



ValueAdded

This is the 151st issue of our VBH-PA information update. These updates will be 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.

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November 2011

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

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Providers Must Screen Employees and Contracts on a Monthly Basis

PA DPW MA Bulletin 99-11-05: *Provider Screening of Employees and Contractors for Exclusion from Participation in Federal Health Care Programs and the Effect of Exclusion on Participation.*

As of August 15 2011, MA Bulletin 99-11-05 **requires** all providers to screen employees and contractors on a monthly basis and at the time of hire. Subsequently, MA Bulletin 99-11-05 and VBH-PA **requires** all providers to include and document the following processes with the providers' compliance programs:

1. Develop policies and procedures for screening of all employees and contractors (both individuals and entities), at time of hire or contracting; and, thereafter, on an ongoing monthly basis to determine if they have been excluded from participation in federal health care program
2. Use the required the following databases to screen:
 - a. OIG LEIE: <http://oig.hhs.gov/exclusions/index.asp>
 - b. GSA EPLS: <https://www.epls.gov/>
 - c. DPW Medichex: <http://www.dpw.state.pa.us/learnaboutdpw/fraudandabuse/medichexprecludedproviderslist/index.htm>
3. Immediately self-report any discovered exclusion of an employee or contractor, either an individual or entity, to VBH-PA with the self-audit form under reporting procedures at http://www.vbh-pa.com/fraud_abuse.htm and to the Bureau of Program Integrity, with the MA Provider Compliance form at <http://www.dpw.state.pa.us/learnaboutdpw/fraudandabuse/maprovidercompliancehotlinerresponseform/index.htm>.
4. Develop and maintain auditable documentation of screening efforts, including for each employee: dates the screenings were performed and the source data checked and its date of most recent update.
5. Periodically conduct self-audits to determine compliance with this requirement.

VBH-PA will monitor providers for compliance with MA Bulletin 99-11-05 as a component of the VBH-PA Full Compliance Audit program. Additionally, VBH-PA will recover any overpayments and may consider removing providers from networks if compliance with MA Bulletin 99-11-05 is not maintained.

For questions related to MA Bulletin 99-11-05, please contact Melissa Hooks, VBH-PA Compliance Director via email at Melissa.Hooks@valueoptions.com.

Provider Self-Audit and Referrals to the Compliance Department at VBH-PA

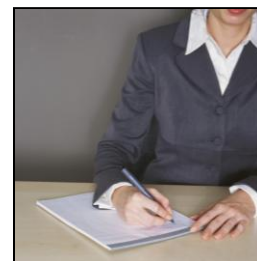
The Commonwealth of Pennsylvania requires that all providers that receive payments from the Department of Public Welfare (DPW) for Medicaid recipients conduct self-audits and make referrals for the claim overpayments to be adjusted. The self-audits and referrals are important because providers are able to report and adjust claims without being subject to monetary and criminal penalties. DPW states the following about self-audits and referrals:

*"When, either in the course of regular business or by using one of the options specified below, providers believe that they have been inappropriately paid, they should promptly contact the [Managed Care Organization] or Bureau of Program Integrity (BPI) to expedite the return of the inappropriate payment. Providers benefit from self audits in several ways. By coming forward and identifying instances of possible noncompliance, the provider, rather than DPW, is conducting the review of his/her records. Further, and perhaps most importantly, when the provider properly identifies an inappropriate payment and reports it to DPW, and the acts underlying such conduct are not fraudulent, **DPW will not seek double damages, but will accept repayment without penalty.**"*

VBH-PA has updated the **Provider Self-Audit and Referral Form** which is located on the Fraud, Waste and Abuse webpage under Reporting Procedures. The direct link is: http://www.vbh-pa.com/fraud/pdfs/Provider_Self_Audit_Referral_Form.pdf.

