

10A NCAC 27G .0608 LOCAL MONITORING

(a) The Local Management Entity shall develop and implement written policies governing local monitoring of Category A and B providers. The written policies shall address:

- (1) the frequency and extent of local monitoring based on the following:
 - (A) number and severity of level II or level III incidents reported by the provider;
 - (B) the provider's response to the incidents;
 - (C) the provider's compliance with the reporting requirements as set forth in Rule .0604 of this Section;
 - (D) the number and types of complaints received concerning a provider;
 - (E) the provider's response to the complaints;
 - (F) the conclusions reached from investigation of the complaints;
 - (G) the results of reviews conducted by the Division of Health Service Regulation, the Division of Mental Health, Developmental Disabilities and Substance Abuse Services or the Division of Social Services;
 - (H) compliance with the requirements of the provision of public services;
 - (I) the provider's quality improvement activities as required pursuant to 10A NCAC 27G .0201(7), and trends in improvement;
 - (J) compliance with the contract or Memorandum of Agreement with the Local Management Entity;
 - (K) the addition of a new service; and
 - (L) accreditation by an accreditation agency approved by the Secretary such as the Council on Accreditation (COA), the Council on Quality and Leadership (CQL), the Council on Accreditation of Rehabilitation Facilities (CARF), or The Joint Commission;
- (2) The quality of the mental health, developmental disabilities and substance abuse services of all providers;
- (3) For Category A service providers, the LME shall defer to the Division of Health Service Regulation in the monitoring of any component of services provided which is an element of rule that is monitored by the Division of Health Service Regulation. For Category A providers, the LME shall monitor all components of services provided which are not found in Rule; and
- (4) If an investigation discloses issues that could affect either the provider's licensure if a Category A provider, or the provider's suspension according to 10A NCAC 26C .0501 through .0504, the Local Management Entity shall refer the provider to either the Division of Health Service Regulation or the Division of Mental Health, Developmental Disabilities and Substance Abuse Services pursuant to Rule .0606 of this Section.

(b) When local monitoring occurs, the Local Management Entity shall communicate the results to the provider within 15 calendar days of completion. The communication of the results shall constitute a local monitoring report that includes:

- (1) identification of each service monitored;
- (2) identification of any issues requiring correction; and
- (3) the timelines for implementing the corrections which shall not exceed 60 days from the date the provider receives the local monitoring report.

(c) A Local Management Entity that conducts the local monitoring of a provider serving another Local Management Entity's client shall provide a copy of the local monitoring report to the client's home Local Management Entity within 15 calendar days of completion.

*History Note: Authority G.S. 122C-112.1; 143B-139.1;
Temporary Adoption Eff. July 1, 2003;
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Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. July 20, 2019.*