



# ValueAdded

This is the 117th issue of our VBH-PA information update. These updates will be faxed or emailed to all network providers monthly. Please feel free to share our newsletter with others, and be sure your appropriate clinical and financial staffs receive copies.

Volume 11, Issue 1












January 2009

An information update from Value Behavioral Health of PA, Inc.

VBH-PA wishes you ...

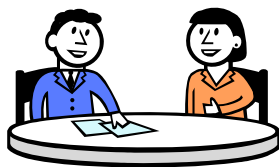
A HAPPY  
NEW YEAR

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## Consumer and Family Satisfaction Teams (C/FST)

The purpose of the C/FST Program is to determine whether adult behavioral health service recipients and children and adolescents with serious emotional disturbance and/or substance abuse disorders and their families are satisfied with their behavioral health services. The goal of the C/FST Program is to help ensure that problems related to service access, delivery, and outcome are identified and resolved in a timely manner.



The right of Consumer and Family Satisfaction Teams to meet with and interview HealthChoices members is established in the Pennsylvania DPW HealthChoices RFP, Appendix L. This mandate was most recently reaffirmed in the January 1, 2008, Program Standards and Requirements Document, Appendix L Revision. Section A.4.(c) states that:

***“Service Providers must provide C/FSTs with comfortable private space for interviews to ensure an environment in which behavioral health consumers and children and adolescents with serious emotional disturbance and/or substance abuse disorders and their families feel free to express any concerns they may have.”***

VBH-PA strongly supports the work and goals of the C/FSTs. We are requesting that all providers courteously receive and comfortably accommodate C/FST teams into their offices. In the case of providers whose services are delivered in the community (such as BHRS or Family Based) VBH-PA encourages you to work with your local C/FST to establish a process for assuring that your clients have the opportunity to participate in C/FST surveys. VBH-PA would be happy to talk to any provider to help them to better understand the C/FST process. Please contact our toll-free **Provider Line** at **877-615-8503** and ask to speak to your Provider Field Coordinator.



## Please Review Member Information

Please be sure to review member information before submitting claims. Due to HIPAA confidentiality guidelines, accuracy has become more important than ever. Pay special attention to the member's date of birth and spelling of first and last names. If we receive member information that does not match what DPW has given VBH-PA, your claim payment will be delayed or possibly denied under PAUNKNOWN.

To alert you to discrepancies, you will notice informational hold codes on your voucher when these claims are processed. Please pay special attention to these hold codes; they will identify members that you are billing with either date of birth or name discrepancies. The informational hold codes are as follows:

**X10 – Check member date of birth on future submissions**

**X11 – Check spelling of name on future submissions**

**Helpful hint: Submit the member's name exactly as it appears on your authorization letters and/or the member's access or Physical Health Plan Identification Card. This will ensure that your submission matches the eligibility data we receive from DPW. Pay special attention to nicknames and initials!!**

If you are unsure of the correct date of birth or spelling, or if you have an update to the demographics of a member, please call our toll-free **Provider Line** at **1-877-615-8503** and ask to speak to a Member and Provider Service Representative.

## Service Facility Location Address

The Service Facility Location Information, also referred to as loop 2310D on the 837 Professional Form or loop 2310E on the 837 Institutional Form, is necessary to ensure prompt and correct payment. Even if your service address matches your billing address, please include this information. This loop should contain:

- Your full street address
- Your agency NPI number

## 2009 WPIC VideoConference Series



VBH-PA is pleased to announce that our Service Center will once again be a videoconferencing site for the WPIC Office of Education and Regional Programming Videoconference Series. **These programs are free of charge; however, there is a fee for continuing education credits.**

January's videoconferences are: **"Assessment and Treatment of Eating Disorders"** on **January 14, 2009**; and **"Traumatic Brain Injury in Returning Veterans"** on **January 28, 2009**. The videoconferences are held from **9:00 a.m. to 11:00 a.m.** in the **Walnut Room** at VBH-PA's Trafford Service Center.

Attendees requiring continuing education credits will be asked to complete an attendance form and submit it with payment (\$15 for general CEUs; \$30 for ACT 48, CAC, CME, CPRP, NBCC, personal care home administrators, psychologists and social workers) after attending the program.

