



ROLE OF LME/MCOS IN MEETING THE MENTAL HEALTH AND SUBSTANCE ABUSE NEEDS OF OLDER ADULTS: WHAT SMOKY MOUNTAIN LME/MCO IS DOING



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Smoky Mountain LME/MCO

- Smoky Mountain LME/MCO is one of 8 LME/MCOs across the state contracted to manage Medicaid and State Funded Behavioral Health Services catchment.
- Smoky Mountain LME/MCO oversees 23 counties of Western N.C.
- Behavioral Health includes Mental Health, Substance Use, and Intellectual/Developmental Disabilities

Smoky LME/MCO Catchment



Comprehensive Care Centers

- To support a continuum of service availability for consumers and to maximize service delivery to provide quality services for both Medicaid, Medicaid/Medicare, and State Funded consumers in need, Smoky has a Comprehensive Care Center (CCC) model.
- There are 5 CCCs across the catchment serving regional geographic areas.

Comprehensive Care Centers

- Daymark Recovery Services (Northern Region)
- RHA Health Services (Central & Asheville Region)
- Family Preservation Services (Asheville Region)
- Meridian Behavioral Health (Western Region)
- Appalachian Community Services (Western Region)

Closed Provider Network

- Like many health plans, and all Medicaid managed care plans across the country, Smoky operates a closed provider network, which means that Medicaid beneficiaries enrolled in the plan can only receive services from providers who are credentialed and contracted to participate in Smoky's network. The only exceptions are for emergency services or when there is no network provider available to provide medically necessary covered services to a particular individual.
- Smoky's closed network is designed to promote quality services, maximize public resources and ensure financial stability and sustainability of providers participating in the Medicaid managed care plan.

Core Services for Older Adults

Outpatient Services:

- Comprehensive Clinical Assessment
- Psychological Evaluation and Testing
- Individual Therapy and/or Group Therapy
- Recovery Education Center
- Psychiatric Medication Management
- Walk-In Centers/Same Day Access

