



ValueAdded









This is the 137th 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 12, Issue 9

September 2010

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

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Upcoming VBH-PA Forums:

11/1010 –3rd Annual NW3 Family/Individual Forum

Please click here to be added to the *ValueAdded* distribution list:

http://www.vbh-pa.com/provider/prv_information.htm#newsletters

Comprehensive Child/Adolescent Strength-Based Evaluation-Life Domain (CCASBE-LD)

Evaluators are to conduct the evaluation interview in a manner consistent with CASSP principles and are expected to implement a strengths-based interview process.



The goals of the evaluation process are to:

- 1) Assess whether a child is in crisis.
 - 2) Generate a written report that identifies strengths, resources and needs, and guides others to understand a child biologically, psychologically, developmentally and socially.
 - 3) Provide core information to all members of the treatment team to ensure that the Interagency Service Planning Team (ISPT) meeting will be a positive and effective process.
 - 4) Encourage the inclusion of the child, family and other treatment team members in the evaluation process.
 - 5) Create a comprehensive document that serves as a baseline for treatment planning for future evaluations and a tool for monitoring progress over time.
- The written evaluation should contain the elements identified in the Comprehensive Child/Adolescent Strength-Based Evaluation-Life Domain (CCASBE-LD) format.
 - The evaluator is expected to demonstrate the integration of information received from the child and family, and from other members of the treatment team, within the written report. **Evaluators are expected to seek input from members of a child's treatment team for inclusion in his or her discussion and recommendations within the written evaluation. A comprehensive evaluation cannot be obtained by merely meeting with a child and not including other involved people and systems in the assessment process.**
 - The written report should clearly identify goals that are measurable over time.
 - The evaluation must be individualized; it should not resemble any other evaluation. **It should contain up-to-date information and updated treatment goals. "Cutting and pasting" information from one child's evaluation to another child's evaluation is strictly prohibited.**

BHRS Delivered in Non-Traditional Schools and School TSS Changes Beginning 2010-11 School Year



TSS delivered in non-traditional school settings is prescribed, authorized, and delivered in the same manner for the non-traditional settings as it would be for the community schools. Non-traditional school includes, but is not limited to, cyber schools, home schools and charter schools. BSC and MT are not prescribed for specific locations so there is no difference in how this would be reflected in the prescription for services. The POC summary should reflect that services are being prescribed as school hours.

As you know, with the upcoming school year, a new code will be utilized to track the delivery of school TSS. If services are delivered in non-traditional settings the place of service code for school should still be utilized. So if the POC reflects the place of service code as school then the providers should bill accurately.

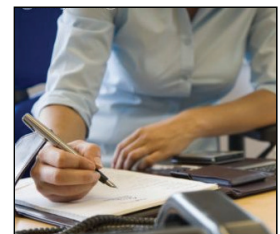
Effective with the 2010-11 school year, VBH-PA will be implementing changes to the codes designated for TSS hours delivered in the school, including non-traditional schools. School TSS services will be coded differently from the home and community TSS services.

The new service class for school TSS will be YT3. In the counties where authorizations are entered weekly, authorization letters will show the service class of YT4. The new service code that will need to be used for billing purposes is H2021 with a modifier of U3. The **only** place of service code (POS) that will be accepted when H2021 U3 is billed will be POS code 03.

If a child is receiving TSS services in school (including non-traditional schools), providers will need to indicate on the Plan of Care (POC) the start date for school, as well as the specific dates of major school breaks; for example, Christmas and Easter holidays. If the child is on a prescription that runs past the end date of school, the provider will also need to indicate the last day of school TSS services.

A Service Description Reminder

A provider's approved service description is the "blueprint" for their service provision. Providers must adhere to the contents of the service description and maintain the fidelity of their model. Service descriptions should be reviewed periodically to ensure that the provider is following their own model.



If you find your program "drifting" from what was approved, you must resubmit an updated service description for approval by OMHSAS, or make the necessary adjustments to adhere to the originally approved description of services.

Medical Assistance Transportation Program Information on www.VBH-PA.com



VBH-PA has dedicated a page on its website (www.vbh-pa.com) to information on Pennsylvania's Medical Assistance Transportation Program (MATP). MATP is a county-based program that helps Medical Assistance consumers obtain transportation to medical services by giving out tokens for public transportation, providing rides in vans, or by reimbursing consumers for mileage. You can access this new page from several places on the VBH-PA website, including the VBH-PA homepage (look in the "In the Spotlight" box), the Provider homepage, and Member homepage.