Please visit the WPIC website at: <http://www.wpic.pitt.edu/oerp> for a complete schedule and registration forms for these programs. You may also visit our website at <http://www.vbh-pa.com> for more information. Reminders for upcoming classes will be announced in future issues of *ValueAdded*. Don't miss it!

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### Attention STAP Providers!! Save the Date for an Important Training

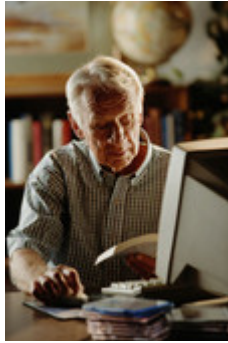
#### **"Developing a Clinically Sound STAP"**

**Thursday, January 22, 2009  
1:00 pm – 4:30 pm  
Pittsburgh Marriott North in Cranberry, PA**

***Elizabeth Campbell, Ph.D. from OMHSAS Children's Bureau will be presenting.***

More detailed information will be mailed out to our STAP providers very soon. If you have any questions, please contact our toll-free Provider Line at 877-615-8503 and ask to speak to your Provider Field Coordinator.

# Behavioral Health and Aging Resource Manual Available



The Office of Mental Health and Substance Abuse Services Older Adult Advisory Committee has issued the *Behavioral Health and Aging Resource Manual* to provide information about common behavioral health issues for older adults. The resource manual addresses facts and myths about aging and behavioral health in an effort to destigmatize behavioral health issues and encourage older adults and those concerned about them to seek help. The manual also provides reassurance and suggestions to maintain wellness. Basic information about caregiving, guardianship and power-of-attorney, common mental disorders, and substance use, misuse, and abuse is provided in language that is easy to understand. The manual also includes links to federal and state resources available on the Internet and is available online at [www.parecovery.org](http://www.parecovery.org).

## **A Reminder for Providers**

OMHSAS Bureau of Policy and Program Development

HealthChoices Behavioral Health

### Policy Clarification

**Issue Clarification #: 02-08**

**Date of Receipt: 10/01/08**

**Applicability: All Zones**

**Question:** In regards to ICM/RC programs: Is it ok to bill for emailing collateral or a contact? (Ex. A parent of a child or a child of a parent?)

**Background:** A Montgomery County provider is asking for clarification regarding billing for emails. The regulations do not address this question specifically.

#### **OMHSAS Answer/Response:**

A prior clarification, ICM/RC 04-01, states that instant messaging/chat is allowable as a reasonable accommodation for disabled consumers, but not intended to replace face-to-face contacts as required by regulation (55 Pa.Code Chapter 5221). However, email differs from instant messaging substantially in that it is not reciprocal, direct, or necessarily immediate. As with regular mail, providers of targeted case management may not bill for email contacts.

*Providers,  
please post  
this  
announcement  
in an area  
accessible by  
your patients.*

## Clean Indoor Air: Your Practice, Your Staff and Your Patients



Act 27 of 2008, the Clean Indoor Air Act (CIAA) became effective on September 11, 2008. The CIAA prohibits smoking in public places and workplaces. A national survey on the impact of workplace smoking bans reported that having a 100% smoke-free workplace reduced smoking prevalence by six percentage points and average daily consumption among smokers by 14% relative to workers subject to minimal or no restrictions. The impact of work area bans was lessened by allowing smoking in some common areas. Smoke-free policies reduced smoking for all demographic groups and in nearly all industries.

Tobacco has a negative effect on almost every organ of the body. According to the Surgeon General, tobacco use is the leading preventable cause of death in the United States, resulting in about 400,000 deaths each year.

Pennsylvania's CIAA provides you with an opportunity to provide awareness education on the health impact of smoking as well as the health benefits of quitting, and motivate staff and patients to utilize the statewide and local cessation resources available.

**Health impact of smoking** Cigar smokers and smokeless tobacco (chew or spit tobacco) users have similar health risks as cigarette smokers:

**Short-term effects** of smoking include an increased frequency in respiratory illnesses such as cough, colds, bronchitis, and pneumonia. Among children and adolescents exposed to secondhand smoke, rates of asthma, ear infection, and lower respiratory infections are higher.

