Alliance Health

☒ **CONTRACT IS STATE FUNDED** ☒ **CONTRACT IS MEDICAID FUNDED** ☐ **CONTRACT IS BLOCK GRANT FUNDED**

Name of Program/Services
Value Based Contract Individual Placement Support-Supported Employment (IPS-SE)—NC Core

Description of Services
Individual Placement and Support-Supported Employment (IPS-SE) is a person-centered, behavioral health service with a focus on employment, that provides assistance in choosing, acquiring, and maintaining competitive paid employment in the community for individuals 16 years and older with primary diagnosis of a serious to severe and persistent mental illness (SPMI) or a primary diagnosis of substance use disorder for whom employment has not been achieved or employment has been interrupted or intermittent.

Best Practices for Supported Employment
The foundation for this service is the Individual Placement and Support (IPS) evidence-based
Supported Employment model and SE Fidelity Scale developed by the Dartmouth Psychiatric Research Center and promoted by SAMHSA (https://ipsworks.org):

Practice Principles of Evidence-Based Supported Employment
1. Focus on Competitive Employment
2. Eligibility Based on Client Choice (Zero-Exclusion)
3. Integration of Rehabilitation and Mental Health Services
4. Attention to Individual Preferences
5. Personalized Benefits Counseling
6. Rapid Job Search
7. Systematic Job Development
8. Time Unlimited and Individualized Support

Required Elements of the Program/Service
- IPS provider must adhere to the current NC Medicaid B3 Service Definition and the State-funded IPS Service Definition including all fidelity requirements.
- IPS-SE is required to refer all individuals to Vocational Rehabilitation (VR).
- All individuals served in IPS must also receive other behavioral health services. If an individual does not wish to receive behavioral health services, IPS-SE cannot serve them and must refer them to other employment services.
- Develop a steering committee that includes representatives from all stakeholder groups to oversee implementation process and to educate stakeholders about the practice.
- Agencies will actively explore and pursue Community Inclusion opportunities with emphasis on IPS-SE.

Collaboration
- Providers will participate in appropriate monthly Employment Collaborative for networking and training purposes.
- Provider will participate in monthly technical assistance calls with Alliance, DMH, DHB, DVR, and UNC Center for Excellence.
- Providers will attend case review meetings with Alliance's TCLI staff as requested.
- Provider will collaborate with other service providers and community stakeholders for the purpose of coordinating an individual's care and supports.
- Providers will work diligently with agencies and representatives to share best practices, identify barriers, and work toward solutions collaboratively with the goal of better outcomes for members.

Documentation Requirements
There must be written documentation that the provider is implementing the program requirements as listed within the scope of work. Documentation requirements may be further defined in the future but not without 30 days' notice.

Reporting Requirements
Provider will complete and submit In or At-Risk Checklist (IOAR) to the Alliance DOJ Portal for each IPS member. Provider will update checklist if there is a status change and will correct the checklists as requested in a timely manner.

Provider will submit the NC Core monthly report and the DHHS quarterly outcome report to Alliance Provider Network Evaluation at PNDPROVIDERREPORTS@alliancehealthplan.org. Provider must include in the subject line of electronic submission the name of the Provider and the specific program for which data is being submitted. All data is due monthly no later than the 10th of the month for the previous month.

Alliance shall obtain data from In or At-Risk checklists, approved authorizations, claims, NC TOPPS, survey results, provider reports and other means to verify fidelity, efficacy, quality and satisfaction with services being provided.

Utilization Management
*See Milestone Grid below

For Milestones to be reviewed by Network Evaluation all required documentation must be submitted to PNDPROVIDERREPORTS@alliancehealthplan.org. Provider must include in the subject line of email: Provider Name and Milestone Number for which documents are being submitted. Network Evaluation will review all documents within 10 business days. Upon successful completion of the review, an approval letter will be emailed to the Provider. Authorization is not required; however, the Provider must upload the approval letter in Alliance Claims System (ACS) as proof of eligibility for the Milestone

payment. Once the letter is received and uploaded, you may bill for the Milestone using the associated Milestone code.

Finance
Claims for milestone payments will be submitted through the Alliance Claims System (ACS).

TCLI Incentive payments
Providers are eligible for two $1,000 incentive payments for each TCL individual receiving IPS-SE services.

