Dear BHACA Community,

Happy Mental Health Month!

BHACA Blast #61 Headlines:

Success Story

We are delighted to announce that our efforts in working with billing staff resulted in helping one agency deal with a specific challenge they had in working with one healthcare plan. This success was due in part to the relationships BHACA staff members have been able to develop with key members at several healthcare plans. These relationships helped to reopen a dialogue that has thus far been unsuccessful and resulted in all parties working together to come up with a solution. Don't forget that BHACA has a networking group for billing staff who have taken the BHACA Billing, Collecting, and Credentialing classes and those staff members should feel free to call upon the BHACA staff and their networking group with any questions or concerns. We may not always be as successful as we were in this situation, but as this case shows, the relationships that we have formed with several healthcare plans are proving to be invaluable. The networking listserv address is nbhpbillingworkgroup@bhaca.simplelists.com.

Keeping You Informed

As you will notice, several items in this Blast are related to the Medicare Access & CHIP Reauthorization Act of 2015 (MACRA). Information is coming out very quickly regarding the many aspects of this new Medicare payment plan. We are in the process of creating a page on the NBHP website that will be strictly devoted to MACRA. We will continue to add items to each Blast as soon as we have seen them, in addition to listing all resources on the new website page. Check the next Blast for an announcement that the page has gone live.

All the best,

The BHACA Team

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BHACA: Integrated Health Care (IHC)

• Shout-out for Integrated Health Care in NEJM Catalyst Care Redesign Survey — In a recent survey of the New England Journal of Medicine (NEJM) Catalyst Insights Council, respondents cited "investing in behavioral health services alongside physical health services as the clinical practice change most likely to

improve the health of communities." It's good to see the need for integrated health care reinforced out in the world! To read more, please click here.

• Webinar – Finding Common Ground: Collaborating with Payers to Support Integration

Date & Time: Thursday, May 19, 2:00 PM Central time

To Register: Click here

Organizer: SAMHSA-HRSA Center for Integrated Health Solutions

Description:

Integrated care is more than a partnership between primary and behavioral health care agencies – it is also a partnership with payers. By engaging in meaningful conversations about the long-term goals of integrating primary and behavioral health care, providers and payers can create mutually beneficial solutions that support cost savings and improved health. How do you find common ground with potential partners to achieve your integrated care goals? Join this webinar to learn the key strategies to connecting with payers and establishing meaningful partnerships. Get tips and insights from a payer and behavioral health providers on how they established partnerships to support behavioral health and primary care integration. After this webinar, participants will:

- Understand key messages needed to establish meaningful relationships with payers.
- Have practical strategies to meet payers where they are and leverage these relationships to support integrated care initiatives.
- Recognize the steps to how one behavioral health organization successfully engaged payers.
- o Identify key measures that demonstrate the return on investment of integrated care.

BHACA: Choosing a Certified Electronic Health Record System

- *Is CMS looking to replace meaningful use for hospitals?* The recently proposed MACRA rule would reimburse physicians based on their prowess at delivering better quality, lowering costs, improving clinical practice and, crucially, "advancing care information." The new Advancing Care Information program would effectively replace the current meaningful use program for Medicare physician practices but not for hospitals. Nonetheless, recent comments from CMS suggest hospitals could also soon expect some changes related to meaningful use. To view, please click here.
- A deep dive on the 'overwhelmingly complex' MACRA proposed rule:
 Here is everything you need to know from an IT perspective about MACRA. This article covers proposed rules, who the new rules affect, and when they will take effect. In addition, this article also discusses new measurement options and ideas for next steps. To view, please click here.

BHACA: Maximizing Third Party Funding Streams Revenue—Resources Related to Insurance Billing and Credentialing

- **Big Win for Texas, HHSC Receives Extension for 1115 Waiver:** The Health and Human Services Commission and the Centers for Medicare and Medicaid Services have agreed to extend a state and federal partnership that finds innovative ways to deliver healthcare. The 1115 Waiver, which funds Uncompensated Care and the Delivery System Reform Incentive Payment Program (DSRIP), was extended 15 months under an agreement between the health agency and CMS. The agreement will take the program through December 2017 and will maintain its current funding. To view, please click here.
- 3 Part Webinar Series Healthcare Transformation and Shifting to Value Payments

Date & Time: Tuesday, May 17, 1:00 PM Central time

To Register: Click here Organizer: HIMSS

Description: Moving care delivery toward quality and value-based reimbursement models is a top priority for government and healthcare communities, and in this rapidly changing healthcare landscape, new regulations must be implemented to achieve programmatic and payment reform. Let our experts help you navigate the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Notice of Proposed Rule Making (NPRM), and get the tools you need to move into the next phase of participation for the Quality Payment Program, Merit-Based Incentive Payment System (MIPS), and alternative payment models (APMs).

This three-part webinar series takes place May 17 and 25, and ends on June 1.

