

## **NC-TOPPS**

### North Carolina- Treatment Outcomes and Program Performance System

#### **What is it and why is it necessary?**

- A State mandated outcomes tool
- Measures include federally approved and mandated outcomes for MH/SA clients
- Your contract with LME
- Your accreditation needs
- Included item in LME clinical reviews
- Useful tool for getting PCP information
- LME Performance Agreement requirements

#### **Implementation Requirements**

- 100% of Mental Health consumers who are 6 years of age and older who have been admitted for treatment, enrolled in a target population by an assigned LME and are receiving enhanced benefit services.
- Assessments for:
  - Adult, 18 and older (with adult)
  - Child Mental Health, 12-17 years of age (adolescent)
  - Child Mental Health, 6-11 years of age (with guardian)
  - 100% of Substance Abuse consumers who are 6 years of age and older who have been admitted for treatment, enrolled in a target population by an assigned LME and are receiving enhanced benefit services.
  - Adult Substance Abuse, 18 and older (with adult)
  - Child Substance Abuse, 12-17 years of age (with adolescent)
  - Child Substance Abuse, 6-11 years of age (with guardian)
  - For QPs who provide services/treatment at a location where internet access is not available, QPs may use printable versions of the Assessments provided at <https://NC-TOPPS.ncdmh.net> under “Printable Versions of Assessments.” These may be used to gather the outcomes and then entered online at a later time.
- **Consumer Eligibility**
  - NC-TOPPS is required for 100% of mental health and substance abuse treatment consumers who meet all of the following:
    - Completed the screening and intake process
    - Formally admitted for treatment by having received a unique consumer record number through the LME and a record has been opened
    - Have a DSM-IV diagnosis or ICD-9 code
    - Enrolled in a target population by an assigned LME and receiving enhance benefit services (Including Medication and Medication Management consumers) except for the following exclusions...

### **Consumer Exclusions**

- Consumers receiving crisis services only or detoxification facilities only
- Consumers receiving substance prevention services only (IPRS CSSP and/or CSIP target populations)
- Consumers receiving inpatient psychiatric hospital services only
- Consumers who do not have a DSM-IV diagnosis or ICD 9 code, or latest version of either
- Consumers in an IPRS Transitional Non-covered population only
- Consumers receiving Medicaid Basic Benefits only (8 OP therapy sessions for adults, 26 OP therapy sessions for children)

### **Responsibility for NC-TOPPS Completion**

- The consumer's "clinical home"
  - The "clinical home" is the provider agency that is responsible for completing the Person Centered Plan.
- The Qualified Professional completing the PCP is responsible for ensuring that all NC-TOPPS assessments are completed.

### **Time Frames**

- At intake: Initial Assessment Interview
- Updates:
  - 3-month Update Interview
  - 6-month Update Interview
  - 12-month Update Interview
  - 6 month update thereafter (18, 24, 30 etc.)
- Transfer: A transfer interview when the "clinical home" changes
- Discharge: A discharge interview when the consumer is being discharged from treatment for any reason

### **Transfers**

- A transfer must be completed when the "clinical home" (not the QP) changes
- For example, when a consumer moves from an ACT Team to a Community Support Team
- The new "clinical home" must then complete an Initial Assessment followed by the appropriate Update Assessments: (3-month, 6-month, 12-month, and 6-month update thereafter)

## **Requirements**

- Copies of assessments required in the consumers' record
- SA-QP completes for SA consumer
- MH-QP completes for MH consumer
- Consumer present in FTF interview
- QP uses clinical judgment to gain more accurate responses
- If consumer refuses- QP submits using clinical records/notes
- No additional consents needed

## **Recommendations**

- Assure your agency has at least 1 “Super user” capable of following:
  - Tracking report for updates due
  - Track initial assessments received in past 3 months
  - Track update assessments received in the past 3 months
  - Change a consumer from one clinician to another
  - Print assessment report (once submitted)
  - Run queries

## **Useful contacts for NC-TOPPS**

- Kathryn Long, NCSU Center for Urban Affairs and Community Services
  - [Kathryn\\_long@ncsu.edu](mailto:Kathryn_long@ncsu.edu)
  - 919-515-1310
- NC DMH/DD/SAS website: <http://www.dhhs.state.nc.us/mhddsas/>
- NC-TOPPS website: <http://nctopps.ncdmh.net/>

## **Setting up a login and password**

- QPs need an ID and password to access the NC-TOPPS web-based system.
- Go to NC-TOPPS website (<https://nctopps.ncdmh.net>)
- Click on “New Clinicians Enrolling for Website Submission.”
- Submit necessary information.
- IDs and passwords should be received via e-mail within one week.
- Important numbers to know:
  - LME CODE (Facility Code) **13131**
  - Reporting Unit number **WHN Provider ID number**
  - Attending Provider Number **WHN Provider ID number**
  - Clinician ID **Your Staff ID in Your Agency**
  - Consumer Record Number **LME Record ID**