Quarterly, Alliance will review DVR Outcomes data and internal Alliance tracking for achievement of Milestone #3 and Milestone #9. Network Evaluation will email providers separate approval letters listing all TCL individuals for which Milestone #3 and Milestone #9 have been achieved. Provider must submit all eligible member names on separate expense invoices specific to each Milestone. Invoices must be on the Alliance Invoice Template and include submission of the approval letter. The required invoice template will be provided by Alliance Provider Network Staff or is available on the Alliance website. See "Invoice and Travel Expense Reimbursement Requirements" located on the Alliance website for additional information and requirements related to submitting expense invoices. If the invoice is not received timely or supporting documentation is not received within five business days after it is requested, the invoice will be held until the end of the fiscal year pending availability of funds. Payment of invoices will be made via electronic funds transfer.

Invoices should be emailed to Alliance Health by the 20th of the month following receipt of the approval letter for the quarter to: **AccountsPayable@AllianceHealthPlan.org**

Milestones	Funder	Medicaid Code	State Code	Rate	Utilization Management/Claims
Milestone 1- Engagement	Alliance	H2023 U4 Z1	H2023 Z1	$24.63/unit, up to 40 units (10 hours)	**Unmanaged, fee for service billing** (Max Annual Benefit per Provider)
Milestone 2- Intake	Alliance	H2023 U4 Z2	H2023 Z2	$2,000	**Authorization Required: SAR=1 unit, 90 days** Submission of integrated behavioral health & IPS-SE PCP including behavioral health and IPS-SE interventions for career goals
Milestone 3 - Job Development with Retention	VR	H2023 U4 Z3	H2023 Z3	(MCO Rate $3,200)	*Review/Approved by Network Evaluation Submission of Career Profile with Follow-Along Support Plan, Monthly Job development Summary Notes with Employer Contacts, New Hire or Job Start Form, Clear documentation of 3 days on the job in Summary Notes*
Milestone 4 - Job Support and Vocational Recovery	VR	H2023 U4 Z4	H2023 Z4	(MCO Rate $1,600)	*Review/Approved by Network Evaluation Submission of Career Profile with updated Follow-Along Support Plan, Monthly Progress Notes documenting Weekly Client Contact and Job Support Activities, written documentation of date of Team Lead approval of beginning of Vocational Recovery (Case note of discussion)*
Milestone 5 - VR Closure (90 Days of Vocational Recovery with Job Independence)	VR	H2023 U4 Z5	H2023 Z5	(MCO Rate $2,000)	*Review/Approved by Network Evaluation Submission of Career Profile with updated Follow-Along Support Plan, 30/60/90 DAY Job Support Summary Notes; Clear documentation of 90 Days of employment*
Milestone 6 - Follow Along Supports	Alliance	H2023 U4 Z6	H2023 Z6	$750/month (2- $375 trigger payments per month) - minimum of 2 direct with member contacts per month, 1 must be with ESP	**Authorization Required: SAR=16units, 8 months** Submission of updated Integrated PCP including current employment status, progress and/or challenges, IPS Transition Plan identifying interventions, ongoing behavioral health services, natural and community
Milestone 7 - Vocational Advancement/Employment	Alliance	H2023 U4 Z7	H2023 Z7	$500 (event based, max of 3 payments annually)	**Review/Approved by Network Evaluation** Documentation that the individual has received a promotion (internal or external)
Milestone 8 - Educational Advancement	Alliance	H2023 U4 Z8	H2023 Z8	$700 (event based, max of 3 payments)	**Review/Approved by Network Evaluation** 1. Documentation of completion of GED/HS equivalency; and/or short-term certification program up to 6 months 2. End of semester documentation of participation in higher education or more extensive certification program (greater than 6 months); Clear link to vocational goal in Career Profile and leads to employment outcome
Milestone 9 - Successful IPS Closure	Alliance	H2023 U4 Z9	H2023 Z9	$2,000	**Review/Approved by Network Evaluation** Submission of updated PCP reflecting goal attainment, including step-down process/warm handoff, services transitioning to/remaining in. Evidence of sustained or new employment; approximately 12 months of employment history with no more than 30 consecutive days of unemployment)

Start date: December 1, 2021