

## Attachment D

### Letter to Adult Care Home from the LME-MCO

My name is (insert name). I work as a (insert name of position) at the (insert name of LME-MCO).

The State of North Carolina has begun a program to provide alternative housing for individuals with serious mental illnesses. As part of that program, LME-MCOs across the state are providing In-Reach services to those individuals. Some of the individuals living at your facility qualify for these services.

In-Reach involves providing individuals with information about community-based options, including the option to transition to supported housing. In-Reach also involves providing information about the array of services and supports available to those in supported housing to include rental subsidy and other assistance that may be needed for an individual to live successfully in the community.

I would like to meet with you via telephone on (insert date) at (insert time) to talk about In-Reach and share the names of individuals in your facility who qualify for In-Reach services. At the time of the call, I will ask you to provide the names of guardians and their contact information.

I may be contacted at (insert telephone number) between the hours of (insert time) if you have any questions or need to reschedule the telephone call.

Sincerely

Insert Name, Title, Agency