**Long-term effects** of smoking include **cancer** of the mouth, throat, lungs, stomach, kidneys, bladder, cervix and pancreas. About one-third of all cancers are linked to tobacco use, and 90% of lung cancer cases are linked to smoking.

Smoking is also a known cause of chronic obstructive pulmonary disease, (e.g., emphysema, chronic bronchitis). Smoking reduces blood circulation and narrows blood vessels, depriving the body of oxygen and increasing the risk for heart disease. Non-smokers who are exposed to secondhand smoke are 25% more likely to develop heart disease. Smoking also doubles the risk for [stroke](#) and increases the risk for developing [cataracts](#).

Smoking poses additional health risks for women because it increases the risk for rheumatoid arthritis, causes loss of bone density (osteoporosis) which increases the chances of hip and spine fractures in postmenopausal women.

Women of childbearing age who smoke face higher rates of infertility and greater risks for **complications during pregnancy**. Smoking during pregnancy is known to increase the unborn baby's health risks (e.g., premature birth, respiratory illnesses, low birth weight). After birth, the risk for **sudden infant death syndrome (SIDS)** doubles for babies exposed to secondhand smoke.

Because their bodies are not fully mature, **children** and **teens** are especially vulnerable to the hazards of smoking. Smoking interferes with normal lung development in those who begin smoking as children or adolescents. Young people who smoke can become even more strongly addicted to cigarettes and face a increased risk for developing lung cancer than those who start smoking later in life.

Teens who smoke are also more likely to have depression or other psychological problems and more likely to engage in other dangerous behaviors (e.g., using alcohol and other drugs)

### **Benefits of Quitting:**

- As soon as 20 minutes after a smoker's last cigarette, the body begins to recover from the negative health effects of smoking and the heart rate starts to slow.
- Levels of toxic carbon monoxide in the blood return to normal after 12 hours without smoking.
- Lung function improves and the risk for heart attack begins to drop as soon as two weeks after the last cigarette.
- Coughing and shortness of breath decrease one to nine months after the last cigarette.
- Risk for coronary heart disease becomes half that of a smoker after one year.
- Risk for stroke approaches that of a non-smoker after five years.
- Risk for developing mouth, throat, esophageal, bladder, kidney, and pancreatic cancer decreases after 10 years.
- Risk for death from lung cancer reaches half that of a smoker after 10 years.
- Risk for developing coronary heart disease is equal to a non-smoker after 15 years.

### **Pennsylvania Resources**

- PA Free Quitline. 1-800 QUIT NOW (1-800-784-8669). Services are free to Pennsylvania residents including one-on-one counseling (caller can schedule time of call and the counselor will call them)
- [www.determinedtoquit.com](http://www.determinedtoquit.com) provides resources for tobacco users to quit smoking
- [www.health.state.pa.us](http://www.health.state.pa.us) provides cessation resources throughout the Commonwealth. Eight regional primary contractors provide cessation services, including worksite cessation programs
- [www.health.state.pa.us](http://www.health.state.pa.us) provides complete information of Act 27 of 2008, the Pennsylvania Clean Indoor Air Act

*Providers,  
please post  
this  
announcement  
in an area  
accessible by  
your patients.*

## Aire limpio en interiores: su consultorio, su personal y sus pacientes



La Ley 27 de 2008, la Ley de Aire Limpio en Interiores (Clean Indoor Air Act, CIAA) entró en vigor el 11 de septiembre de 2008. La CIAA prohíbe fumar en lugares públicos y lugares de trabajo. Los resultados de una encuesta nacional sobre el impacto de la prohibición de fumar en el lugar de trabajo indican que en los lugares de trabajo con prohibición de fumar se redujo el tabaquismo en seis puntos porcentuales y el consumo diario promedio entre los fumadores disminuyó el 14% en comparación con los trabajadores con restricciones mínimas o sin restricciones. El impacto de la prohibición en áreas de trabajo disminuyó al permitir que se fumara en algunas áreas comunes. Las políticas internas de prohibir fumar redujeron el uso de tabaco en todos los grupos demográficos y en prácticamente todas las industrias.