To complete a Provider Self-Audit and Referral, please complete the following:

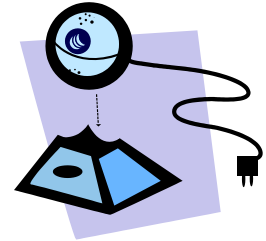
1. Go to http://www.vbh-pa.com/fraud_abuse.htm
2. Complete the **Provider Self-Audit and Referral Form**
3. Complete a spreadsheet of the claims to be adjusted.
 - The spreadsheet should contain the claims to be adjusted and the following information for each claim:
 - Member Name
 - Medical Assistance #
 - Date of Service
 - Service Code
 - Claim Number
 - Paid Amount
 - Units to be Recovered
4. Submit form and spreadsheet to Sandra Leisifer, Fraud & Abuse Coordinator at VBH-PA by Fax or Email. **Fax Number is** (724) 744-6303; **Email Address:** Sandra.Leisifer@valueoptions.com.



Fall 2011 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** to participants and there are **NO** fees for continuing education credits.

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. You are welcome to attend!



Upcoming Fall 2011 Videoconferences:

November 9

Twitter While You Work: The Legal Impact of Social Media, Networking and Cloud Computing in the Workplace

December 14

High Suicidal Risk Assessment and Management Across the Lifespan

For CEU information and complete descriptions of these trainings, please click on this link:

http://www.vbh-pa.com/provider/training/Video_Conference_Fall_2011.pdf

Registration:

To register for one or all of these trainings, please visit the ValueOptions Provider Trainings Web page at: <https://www.valueoptions.com/forumRegistration>. Select **Pennsylvania** from the state dropdown list, (DO NOT change any of the other fields) and then click on **Select**. Scroll down the screen and put a check mark in the box next to the event(s) and then hit **Register**. Phone-in registrations WILL NOT be accepted.

Other Sites:

VBH-PA is one of many sites offering this opportunity. Please visit <http://www.wpic.pitt.edu/oerp/video/ParticipatingSites.pdf> to view all locations offering this videoconference series. To register with another location, please contact the coordinator for that site.

WPIC Information:

For more information about these videoconferences, or for upcoming WPIC/OERP programs, visit the OERP website at <http://www.wpic.pitt.edu/oerp>.

If you are interested in having your agency become a site for the series or for more information, please contact Joanne Slappo, Ph.D., Program Coordinator, at 412-802-6918 or slappojm@upmc.edu.

Providers,
please post
in an area
accessible
to your
patients.

Shaken Baby Syndrome

Shaken Baby Syndrome (SBS) is the result of a traumatic brain injury. SBS happens when a baby is:

- Shaken
- Dropped
- Thrown
- Caused head injury in some other way

SBS is the leading cause of child abuse deaths in the United States. SBS is most commonly found in babies from 3 to 8 months of age. Babies up to 4 months of age are at the greatest risk for being shaken. SBS can occur in children up to five years of age.

A baby's neck muscles cannot manage shaking or impact to the head. This can cause a baby's brain to swell, bruise and bleed. The result is SBS.

Parents or caregivers may shake or strike a baby because they are frustrated or exhausted. They may not know how to deal with a crying baby. They may not understand child development or how to comfort a baby. They may have learned the behavior from someone else.

SBS can affect children in many ways. Babies with SBS may be irritable or not able to eat much. Some may not stop crying. SBS can also cause learning delays, blindness, hearing problems or death.

Other SBS symptoms may include:

- Sleep pattern changes
- Difficulty in waking up
- Seizures
- Motor skill issues
- Muscle spasms
- Cerebral Palsy

Parents or caregivers who feel at a loss for ways to cope with an upset baby can call a friend or relative to ask for help or just to talk.

