



**Behavioral Health and Developmental Disabilities (BHDD) Division**

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

**Date effective:**  
October 1, 2022

**Date revised:**  
New

**Policy Number:**  
*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"> <li>• Total members per MACT team per month (<i>Data Source: Monthly Contact Log</i>)</li> <li>• Total admissions, total discharges (<i>Data Source: Monthly Contact Log</i>)</li> </ul>
Encourage successful discharges from Montana State Hospital and Montana Mental Health Nursing Care Center <ul style="list-style-type: none"> <li>• Is involved in planning for hospital discharges.</li> </ul>	<ul style="list-style-type: none"> <li>• 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>)</li> <li>• 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>)</li> </ul>
Decrease in admissions/readmissions to acute inpatient settings including MSH, BHU, and ED <ul style="list-style-type: none"> <li>• Has 24-hour responsibility for covering psychiatric crisis</li> <li>• Is involved in diversion</li> </ul>	<ul style="list-style-type: none"> <li>• Percentage of independent community days per month. (<i>Data Source: Monthly Contact Log</i>)</li> <li>• <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></li> </ul>

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"> <li>• Set staff salary sufficient to enlist and retain MACT teams</li> </ul>	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"> <li>• 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></li> <li>• 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></li> </ul>
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"> <li>• 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></li> <li>• <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></li> </ul>