**You will only need to register once for access to all three webinars in the series.

• Reminder - Deadline extended: Providers must be re-enrolled in Medicaid by Sept. 24: Texas Medicaid must comply with federal regulations requiring all providers to re-enroll in the Medicaid program every three to five years. Medicaid providers enrolled before Jan. 1, 2013 must be fully re-enrolled by Sept. 24. The original re-validation deadline was March 24 and was extended by the Centers for Medicare and Medicaid Services to allow states additional time to process provider applications.

To be considered fully re-enrolled, providers must submit a completed re-enrollment application and receive notification from TMHP that their application has been approved. Providers must submit a separate re-enrollment application for each active Texas Medicaid Identifier Suffix. Application processing times will vary based on accuracy and complexity of the application. To avoid disenrollment and to allow sufficient time for application processing and to avoid a lapse in enrollment status, providers are encouraged to begin this process immediately.

To avoid potential disruption in payment, a completed re-enrollment application must be received on or before June 17 in order to be re-validated by Sept. 24. Texas Medicaid cannot guarantee applications submitted after June 17 will be completely processed by the Sept. 24 deadline. If final approval on an application received after June 17 is not completed by Sept. 24, the provider will be dis-enrolled from Texas Medicaid. To view, please click here.

BHACA: Outcome-Based Evaluation

- Administration takes first step to implement legislation modernizing how Medicare pays physicians for quality: The Department of Health and Human Services issued a proposal to align and modernize how Medicare payments are tied to the cost and quality of patient care for hundreds of thousands of doctors and other clinicians. The Notice of Proposed Rulemaking is a first step in implementing certain provisions of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). This legislation supported by a bipartisan majority and stakeholders such as patient groups and medical associations ended more than a decade of last-minute fixes and potential payment cliffs for Medicare doctors and clinicians, while making numerous improvements to America's health care system. To view, please click here.
- On Demand Webinar Overview of the MACRA NPRM

Date & Time: On Demand **To Register:** Click here

Organizer: CMS

Description: The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) changes the way Medicare rewards clinicians for providing quality care by streamlining multiple quality programs into a new Quality Payment Program tied to Part B Fee-For-Service payments. This webinar will provide an overview of the Merit-Based Incentive Payment System (MIPS) and Alternative Payment Model (APM) Incentive under the proposed rule.

BHACA: Additional Items of General Interest

• Unique Opportunity in Houston – Broadband Prescriptions for Mental Health: A Policy Conference

Date & Time: Wednesday, May 18, 8:30 AM Central time

Location: Bates Law Building, University of Houston Law Center, 4604 Calhoun Rd.,

Houston, TX 77204-6060

Description: The Federal Communications Commission's Connect2Health Task Force will travel to Houston, Texas to highlight how broadband-enabled health technologies can improve access to mental health care and to discuss associated policy issues. Hosted by the University of Houston Law Center's Health Law & Policy Institute, Broadband Prescriptions for Mental Health will explore how connected environments can be used to improve mental health and will spotlight the University of Texas Rio Grande Valley School of Medicine's efforts in this area.

The event is part of the **Connect2HealthFCC Task Force's "Beyond the Beltway Series"** to reach out broadly about the transformative power of broadband technologies and next-generation communications services to improve access to health and care services throughout the country, especially in rural and underserved areas. The Task Force has held previous Beyond the Beltway events in Charlottesville, Virginia; Jackson and Ruleville, Mississippi; Miami and Jacksonville, Florida; Cleveland, Ohio; and Detroit, Michigan.

The conference will feature FCC Commissioner Mignon Clyburn; University of Houston Law Center Dean Leonard M. Baynes; Former Astronaut and CEO of Vesalius Ventures Dr. Bernard A. Harris, Jr.; University of Texas Rio Grande Valley School of Medicine Dean Francisco Fernandez; and the Connect2HealthFCC Task Force, among others. Topics and demonstrations will include the role of broadband-enabled mental health solutions in providing greater access for underserved communities, the impact of connected environments on behavioral health and social isolation, other cutting-edge applications in telepsychiatry, and more.

For More Information & Registration: See the FCC event page and UH Law Ctr. event page.

About BHACA: The Behavioral Health Affordable Care Act (BHACA) Initiative is a major collaborative endeavor of the Network of Behavioral Health Providers (NBHP) and Mental Health America of Greater Houston (MHA) designed to support Greater Houston area mental health and substance use providers in responding to the Patient Protection and Affordable Care Act and other recent healthcare reforms across four domains: (1) enhancing and increasing the delivery of integrated health care (IHC), (2) maximizing third party funding streams revenue, (3) adopting certified electronic health record (EHR) systems, and (4) developing outcome-based evaluations. The BHACA Initiative is generously funded by Houston Endowment Inc., The Meadows Foundation, the United Way of Greater Houston Community Response Fund, and the Rockwell Fund.