMPSHIRE
WWW.IOD.UNH.EDU

MPC
Mecklenburg Provider Council



presents

Person Centered Thinking Training

**Session 1: Monday, December 6th and
Tuesday, December 7th, 2010**

trainer

Sharon Welling

**Session II: Monday, December 20th and
Tuesday, December 21st, 2010**

trainer

Larry Adler

--LOCATION: Carlton Watkins Center, 3500 Ellington Street, Charlotte NC 28211

REGISTRATION: Register online: www.genesisproject1.org (Registration fees will be payable via Paypal)

*Total training hours: 12 hours

Cost: \$65 per person

For more information on this Person Centered Thinking Training, please contact, Dr. Trasha Black, PhD, LPC, NCC, Clinical Director at Genesis Project 1, Inc. (704.596.0505) [tblack@genesisproject1.org]

MPC

Mecklenburg Provider Council

TRAINING REGISTRATION FORM

Training Title:

Person Centered Thinking

(please check the desired training session:

Session I: December 6-7, 2010

Session II: December 20-21, 2010

Complete the information below and fax this form to Dr. Trasha Black at (704) 596-0507.

Please type or print

AGENCY INFORMATION

Agency's Name: _____

Agency's Contact Person: _____

Contact Person Phone: _____ Email: _____

-Participant (s) attending

Name (please print)	Email Address	Phone Number

*If there are more than 12 participants from your agency, please use another registration form.

SESSION & ATTENDEE INFORMATION

(Limit 50 per session. See the training flyer for times and locations)

	Number purchasing	Total Cost
Training Fee \$65.00		
TOTAL FEE		

PAYMENT INFORMATION

You will receive an online link for payment via Paypal in the registration confirmation email.

Training is limited to 50 persons per session. The training fee is nonrefundable and cannot be applied to a future training. Register early, space is limited. Participants who arrive more than 15 minutes late will NOT be admitted to the training session. Full attendance expected in order to receive training certificate (i.e. No partial credit will be given.) The Provider Network does not keep certificate copies so all participants will need to make all necessary copies and storage arrangements as copies of lost certificates will NOT be available in the future. Please note that these sessions will be videotaped and all participants will be asked to sign a consent form.

Should you have any questions, please contact Dr. Trasha Black at (704) 596-0505 or Angela Simmons at (704) 537-3650 ext.1105.

MPC
Mecklenburg Provider Council



presents

Cognitive Behavioral Therapy Training

Facilitator: Dr. Susan Furr, Ph.D.

December 9, 10, 11
10am-5pm

--LOCATION: Due to Space Constraints this training will rotate Meck County Library
Locations mid-training:

Thursday December 9, 2010: West Blvd Library 2157 West Boulevard (704) 416-7400

Friday December 10, 2010: West Blvd Library 2157 West Boulevard (704) 416-7400

Saturday December 11, 2010: Freedom Regional Library 1230 Alleghany Street (704) 416-4200

REGISTRATION: Register online: www.genesisproject1.org (Registration fees will be payable via Paypal)

*Total training hours: 24 hours including class time and additional reading and assignments.

**Plus \$10 fee for CEU's.



Dr. Susan Furr is a licensed psychologist who received her PhD from the University of North Carolina at Chapel Hill. She has worked as a school counseling, a psychologist at a university counseling center, and currently is a Professor in the Department of Counseling at the University of North Carolina at Charlotte. She has published on topics such as college student suicide, grief and loss counseling, career counseling, and development of counseling students. A major focus of her training has been in the area of cognitive therapy.

For more information on this Cognitive Behavioral Training, please contact, Dr. Trasha Black, PhD, LPC, NCC, Clinical Director at Genesis Project 1, Inc. (704.596.0505)[tblack@genesisproject1.org]

MPC

Mecklenburg Provider Council

TRAINING REGISTRATION FORM

Training Title:

Cognitive Behavioral Therapy Training
December 9, 10, 11

Complete the information below and fax this form to Dr. Trasha Black at (704) 596-0507.

Please type or print

AGENCY INFORMATION

Agency's Name: _____

Agency's Contact Person: _____

Contact Person Phone: _____ Email: _____

-Participant (s) attending

Name (please print)	Email Address	Phone Number

*If there are more than 12 participants from your agency, please use another registration form.

SESSION & ATTENDEE INFORMATION

(Limit 50 per session. See the training flyer for times and locations)

	Number purchasing	Total Cost
Training Fee \$65.00		
CEU's \$10.00		
TOTAL FEE		

PAYMENT INFORMATION

You will receive an online link for payment via Paypal in the registration confirmation email.

Training is limited to 50 persons per session. The training fee is nonrefundable and cannot be applied to a future training. Register early, space is limited. Participants who arrive more than 15 minutes late will NOT be admitted to the training session. Full attendance expected in order to receive training certificate (i.e. No partial credit will be given.) The Provider Network does not keep certificate copies so all participants will need to make all necessary copies and storage arrangements as copies of lost certificates will NOT be available in the future. Please note that these sessions will be videotaped and all participants will be asked to sign a consent form.

Should you have any questions, please contact Dr. Trasha Black at (704) 596-0505 or Angela Simmons at (704) 537-3650 ext.1105.

MPC
Mecklenburg Provider Council

presents

Motivational Interviewing

Facilitator: Tony Beatty.

**December 29-30, 2010
8:30am-4:30pm**

Cost: \$40

--LOCATION: Carl Watkins Center, 3500 Ellington Street, Charlotte NC 28211

REGISTRATION: Register online: www.genesisproject1.org (Registration fees will be payable via Paypal)

*Total training hours: 13 hours

Tony Beatty is a Licensed Clinical Addictions Specialist, who serves as a Program Administrator for Mecklenburg County Area Mental Health Provided Services Organization. Tony has three decades of experience working with individuals desiring recovery and is excited to provide Motivational Interviewing to the community.

For more information on this Motivational Interviewing Training, please contact, Dr. Trasha Black, PhD, LPC, NCC, Clinical Director at Genesis Project 1, Inc. (704.596.0505)[tblack@genesisproject1.org]



MPC

Mecklenburg Provider Council

TRAINING REGISTRATION FORM

Training Title:

Motivational Interviewing Training

December 29 & 30

Complete the information below and fax this form to Dr. Trasha Black at (704) 596-0507.

Please type or print

AGENCY INFORMATION

Agency's Name: _____

Agency's Contact Person: _____

Contact Person Phone: _____ Email: _____

-Participant (s) attending

Name (please print)	Email Address	Phone Number

*If there are more than 12 participants from your agency, please use another registration form.

SESSION & ATTENDEE INFORMATION

(Limit 50 per session. See the training flyer for times and locations)

	Number purchasing	Total Cost
Training Fee (\$40.00)		
TOTAL FEE		

PAYMENT INFORMATION

You will receive an online link for payment via Paypal in the registration confirmation email.

Training is limited to 50 persons per session. The training fee is nonrefundable and cannot be applied to a future training. Register early, space is limited. Participants who arrive more than 15 minutes late will NOT be admitted to the training session. Full attendance expected in order to receive training certificate (I.e. No partial credit will be given.) The Provider Network does not keep certificate copies so all participants will need to make all necessary copies and storage arrangements as copies of lost certificates will NOT be available in the future. Please note that these sessions will be videotaped and all participants will be asked to sign a consent form.

Should you have any questions, please contact Dr. Trasha Black at (704) 596-0505 or Angela Simmons at (704) 537-3650 ext.1105.