The webpage address is www.vbh-pa.com/spotlight/MATP_information.htm. On this page, you will find a link to the Pennsylvania Department of Public Welfare's MATP website. The page also includes a link to the Division of Medical Assistance Transportation's bulletin regarding mileage reimbursement for travel to methadone treatment services (effective August 1, 2010). This bulletin limits consumer mileage reimbursement for methadone maintenance services to the two closest clinics, or 50 miles one way, unless there are no accessible clinics within 50 miles. An exception process is outlined.

All of our county web pages already had their MATP phone numbers listed. Direct links to the MATP website were recently added to these pages. By clicking on these links, users can now retrieve county-specific MATP information, such as the county grantee and contractor.

Place of Service Code in ProviderConnect

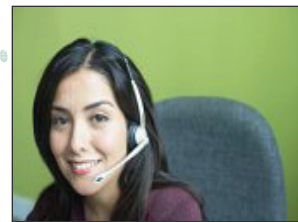
It has come to our attention that Place of Service (POS) code (**OUTPATIENT CHEMICAL DEPENDENCY PROGRAM = POS 89**) is being selected for Auto Outpatient requests via ProviderConnect. The CMS 1500 Place of Service Codes list does not include **OUTPATIENT CHEMICAL DEPENDENCY PROGRAM = 89, therefore VBH-PA can not accept it.** Going forward, please choose **Office** as shown below which equates to **POS = 11**. This can be used for both Mental Health and Substance Abuse services.



Place of Service	CPT or HCPC Code	Modifier 1 (If Applicable)	Modifier 2 (If Applicable)	Modifier 3 (If Applicable)	Modifier 4 (If Applicable)	Service Class	Visits/Week
OFFICE						SELECT...	0
SELECT...						SELECT...	
SELECT...						SELECT...	
SELECT...						SELECT...	
SELECT...						SELECT...	

Customer Service Corner

Customer Service Corner



ACT 62 Alert

Please be advised that it is ***imperative*** that the Commercial Insurance Plan details (Group Plan Renewal Date) be provided to VBH-PA in order for our records to be reflective of the date that ACT 62 may be applicable to your client.

For those members that have out-of-state issued insurance coverage, you must ***confirm*** with the private insurance company that there are no benefits available under ACT 62. Although insurance coverage issued out of the state of Pennsylvania do not have to provide coverage under the mandate, we have received reports that there have been some cases where these private insurers are complying with the PA ACT 62 Mandate.

***** Reminder*****

The private insurance plan benefits must be reviewed ANNUALLY, as of the Group Plan Renewal date, to determine if benefits under the PA ACT 62 mandate are available for the individual for which you are providing services.

If ACT 62 is not applicable to your client as of the Group Plan Renewal Date, this information must also be communicated to VBH-PA so that there is no disruption in reimbursement for services provided.

Please fax pertinent information to the VBH-PA Customer Service Department at **724-744-6379**.

VBH-PA Staff Update



Leigh Gardner is being promoted to **Director of Quality** effective September 13, 2010. Leigh will continue in her current role as Acting Director until then. *Congratulations, Leigh!*

VBH-PA Crawford County Office Has Moved!

Effective August 9, 2010, the new address for the VBH-PA Crawford County Office is:

**18282 Technology Drive, Suite 203
Meadville, PA 16335**

Claims Corner Claims Corner



Date Span Billing

In an attempt to reduce the number of claims denied for needing itemized statements, VBH-PA would like to suggest that providers billing services codes/modifiers that are not valued at one (1) unit per day refrain from date span billing. Services that could be billed and reimbursed with more than one (1) unit per day, should be submitted with each date of service on a separate claim line showing the appropriate number of units provided for that date.