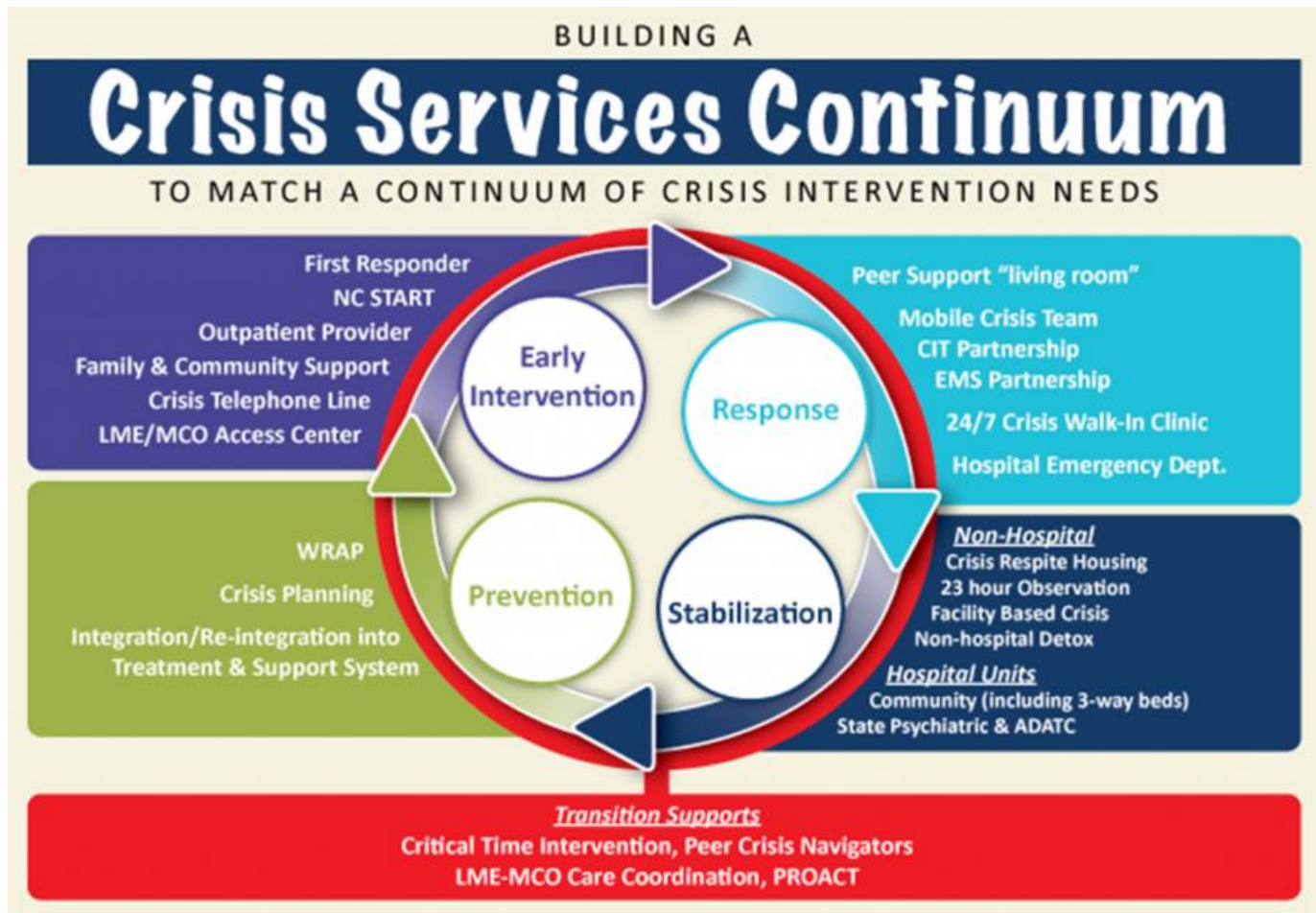
Medicaid/Medicare

- If an individual has both Medicaid and Medicare, Medicare is billed first and then Medicaid reimbursement can be billed for the remainder through Smoky Mountain LME/MCO
- At this time, CMS and Medicare only reimburse for clinical services provided by PhD Psychologists and Licensed Clinical Social Workers (LCSW), a barrier to access to care

Specialty Outpatient Providers

- All of the Comprehensive Care Centers recruit Medicare eligible clinicians in order to provide the array of outpatient services to Medicare only and dual eligible consumers
- Smoky Mountain LME/MCO has a specialty subset of outpatient therapy and medication management providers that work specifically with the long term care population
- Direct referral/working relationships with adult care home and skilled nursing facilities to come on site to provide treatment services

Crisis Services Initiative



Crisis Related Services

- Walk-In Crisis Center at a county based Comprehensive Care Center
- Community Based Mobile Crisis in every county
- BH Urgent Care with 24 Hour Observation Chairs
- Community Paramedicine Behavioral Health Crisis Response
- Behavioral Assessment in Emergency Departments
- Non-Hospital Detox
- Facility-Based Crisis
- Inpatient Psychiatric Services

Enhanced Services for Older Adults

- Assertive Community Treatment Team
- Community Support Team
- Peer Support Services (b)(3)
- Individual Supports
- Supported Employment Services
- Facility-Based Crisis Programs
- Psychosocial Rehabilitation
- Medically Supervised or ADATC Detoxification/Crisis Stabilization
- Outpatient Opioid Treatment

State Funded Residential Services

Long term residential services for the adult population are not covered by Medicaid Part B and are therefore all managed under limited state fund availability

- Intellectual/Developmental Disability
Alternative Family Living (1-2 individuals)
- I/DD Group Residential (3-6 individuals)
- Mental Health/Substance Use Group
Residential (3-6 individuals)

Intellectual/Developmental Disability Services

- The 1915(c) Waiver or “Innovations” Waiver provides slot based funding for those consumers with intellectual/developmental disabilities in I/DD Developmental Centers, Intermediate Care Facilities (ICF-IDD), Alternative Family Living, or Group Residential settings and their daily services to support their ability to remain in their chosen home/community rather than be permanently institutionalized.

Geriatric & Adult Mental Health Specialty Team

- The Geriatric and Adult Mental Health Specialty Team (GAMHST) is a North Carolina State Funded Program. Smoky Mountain LME/MCO teams are comprised of registered nurses, licensed clinicians, and qualified mental health professionals. The team serves 28 counties (Smoky's 23 and 5 additional counties within Partners LME/MCO catchment)
- The GAMHST staff is available to provide free DHSR approved education and consultation to all levels of long-term care (family care homes, adult care homes, and skilled nursing homes), senior programs and community stakeholders. Training and consultation is available to family caregivers of adults 60 years of age and older with mental health and/or substance abuse concerns. Training and consultation is provided at no cost.

Integrated Care/Whole Person Care

- Collaboration with 4 CCNC Networks for high priority population management and individual case coordination
- County specific Integrated Care Workgroups
- Contracting with behavioral health providers in a variety of levels of collaboration with primary medical care
- Medical Director consultation with physicians
- Collaborative Care Coalition of contracted MHSU/IDD providers to utilize Care Management Technologies (CMT)
- Coordination with FQHC and Rural Health Centers
- Certified Community Behavioral Health Center Readiness Assessment with all 5 Comprehensive Care Providers
- MAHEC/Smoky Whole Person Care Training Plan for behavioral health and primary care providers

Transitions to Community Living Initiative

The purpose of the Dept. of Justice/N.C. agreement is to ensure that individuals with mental illness can live in their communities in the least restrictive setting of their choice.

- The Transition to Community Living Initiative has six primary components:
- In-Reach and Transition - Providing or arranging for frequent education efforts and discharge planning targeted to individuals in adult care homes and state psychiatric hospitals.
- Diversion – Diverting individuals from being admitted to adult care homes.
- Housing – Providing community-based supportive housing with tenancy supports.
- Supported Employment – An evidence-based service to assist individuals in preparing for, identifying, and maintaining integrated, paid, competitive employment.
- Assertive Community Treatment – An evidence-based treatment and support model of services offering intensive customized, community-based services for people with mental illness.
- Quality Management – using data to evaluate progress and outcomes.

Access to Care

Smoky Customer Services
and Access to Care

24 Hours a Day, 7 Days a Week

1-800-849-6127

TTY, Call NC Relay at 711