El tabaco tiene un efecto negativo sobre casi todos los órganos del cuerpo. Según el Cirujano General, el uso de tabaco es la principal causa de muerte evitable en los Estados Unidos y ocasiona aproximadamente 400,000 muertes al año.

La CIAA de Pennsylvania le da la oportunidad de informar sobre el impacto que fumar tiene sobre la salud y los beneficios al dejar de fumar y además motiva al personal y a los pacientes a utilizar los recursos estatales y locales disponibles para dejar de fumar.

**El impacto del tabaco sobre la salud** (las personas que fuman puros y que usan tabaco sin humo (tabaco de mascar o escupir) tienen riesgos similares para la salud que los fumadores de cigarrillos:

**Los efectos a corto plazo** del tabaco incluyen un aumento en la frecuencia de enfermedades respiratorias como tos, catarros, bronquitis y neumonía. Entre los niños y adolescentes expuestos al humo de fumadores, la incidencia de asma, infecciones del oído e infecciones de las vías respiratorias es más alta.

**Los efectos a largo plazo** del tabaco incluyen **cáncer** de la boca, garganta, pulmones, estómago, riñones, vejiga, cuello uterino y páncreas. Aproximadamente un tercio de todos los tipos de cáncer se relacionan con el uso de tabaco y el 90% de los casos de cáncer del pulmón se relacionan con fumar.

El fumar también es una causa conocida de la enfermedad pulmonar obstructiva crónica (p. ej. enfisema, bronquitis crónica). El fumar reduce la circulación de la sangre y contrae los vasos sanguíneos, lo cual priva al cuerpo de oxígeno y aumenta el riesgo de padecer enfermedades del corazón. Las personas que no fuman pero son expuestas al humo de cigarrillo de otras personas tienen 25% más probabilidad de padecer una enfermedad del corazón. El fumar también duplica el riesgo de padecer un ataque al corazón y aumenta el riesgo de padecer cataratas.

El fumar además constituye más riesgos para la salud de la mujer porque aumenta el riesgo de artritis reumatoide, causa pérdida de densidad ósea (osteoporosis), lo cual aumenta la probabilidad de sufrir fracturas de la cadera y de la columna vertebral en mujeres posmenopáusicas.

Las mujeres en edad de procrear que fuman tienen mayor índice de infertilidad y mayor riesgo de **complicaciones durante el embarazo**. Se sabe que fumar durante el embarazo aumenta los riesgos de salud del bebé (p. ej. nacimiento prematuro, enfermedades respiratorias, bajo peso al nacer). Después de nacer, el riesgo de padecer el **síndrome de muerte súbita del recién nacido** se duplica en los bebés expuestos al humo de cigarrillos.

Como su cuerpo todavía se está desarrollando, los **niños** y los **adolescentes** son especialmente vulnerables a los peligros del tabaco. El fumar interfiere con el desarrollo normal de los pulmones en aquellos que comienzan a fumar desde niños o adolescentes. La adicción a los cigarrillos puede volverse más fuerte en los adolescentes y aumentar el riesgo de que padezcan cáncer del pulmón en comparación con las personas que comienzan a fumar a una edad más avanzada.

Los adolescentes que fuman también tienen mayor probabilidad de padecer depresión u otros problemas psicológicos y mayor probabilidad de participar en otros comportamientos peligrosos (p. ej. el uso de alcohol y otras drogas).

#### **Los beneficios de dejar de fumar:**

- En tan solo 20 minutos después de que el fumador se fumó el último cigarrillo, el cuerpo comienza a recuperarse de los efectos negativos sobre la salud y la frecuencia cardíaca comienza a calmarse.
- Los niveles de monóxido de carbono en la sangre vuelven a su nivel normal después de 12 horas de no fumar.
- La función pulmonar mejora y el riesgo de sufrir un ataque al corazón disminuye después de tan solo 2 semanas de último cigarrillo.
- La tos y la falta de aliento disminuyen 1 a 9 meses después del último cigarrillo.
- Los riesgos de enfermedad coronaria se reducen a la mitad un año después.
- El riesgo de un derrame cerebral es casi igual al de un no fumador después de cinco años.
- El riesgo de padecer cáncer de la boca, garganta, esófago, vejiga, riñón y páncreas disminuye después de 10 años.
- El riesgo de muerte por cáncer de pulmón disminuye a la mitad que el de un fumador después de 10 años.
- El riesgo de padecer cardiopatía coronaria es el mismo que el de un no fumador después de 15 años.