Example of claim that could be denied for needing an itemized statement:

Claim Details											
Procedure Code	Mod 1	Mod 2	Mod 3	Mod 4	POS	Rate (\$)	Service From	Service To	Units	Charges (\$)	Non-Covered (\$)
H2021	SC				50	\$0.00	1/6/2008	1/12/2008	40	\$2,000.00	\$0.00

The itemized statement or corrected claim must be submitted as:

Procedure Code	Mod 1	Mod 2	Mod 3	Mod 4	POS	Rate (\$)	Service From	Service To	Units	Charges (\$)	Non-Covered (\$)
H2021	SC				50	\$0.00	1/7/2008	1/7/2008	5	\$250.00	\$0.00
H2021	SC				50	\$0.00	1/8/2008	1/8/2008	5	\$250.00	\$0.00
H2021	SC				50	\$0.00	1/9/2008	1/9/2008	5	\$250.00	\$0.00
H2021	SC				50	\$0.00	1/10/2008	1/10/2008	6	\$300.00	\$0.00
H2021	SC				50	\$0.00	1/11/2008	1/11/2008	6	\$300.00	\$0.00

The above example originally included dates of service 1/6/08 and 1/12/08 on the claim. The adjustment request must include an explanation why these dates were not included to prevent delays in payment.

Also, please make every attempt to not date span your claims into the following month or the following year. This may also result in a denial for an itemized statement.

~ Claims Corner Continued on Next Page ~

ProviderConnect Claims Enhancement



ProviderConnect has been recently enhanced to allow the provider to change or reprocess most of their claims online via direct claims submission (click on the link below to see page 13 of the **Direct Claims Submission Guide**). Using this application will allow you to know immediately that your claim adjustment was received. This system also automatically adjudicates your claim as soon as you submit it.

ProviderConnect can also be used to submit your secondary claims to VBH-PA. Step 2 of 3 of "Enter a Claim" (see page 3 of the Guide) allows you to submit your claim and attach a copy of the primary explanation of benefits. Again, your claim is immediately entered into our system so you do not have to wait and hope that your paper claim was received. You will have immediate record of your claim number.

The best thing of all is that reimbursement of all approved reprocessed/adjusted claims, as well as secondary claims, will be much quicker than ever before!

Please take a minute to review the **Direct Claims Submission Guide** by clicking on the link below.

http://www.valueoptions.com/providers/Compliance/Guide_to_Using_Direct_Claim_Submission.pdf

If you have any questions, our **EDI Support Team** is available for technical assistance. They may be reached at **1-888-247-9311**.

Duplicate Claims Receipts



VBH-PA's **duplicate claims receipts** have sharply increased during May and June of this year. Processing duplicate claims submissions causes additional work and expense for both VBH-PA and our providers.

In a recent article published by HGSA, Medicare expects duplicate submissions to be less than one percent of all claims processed. The article emphasizes that "patterns of filing duplicate claims are considered a form of program abuse". According to the Centers of Medicare and Medicaid Services, abuse is defined as **"Intentionally or unintentionally filing duplicate claims, even if it does not result in duplicate payment."**

Below are some helpful hints that may prevent duplicate claim denials:

- ☞ Do not resubmit claims until you have received confirmation from ProviderConnect or a Provider Services Representative that the initial claim is not on file.
- ☞ If your software automatically generates a resubmission, please keep in mind that VBH-PA has thirty (30) days to process a claim. Program your software to allow sufficient time for receipt of payment and posting to patients' accounts.
- ☞ Claims received with the identical date of service, place of service code and procedure code/modifier of an existing claim will be denied as a duplicate. If you need to increase or decrease units for services already submitted and paid, please use the Change/Reprocess feature in Direct Claims Submission to update your claim.

Save the Date!

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

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

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Past issues of *ValueAdded* can be accessed at:
[VBH-PA - Provider Information Center](#)

Value Behavioral Health of Pennsylvania is pleased to present the



3rd Annual HealthChoices NW3 (Crawford/Mercer and Venango Counties) Behavioral Health Forum:

"Acknowledging the Journey"

A Forum for Adult VBH-PA Members and Families of Child and Adolescent VBH-PA Members.

Wednesday, November 10, 2010

9:00 am to 4:15 pm

Registration begins at 8:00 am
(Lunch is included)

Radisson Hotel

Route 18 & I-80 • West Middlesex, PA

Featuring Exceptional Parent and Individual Awards Luncheon

Featured Speakers: Rebecca Moyes, Social Skills Training; Phillip C. DeMio, M.D., Biomedical Care; Richard Jones, Co-Occurring Disorders; and Gina Calhoun on Recovery.