Parents or caregivers may also call the:

- Crying Baby Hotline at 1-866-243-2229
- The Brain Injury Helpline at 1-866-412-4755

To talk to someone about domestic abuse, call the **National Domestic Violence Hotline**

1-800-799-7233 (SAFE)

1-800-787-3224 (TTY for the Deaf)

Or visit: www.ndvh.org

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Síndrome del niño maltratado

El síndrome del niño maltratado, también conocido como síndrome del bebé sacudido (por sus siglas en inglés, SBS), es el resultado de un traumatismo cerebral y la cabeza. El SBS ocurre cuando un bebé:

- es sacudido
- se deja caer
- es arrojado o tirado
- recibió lesiones en la cabeza por otra razón

El SBS es la principal causa de muerte por maltrato físico infantil en los Estados Unidos. El SBS ocurre con mayor frecuencia en bebés de entre 3 y 8 meses de edad. El riesgo de ser sacudidos es mayor para los bebés hasta los 4 meses de edad. El SBS puede ocurrir en niños de hasta cinco años de edad.

Los músculos del cuello de un bebé no pueden soportar las sacudidas o golpes en la cabeza. Esto puede causar inflamación, hematomas y sangrado dentro del cerebro del bebé. El resultado es el SBS.

Los padres o cuidadores de un bebé pueden llegar a sacudir o golpear a un bebé porque se sienten frustrados o están agotados. Es posible que no sepan qué hacer cuando un bebé no para de llorar. Quizás no sepan cómo consolar a un bebé o no entiendan sobre el desarrollo infantil. A lo mejor aprendieron ese comportamiento de otra persona.

El SBS puede afectar a los niños de muchas maneras. Es posible que los bebés con SBS sean irritables o que no puedan comer mucho. Algunos de ellos no pararán de llorar. El SBS también puede causar demoras en el aprendizaje, ceguera, problemas auditivos o la muerte.

Otros síntomas del SBS pueden incluir:

- Cambios en los patrones de sueño
- Dificultad para despertarse
- Convulsiones
- Problemas motrices
- Espasmos o contracciones musculares
- Parálisis cerebral

Los padres o cuidadores que no sepan qué hacer con un bebé molesto o alterado pueden llamar a algún amigo o pariente para pedir ayuda o simplemente para desahogarse.

Los padres o cuidadores también pueden llamar a:

- La línea directa bebé que llora (Crying Baby Hotline) al 1-866-243-2229
- La línea de ayuda para lesiones cerebrales (Brain Injury Helpline) al 1-866-412-4755

Para hablar con alguien sobre el abuso doméstico, llame a la línea directa nacional para violencia doméstica (National Domestic Violence Hotline) 1-800-799-7233 (SAFE) or 1-800-787-3224 (TTY para sordos)
O visite: www.ndvh.org

Outpatient Group Therapy Best Practice Guideline

The VBH-PA Clinical Advisory Committee recommends that the best practice guideline for Outpatient Group Therapy involves no more than two (2) hours of group therapy provided per day, or four (4) hours of group therapy provided per week. For situations where additional hours of group therapy are clinically indicated, the VBH-PA Care Manager should be made aware of the situation. Periodically, VBH-PA will monitor adherence to this best practice guideline by conducting provider chart audits for this service.

!! Attention Methadone Maintenance Providers !!

Effective immediately, providers of methadone maintenance services should submit claims with place of service code 57; non-residential substance abuse treatment facility. This will be a mandatory requirement as of January 1, 2012.

VBH-PA Staff Update



Jody Zimmerman started on September 12, 2011, as a **Care Manager** in the Clinical Department. Jody comes to VBH-PA from Excela Health Westmoreland in Greensburg, where she was a staff nurse. Prior to Excela, she worked at Monsour Medical Center in Jeannette as a certified addiction practitioner.

Jeff Braid started on October 10, 2011, as a **Provider Field Coordinator** in charge of **Performance Based Contracting**, in the Provider Relations Department. Jeff comes to VBH-PA from Family Services of Western PA where he was a Clinical Team Leader developing program initiatives and leading clinical and education staff in implementing therapeutic strategies.

Welcome Jody and Jeff!

VBH-PA Staff On the Move



James Makin is now a **Data Analyst II**, effective September 25, 2011. *Congratulations, James!*

Click on the link below to be added to the *ValueAdded* email distribution list: http://www.vbh-pa.com/provider/prv_information.htm#newsletters

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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