

ValueAdded

This is the 201st issue of our VBH-PA information update. These updates will be emailed to network providers monthly. Please feel free to share our newsletter with others, and be sure your appropriate clinical and financial staffs receive copies.

Coordinated Care Between Behavioral Health and Physical Health

According to a report by the National Association of State Mental Health Program Directors, published in October 2006, individuals who have been diagnosed with severe and persistent mental illness (SPMI) die 25 years earlier than those without serious mental illness. This alarming disparity signals the need to explore why this disparity exists and to develop interventions in an effort to mitigate and change the life expectancy trajectory for those individuals who have been diagnosed with SPMI.

When reviewing why the mortality rate was so much higher in those individuals diagnosed with SPMI, it was found that there are higher rates of hypertension, diabetes, obesity, and cardiovascular diseases. In addition, other contributing factors that were seen in a higher proportion in those individuals with SPMI included lower physical activity, high rates of smoking, and side effects of psychotropic medications which can contribute to health concerns. Research has found that routine health promotion activities, primary care screenings, monitoring and treatment are extremely effective in improving health outcomes.

After discussions, surveys, and projects within the commonwealth of Pennsylvania, it appeared that some of the services that members receive are provided in silos. There appeared to be minimal interactions between the silos which can lead to fragmented and disjointed care. Two of those silos are physical health care and behavioral health care.

In an effort to increase coordination of care between physical health plans and behavioral health plans, numerous efforts led by OMHSAS and OMAP are taking place. These interventions include notifications to the physical health plans about admissions of their members to inpatient psychiatric units, notifications to the behavioral health plans about the hospital admissions for physical health concerns, stratification of members into high need and low need from both a behavioral health and physical health perspective, and integrated rounds with the physical health plans to discuss mental health concerns to develop integrated care plans with the MCOs.

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Coordinated Care Between Behavioral Health and Physical Health (continued)

VBH-PA is extremely supportive of these efforts to further integrate care between the physical health providers and the behavioral health providers for our members. VBH-PA is gathering contact information for each of the physical health plans for their complex care program. This information will be given to our providers in case behavioral health providers would like to contact the physical health plans to discuss their programs or to make a referral to the complex care program within the physical health plans. In addition, VBH-PA will be reaching out to our hospitals in reference to having releases signed so that we may share with our providers information that is gathered from the physical health MCOs. VBH-PA will be reaching out to each hospital to answer any questions about the release. The release form can be found on the Provider Forms webpage on our website. Here's the direct link: http://www.vbh-pa.com/provider/info/clinical_ut/Integrated-Care-Release-of-Information.pdf.

VBH-PA continues to recognize that confidentiality is very important to our members and all interactions will be governed by the guidelines published by Department of Human Services. For further information on confidentiality guidelines for the sharing of information between the physical health MCO and behavioral health MCO as set forth by Department of Human Services, please see this link: http://www.chcs.org/media/DPW_Confidentiality_Guidance.pdf.

We would greatly appreciate your support in these efforts to further integrate care so that our members with SPMI may not have the current poor prognosis when looking at life expectancy. If there are any suggestions you may have to further integrate care or if you would like to have additional information on this project, please feel free to contact Lisa Kugler, Psy.D., Vice President of Clinical Services, Value Behavioral Health of Pennsylvania at lisa.kugler@beaconhealthoptions.com.

Can Credentialing Be Made Easier? Yes!

Attention independent and group providers! Value Behavioral Health of Pennsylvania is constantly looking for ways to make the credentialing and recredentialing process a bit less painful. For those private and group practitioners, we invite you to explore using The Council for Affordable Quality Healthcare's (CAQH®) Universal Provider Datasource®. CAQH is a nonprofit alliance of health plans and trade associations designed to simplify healthcare administration. Providers can utilize CAQH's online Universal Provider Datasource for credentialing and recredentialing purposes. Check it out!

If you have specific questions, below are helpful links regarding CAQH:

Beacon Health Options CAQH Frequently Asked Questions

<http://www.valueoptions.com/providers/Files/pdfs/CAQH-Provider-Credentialing-Recredentialing-FAQ.pdf>

CAQH.org Fact Sheet: http://www.caqh.org/sites/default/files/solutions/proview/marketing/caqh_fact_sheet_6.30.15b.pdf?token=30BvmFwt



[Upcoming RTF Summits](#)

Friday, April 29th
9:00 a.m.—11:00 a.m.

Friday, October 7th
9:00 a.m.—11:00 a.m.

Location:
Doubletree by Hilton
910 Sheraton Drive,
Mars, PA 16046



Case Conceptualization Tool Follow-Up

VBH-PA recognizes that solid child and adolescent evaluations are the cornerstone of treatment. Evaluations are essential when outlining the goals, struggles and strengths of members. The formulation of case conceptualization became a focal point the past two years during evaluator meetings and discussions.

After extensive discussions with oversight entities, counties, providers and consumers, a new tool was developed to be utilized in conjunction with the CCASBE-LD. The new tool that was developed was the Case Conceptualization Tool (CCT). During 2015, this tool was piloted in Greene, Fayette, Cambria and Beaver counties for the initial phase of the project.

Thirteen evaluators submitted a total of 22 evaluations in the case conceptualization pilot program. Of those 22 evaluations, 17 scored below the performance goal of 85%. However, according to the self-audit scores, 21 of the evaluations met the performance standards. All evaluators were sent the VBH-PA scoring of their evaluations. All evaluators were offered consultation sessions to discuss any discrepancies and to discuss the results. Several evaluators reached out to discuss the results. These sessions will continue throughout the first quarter of 2016.