FREE for all ATTENDEES

Registration Information for Attendees and Exhibitors coming soon!
For more information, please call (724) 962-8032.



Nominate an Exceptional Parent, Caregiver or Individual

To acknowledge VBH-PA members' journeys in the behavioral health system, Value Behavioral Health of Pennsylvania, Inc. (VBH-PA) will publicly acknowledge HealthChoices members from Crawford, Mercer and Venango Counties who have demonstrated courage, creativity and leadership in their journey. Two awards from each County will be presented. One VBH-PA member will receive an award for Adult Services and the other award will be given to a Family member(s) or Caregiver of a VBH child or adolescent who has received Children Services. **Please use the nomination application attached to this newsletter to nominate an Exceptional Parent, Caregiver or Individual today!**

Feel free to contact **Shelley Thomas** at (724) 962-8032 or by email at shelley.thomas@valueoptions.com if you have any questions.

Value Behavioral Health of PA Crawford, Mercer and Venango County (NW3)

“Exceptional Individual/Parent Award”

2010 Nomination Form



Please HELP US:

To acknowledge VBH members’ journey in the behavioral health system, Value Behavioral Health of Pennsylvania, Inc. (VBH-PA) will publicly acknowledge HealthChoices members from Crawford, Mercer and Venango Counties who have demonstrated courage, creativity and leadership in their journey. Two awards from each County will be presented. One VBH member will receive an award for Adult Services and the other award will be given to a Family member(s) or Caregiver of a VBH child or adolescent who has received Children Services.

An acknowledgement in the form of a beautifully designed plaque that will be customized and presented during the luncheon on November 10, 2010 at the 3rd Annual **“Acknowledging the Journey” VBH Member Forum at the Radisson in West Middlesex, PA.** VBH-PA respects and values the efforts of our HealthChoices members. The purpose of the “Exceptional Individual/Parent Award” is to acknowledge members who are actively engaged in their journey and to encourage other members in theirs. **Hope, Success, Wellness and Recovery will be the underlying theme of the “Acknowledging the Journey” Member Forum.**

Please nominate at least one HealthChoices member residing in one of the NW3 counties (**Crawford, Mercer or Venango**) who you feel is deserving of this type of recognition. **The deadline to nominate is October 15, 2010.** Please write as much as you can because your nomination will be used in the remarks made to announce the person being honored. Our award ceremony is more enjoyable if the remarks include some personal touches or stories that are inspiring to those in the audience. Attach additional pages if you wish. Thank you for taking the time to assist us in this exciting event.

You may type your own information on a separate sheet to nominate as long as each of the sections listed within this form are answered in your nomination submission. You may also use additional sheets to this nomination form if you run out of space.

Nominee Information (please print or type): Crawford County nomination
(must be a VBH-PA member) Mercer County nomination
 Venango County nomination

Adult Services nomination _____ **OR** **Parent/Caregiver of Children Services nomination** _____

Nomination Name: _____

If this is a Parent/Caregiver nomination, please provide the name and birth date of the HealthChoices (Value Behavioral Health) child/adolescent.

Child/Adolescent Name: _____ **Date of Birth:** _____

Address: _____ **City:** _____

Zip Code: _____ **Telephone Number:** _____

Email address: _____

Person Nominating Name: _____

Address: _____ City: _____

Zip Code: _____ Telephone Number: _____

Email Address: _____

How do you know this nominee?

(Use additional sheets as necessary)

Examples of services/program that the nominee has been involved with (if known-not required if you don't know)

Why do you feel this person is worthy of receiving the "Exceptional Adult Individual/Parent/Caregiver Award"?

How has this nominee positively impacted others (i.e., other children, families, peers, Mental Health Association, Drop-In Centers, Church, Salvation Army, etc.), if not included within the narrative above.

THANK YOU FOR TAKING THE TIME TO "ACKNOWLEDGE THE JOURNEY!"

Please return this information to Shelley Thomas, PE&O Coordinator, VBH Hermitage Office, 1485 North Hermitage Road, Hermitage, PA 16148 or FAX Form to 724-962-8042 or email Shelley at shelley.thomas@valueoptions.com. If you have any questions regarding this nomination form you may also call Shelley Thomas at 724-962-8032.

DEADLINE TO NOMINATE IS OCTOBER 15, 2010