



Behavioral Health and Developmental Disabilities (BHDD) Division

Medicaid Services Provider Manual for Substance Use Disorder and Adult Mental Health

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New

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455qm

Subject:
Montana Assertive Community Treatment (MACT) Quality Measures

Montana Assertive Community Treatment Quality Measures

Goal	Quality Measure
Program design	<ul style="list-style-type: none"> • Total members per MACT team per month (<i>Data Source: Monthly Contact Log</i>) • Total admissions, total discharges (<i>Data Source: Monthly Contact Log</i>)
Encourage successful discharges from Montana State Hospital and Montana Mental Health Nursing Care Center <ul style="list-style-type: none"> • Is involved in planning for hospital discharges. 	<ul style="list-style-type: none"> • Percentage of members discharging from Montana State Hospital who were accepted within the MACT teams service area. (<i>Data Source: MSH discharge data/ Monthly Contact Log/MMIS</i>) • Percentage of members who received an initial contact from the MACT team within three days of referral from Montana State Hospital. (<i>Data Source: Monthly Contact Log</i>)
Decrease in admissions/readmissions to acute inpatient settings including MSH, BHU, and ED <ul style="list-style-type: none"> • Has 24-hour responsibility for covering psychiatric crisis • Is involved in diversion 	<ul style="list-style-type: none"> • Percentage of independent community days per month. (<i>Data Source: Monthly Contact Log</i>) • <i>Track the utilization for acute, ED, and involuntary commitments to establish a benchmark for decreases in utilization in the first year of implementation. Then once a benchmark is established, set a target to reach for decreased utilization.</i>

Increase housing stability	Percentage of days a member was in independent housing. <i>(Data Source: Monthly Contact Log) (Population metric homelessness)</i>
Sustain a full MACT team without waivers <ul style="list-style-type: none"> • Set staff salary sufficient to enlist and retain MACT teams 	Percentage of time within the reporting timeframe that a MACT team was fully staffed per Montana MACT standards. <i>(Data Source: Staffing Roster, Quarterly, must be submitted when there is any change in MACT team staffing)</i>
Member medication compliance	Percentage of members during the measurement year who were dispensed and remained on a prescribed medication for at least 80% of the measurement year. <i>(Data Source: Monthly Contact Log/Medicaid Pharmacy, Quarterly)</i>
Integration with primary care	<ul style="list-style-type: none"> • Percentage of members who had an outpatient visit with a primary care provider annually. <i>(Data Source: Monthly Contact Log/MMIS). (Review the utilization primary care visits to establish a benchmark to set a target to reach for increased primary care).</i> • The member’s individualized treatment plans include both behavioral health and physical health goals. <i>(Data Source: Random sample file review, 80% of the random sample, Annual)</i>
Member satisfaction	Annual completion of the Mental Health Statistic Improvement Program (MHSIP) Adult Consumer Experience of Care Survey. <i>(Data Source: AMDD, Annually)</i>
Community integration	<ul style="list-style-type: none"> • Temple University Community Participation Measure, as modified. Percentage of members who had this completed with them every 90 days by the team’s CBHPSS. <i>(Data Source: Random sample file review, 80% of the random sample, Annual)</i> • <i>Track Community Participation to establish a benchmark for increased inclusion in the first year of implementation. Then once a benchmark is established, set a target to reach increased community integration.</i>