TO: Community Mental Health Center CEOs & ACT Team Leaders  
FROM: Katy Howard, Deputy Director _ Revenue Enhancement & Data  
Division of Mental Health and Addiction  
DATE: September 23, 2005  
RE: Assertive Community Treatment Team Quality Assurance Expectations

The purpose of this communication is to share the Division of Mental Health and Addiction's (DMHA) quality assurance activities related to Assertive Community Treatment (ACT) Teams and to reiterate the expectations of all ACT Teams in this area.

In an effort to identify the certification and fidelity status of the present ACT Teams, DMHA is now requiring the ACT Center of Indiana to routinely report on each ACT Team’s fidelity visits and progress. During August, DMHA and the ACT Center reviewed the certification status, fidelity reports, and progress of each ACT Team. Teams will be informed of areas of concern in the near future.

Teams with identified issues are required to schedule a follow up visit by the ACT Center to assess progress. Any ACT Team that is out of compliance with the certification standards will be required to immediately correct identified issues. If conditional status is deemed necessary, the ACT Team will not be able to bill Medicaid for the ACT per diem. In addition, contracts with DMHA for ACT funding may not be continued if teams fail to take timely corrective action or continually fail to adhere to the model.

The ACT rule (440 IAC 5.2) states that all ACT Teams will participate in the Division’s Quality Assurance Program. All ACT Teams are required to participate in the activities listed below. Data and reports are to be submitted timely. Failure to comply with the Quality Assurance Program will impact a Team’s certification status.

The Division’s Quality Assurance Program for ACT is made up of several components:

- Community Service Data System (CSDS) data collection
- Consumer Outcome Monitoring (COMP) data collection
- Fidelity monitoring
- Ongoing education/training
- Admission criteria review
- Incident reports
- Consumer identified issues
The following details each component:

**Community Service Data System (CSDS)** -- All ACT Team consumers are to be included in CSDS and indicated as ACT consumers using the ACT indicator. Please refer to the CSDS manual for specific information regarding the timelines for reporting. If you have questions about the CSDS requirements, contact Christi Hickman at christi.hickman@fssa.in.gov.

**Consumer Outcome Monitoring (COMP)** -- The ACT Center gathers statewide outcome data on consumers served by ACT Teams. Outcomes reports by site are shared with the sites and DMHA. ACT Teams are to submit quarterly data. This data is due thirty (30) days after the end of each quarter. For example, data for the quarter ending September 30 are due to the ACT Center on November 1st. Data are to be submitted electronically to outcome@iupui.edu. If you have questions please contact Kara Williams, ACT Center of Indiana, at 317-278-7861 or kacwilli@iupui.edu.

**Fidelity** -- DMHA contracts with the ACT Center to monitor each ACT Team's fidelity to the ACT model. Teams are expected to cooperate with all assessments by the ACT Center. In addition, DMHA requires the ACT Center to review compliance with certification standards. The ACT Center will provide agencies with a written report of compliance for both compliance and fidelity. Agencies are expected to create a plan of correction for any identified issues or deficiencies that includes action, responsible person and target date for correction. The ACT Center will review the plan of correction and status of achievement at its next site visit. If the ACT Center determines that satisfactory corrections have not been made and the Team remains out of compliance with certification regulations, the ACT Center will notify DMHA. DMHA will review and take action as appropriate at that time.

In addition, **all new ACT teams must have an initial fidelity visit prior to submission of an application for certification**.

**Education/Training** -- Education and training programs are conducted by the ACT Center. All ACT Team members should attend the "Start Up" training provided by the ACT Center. At least fifty percent (50%) of the Team members must attend "Start Up" training prior to submission of an application for certification. As new members are hired onto the Team, they must also attend the start-up skills training within 6 months of hire. Shadowing of other teams is also provided by the ACT Center and consultation is a component of each site visit conducted by the ACT Center.

**Admission Criteria** -- To ensure that consumers who would benefit the most from ACT services are admitted to ACT Teams, DMHA, in cooperation with the ACT Center, has developed minimum admission criteria for ACT. **The minimum admission criteria must be implemented no later than October 1, 2005.** The ACT Center has developed an "ACT Admission Criteria and Baseline Data Form" to facilitate proper documentation of compliance with the admission criteria. **DMHA strongly recommends the use of this form.** Proper use of the form ensures documentation demonstrating compliance with the admission criteria is provided in the medical chart. Proper documentation will assist in demonstrating compliance with certification standards, fidelity, and Medicaid requirements. Furthermore, DMHA is pursuing this form as the Medicaid endorsed prior authorization tool.

If a Team desires to implement admission criteria specific to a targeted population, the criteria must be submitted to DMHA for review and approval. All admission criteria must be consistent with the objectives of ACT. The admission criteria cannot be implemented until approved by the Division.

**Incident Reports** -- Incidents must be reported to DMHA in accordance with 440 IAC 5.2. Agencies must cooperate with any follow up deemed appropriate by DMHA. If you have questions regarding incident reporting, please contact Drenda Henry at drenda.henry@fssa.in.gov.
**Consumer identified issues** -- Consumers must be informed of the Consumer Service Line (1-800-901-1133). The agency must cooperate with DMHA regarding follow up to Consumer Service Line calls. If you have questions regarding the Consumer Service Line, please contact Kendra Ballinger (kendra.ballinger@fssa.in.) or Linda Dupont (linda.dupont@fssa.in.gov).

If you have questions about this communication, please contact me or Pam Johnson ([pam.johnson@fssa.in.gov](mailto:pam.johnson@fssa.in.gov)) at (317)232-3465.