The VBH-PA average per the pilot program on the Case Conceptualization Tool was 60% with a range of scores from 18%-90%. The question that was most commonly answered in an affirmative way from the VBH-PA review was that the member's symptoms and problems were identified. On 95% of the evaluations scored, this question was answered "yes". From the Case Conceptualization Tool, the question, "The appropriate level of care and types of services prescribed," was only answered "yes" on 9% of the evaluations that were scored. VBH-PA is preparing to discuss these results with counties, oversight, providers and with the evaluators.

Phase two of the pilot will begin in Beaver County the first half of 2016. Results from phase one and phase two of the pilot will guide next steps in the utilization of the case conceptualization tool.

Register Now!

Value Behavioral Health of Pennsylvania

Presents

Realizing Recovery: Keys to Success

16th Annual Adult Recovery Forum

Friday, April 15, 2016

8:45 a.m. to 3:15 p.m.

Pittsburgh Marriott North

Cranberry Township



**Realizing Recovery:
Keys to Success**
Register Now!

Register Now!

Join us on Friday, April 15, 2016 at the Pittsburgh Marriott North in Cranberry Township for the 16th Annual Adult Recovery Forum, *Realizing Recovery: Keys to Success*. Enjoy two inspirational plenary sessions, a wide array of exhibits and give-a-ways, and the Adult Recovery Awards Ceremony. There is no charge to attend the forum and lunch is included. Please view the [2016 Adult Recovery Forum Registration Brochure](#) for more information. We are looking forward to seeing you at this year's forum!

Upcoming Trainings

View all of our upcoming trainings on the Provider Trainings webpage: http://www.vbh-pa.com/provider/prv_trn.htm.

New trainings include:

- [Release of Information for Behavioral Health/Physical Health Sharing](#)
- [Crisis Prevention Planning and Collaboration](#)
- [BHRS Summits](#)
- [2016 Annual Fraud and Abuse Training](#)
Mandatory for all Providers

Have you seen our new logo? Value Behavioral Health of Pennsylvania is a Beacon Health Options Company. You'll see our new parent company in the tagline of our logo. The merger of Beacon Health Strategies and ValueOptions brings together two mission-driven companies that share similar visions—to improve the health and wellbeing of individuals coping with mental health and substance use conditions. We make this vision a reality through recovery-focused programs and effective partnerships with you, our network providers.



Health, Money and Domestic Abuse

Domestic abuse can cause health problems for victims. With health problems a victim may need money to pay for a doctor. That person may need money for medicine or to travel to a health clinic. Abusers sometimes may deny money or resources to take care of health problems or to take care of children.

People with health problems from abuse may need care right away. A person may also live with health problems from abuse for a long time. These may include:

- Broken bones or teeth
- Bruises or bleeding
- Stab or gun wound
- Head injury
- Anxiety or depression
- Eating disorder
- Stomach or heart problems
- Drug or alcohol use
- Unplanned pregnancy
- Sexually transmitted infection



An abuser may keep a person from working so they may not be able to get health insurance. An abuser may also get a person fired from a job and this may lead to bad credit. A victim with out a job may feel trapped and unable to move into a safe home. All of this means an abused person may need money or health care but cannot get it.

Not allowing a person one or all of these things is abuse:

- Doctor
- Medicine
- Money
- Job
- A safe home
- Good credit
- Education

The Affordable Care Act says that a victim of domestic abuse must not be denied health insurance. The Allstate Foundation has online learning tools to help people who are survivors of abuse and for those in need of money or job search skills.

To find the domestic abuse program nearest you, visit <http://pcadv.org> and click on *Find Help* or use the *Find Help* map on the home page.

For more information on the Affordable Care Act, visit <https://www.healthcare.gov/get-coverage/>

To find the Allstate Foundation online learning tool, visit <http://www.clicktoempower.org>

To reach the National Domestic Violence Hotline, call 1-800-799-SAFE (7233).

For TTY 1-800-787-3224.



2016 WPIC Videoconferences *Winter Series!*

VBH-PA is pleased to announce that our Engagement Center will be a videoconferencing site for the WPIC Office of Education and Regional Programming 2016 winter videoconference series. These programs are free of charge and there are NO fees for continuing education credits. The videoconferences are held from 1:00 p.m. to 3:00 p.m. in the Walnut Room at VBH-PA's Trafford Engagement Center. For CEU information, registration information and complete descriptions of these trainings, please view the "Upcoming Trainings" section on our [Provider Training](#) webpage.

Upcoming Videoconferences*

- **March 9**—*Crisis Intervention*
- **March 23**—*Mood Dysregulation Disorders in Children and Adolescents*
- **April 13**—*Mental Illness and Violence*
- **April 27**—*Executive Function: A Neurodevelopmental Perspective*

Registration:

To register for these trainings, please visit the ValueOptions® [Provider Trainings Web page](#). 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.

***Please Note:** These videoconferences are NOT webinars. **You must be in attendance at the Trafford Engagement Center to view these videoconferences.** VBH-PA is one of many sites offering this opportunity. Please click [here](#) to view all locations offering this videoconference series. To register with another location, please contact the coordinator for that site.

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@beaconhealthoptions.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
www.vbh-pa.com