#### **Recursos en Pennsylvania**

- Línea para dejar de fumar PA Free Quitline. 1-800 QUIT NOW (1-800-784-8669). Los servicios son gratuitos para los residentes de Pennsylvania, incluido el asesoramiento individual (la persona puede llamar para hacer una cita telefónica con un asesor).
- [www.determinedtoquit.com](http://www.determinedtoquit.com) proporciona recursos para dejar de fumar.
- [www.health.state.pa.us](http://www.health.state.pa.us) proporciona recursos para dejar de fumar en todo el estado de Pennsylvania. Ocho contratistas principales regionales proporcionan servicios para dejar de fumar, que incluyen programas en el lugar de trabajo.
- [www.health.state.pa.us](http://www.health.state.pa.us) proporciona información incompleta de la Ley 27 de 2008, la Ley de Aire Limpio en Interiores de Pennsylvania (Pennsylvania Clean Indoor Air Act).

## Continuation Rights Reminder



Continuation rights apply for our members that have received a denial letter for continuation of non-acute levels of care. The member has 10 calendar days from the date the denial notice was written to request their grievance review. This date is listed on the denial letter in bold print. The services that our member was receiving prior to their denial decision may continue throughout the grievance process as long as the member has met the 10 calendar day requirement to file.

VBH-PA will send an acknowledgment letter to our member, evaluator, and provider to notify them of the receipt of the grievance request. The acknowledgement letter will contain the date that the grievance was filed so that the provider will know if continuation rights apply. Services should not be pulled from the member while the 10-day timeframe in which the member can file a grievance request can be made.

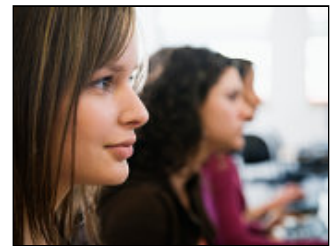
If the denial letter is written for an initial service request, our member can accept the recommendations that are listed within the denial letter that is offered by VBH-PA without endangering their ability to file a grievance for the prescription recommended by their evaluator. The member can access those authorized services by calling VBH-PA and informing them of their desire to receive those service while pursuing their grievance request.

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## Autism Training Resources

Several Bureau of Autism Services (BAS) trainings are in the process of being posted online at [www.odpconsulting.net](http://www.odpconsulting.net). These include:

- *Introduction to Autism Spectrum Disorders*
- *FBA for TSS Staff* addressing challenging behaviors
- *Functional Behavioral Assessment 101 for Direct Support Staff* which focuses on adults with challenging behaviors
- 2008 Pennsylvania Autism Training Conference workshops
- *First Look*, a DVD that provides a general overview of Autism Spectrum Disorder that focuses on children
- *Second Look*, a new DVD sequel to *First Look*, focuses on lifespan and the entire spectrum.



Training registration and information is available at [www.solutionwhere.com/bastraining/cw/main.asp](http://www.solutionwhere.com/bastraining/cw/main.asp)

Suggestions or ideas for articles that you would like to see published in *ValueAdded* can be faxed to Kim Tzoulis, *ValueAdded* Editor, at (724) 744-6363 or emailed to [Kimberly.Tzoulis@ValueOptions.com](mailto:Kimberly.Tzoulis@ValueOptions.com)

Articles of general importance to the provider network will be considered for publication.

Value Behavioral Health of PA, Inc.  
520 Pleasant Valley Rd  
Trafford, PA 15085  
Phone:  
(877) 615-8503  
Fax:  
(724) 744-6363

Past issues of *ValueAdded* can be accessed at:  
[http://www.vbh-pa.com/provider/prv\\_information.htm](http://www.vbh-pa.com/provider/prv_information.htm)