Dear BHACA Community,

BHACA Blast #66 Headlines:

BHACA Event: Being a Clinician in a Legal World

Event Overview: Our clinical colleagues have told us that an area in which they would really like more training is that amorphous and often nerve-racking intersection of clinical practice and the law. In response, this event is designed to enhance the knowledge of all clinical practitioners on a wide range of legal issues including confidentiality, medical records, subpoenas, testifying, social media, liability, and board complaints. We plan an array of interactive sessions with opportunity to bring your own concerns (confidentially and anonymously) to the discussion.

Location: United Way of Greater Houston (50 Waugh Drive, Houston, Texas 77007) **Date & Time:** Thursday, August 18, 2016, 11:30am to 3:45pm

CEU Credit: 3 hours of ethics CEUs available for social workers, LMFTs, LPCs, and LCDCs

Cost: Pre-event pricing is \$25 for members of the Network of Behavioral Health Providers, \$45 for nonmembers. Day of the event pricing is \$30 for members of the Network of Behavioral Health Providers and \$50 for nonmembers. Credit cards, cash and checks made payable to the Network of Behavioral Health Providers will be accepted both in advance and at the door. All pre-event payments must be received by August 15, 2016. **To Learn More and to RSVP**: click here

All the best,

The BHACA Team

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NBHP website – www.nbhp.org MHA website – www.mhahouston.org

BHACA: Integrated Health Care (IHC)

 Webinar – Quality Improvement in Integrated Care: A Practical Introduction

Date & Time: Wednesday, August 24, 11:00 AM Central time **To Register:** Click here

Organizer: Collaborative Family Healthcare Association (CFHA) Research & Evaluation Committee

Presenter: Joseph R. Grasso, PhD, Postdoctoral Research Fellow & VA Quality Scholar, San Francisco VA Medical Center

Description:

Quality improvement (QI) can make clinical service delivery safer, more cost effective, more time efficient, and more patient centered, but many of us still don't understand how to do QI or what it entails. A basic understanding of quality improvement is

rapidly becoming a requirement for medical providers and allied health professionals alike. This presentation will provide an introduction to the fundamentals of QI and will also review the unique ways in which QI can be applied to integrated care settings. We'll also use case-based examples to help illustrate how QI has been used to create novel integrated care models and enhance existing ones.

- New Article "Behavioral Health Integration in Acute Medical Settings: An Opportunity to Improve Outcomes and Reduce Costs" (Joint Commission Journal on Quality and Patient Safety, 2016 Jul; 42(7): 331-336) – Psychiatric comorbidities in acute medical settings are prevalent, but compared to ambulatory care, there are few models of integration of behavioral health. This article describes suggested barriers to better integration, core components of successful approaches, and the business case for this model of care based on a non-systemic literature review and expert interviews. To view the article abstract, please click here. Unfortunately, the full article is not freely available online, but a copy can be purchased at the link above.
- New Article "Avoiding the Unintended Consequences of Screening for Social Determinants of Health" (JAMA, published online June 27, 2016) – Addressing social determinants of health can be an important aspect of integrated care services that consider all of a person's needs. To access this recent article from JAMA (*The Journal of the American Medical Association*), please click here. The full text of the article is available free online!
- *IHI Virtual Training Behavioral Health Integration: Beyond the Basics* –This five session virtual training series from the Institute for Healthcare Improvement (IHI) begins August 17 and runs through October 12. To view the schedule, content areas, training faculty, etc., please click here. Given IHI's reputation, this promises to be a high quality learning opportunity. Therefore, we thought it worth including here in spite of the \$750 fee to participate. The website does note that a limited number of scholarships are available, so if you are interested but find the fee to be too steep, you may wish to look into that.
- AHRQ Technical Brief Telehealth: Mapping the Evidence for Patient Outcomes from Systematic Reviews – The Agency for Healthcare Research and Quality (AHRQ) has published a new technical brief reviewing the evidence for the use of telehealth in various settings, *including behavioral health and integrated care*. The brief provides detailed information as well as charts summarizing key findings. To view, please click here.

BHACA: Choosing a Certified Electronic Health Record System

• *CMS calls for 90-day reporting in 2016 and easing meaningful use Stage 3 EHR objectives:* Following months of pressure from healthcare providers and EHR vendors to adjust the meaningful use reporting from a full year to a 90-day period, the Centers for Medicare and Medicaid Services joined the chorus. CMS is now calling for clinicians, hospitals, and critical access hospitals to use a 90-day EHR reporting period in 2016 – down from a full calendar year for returning participants in the government's EHR Incentive Program. To view more, please click here.

Webinar – The Digital Era of Forms Management
Date & Time: Thursday, July 28, 11:00 AM Central time
To Register: Click here
Organizer: Health Care IT News
Description: All sizes of healthcare organizations are still inundated with an absurd amount of forms and paperwork. Whether generated internally, brought in by the patient or received from another outside source, managing paper workflow throughout the organization is not only inefficient, but can have an adverse impact on patient care. Even though most healthcare organizations have a fully operational electronic health record today, they are still struggling with transitioning to a "paper-light" environment. Implementing a fully digitized forms management solution can improve process workflow efficiencies, data capture and retrieval, coordination of care, along with the patient experience. Learn best practices from other healthcare organizations who are improving quality of care by reengineering their paper workflow processes into a data-centric environment.

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- **Standardized data needed to unlock IT's potential:** Behavioral healthcare is lagging in the use of health information technology compared to medical/surgical healthcare. The authors of this article emphasize the need for structured and standardized data through the use of industry-standard terminologies, classification and coding systems, information models, methods for data exchange, and healthcare publication databases. For example, DSM-5 is widely used for behavioral diagnosis. As the authors point out, a recent analysis found up to 70% of clinical modifiers and up to 60% of DSM-5-based findings were missing from other commonly used coding systems, and there has been no systemic effort to date to include behavioral health content in the systems. It is critical that there be coordinated efforts between mental health and substance abuse, and between both types of behavioral health organizations and general medical organizations in the care of patients. To view more, please click here.
- 2016 Information Technology Review: Data Influences Care Continuity, Improvement, and Outcomes: Complimentary e-book covering information technology and behavioral health. This well-written e-book highlights healthcare IT specifically as it relates to the area of behavioral health. Topics covered include behavioral health data, continuity of care, and the future of behavioral health IT. To view more, please click here.

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

• *CMS chief Andy Slavitt suggests possible delay in MACRA implementation:* Centers for Medicare and Medicaid Acting Administrator Andy Slavitt told the Senate Finance Committee that the agency would consider delaying the implementation of MACRA, the industry-overhauling bi-partisan legislation set to go into effect January 1 of next year. In his testimony before the Committee, Slavitt conceded that small, rural and independent practices will struggle with the new rules, and a central theme emerging from the public comment period was the need to design a program with special consideration for these groups. He said another central theme from the 4,000 formal comments CMS received asked that CMS look for flexibility to allow physicians, other clinicians and their communities' time to learn about and prepare for the sweeping changes. To view more, please click here.

• Webinar – PQRS Feedback Reports and Informal Review Process for Program Year 2015 Results Call

Date & Time: Wednesday, August 10, 12:30 PM Central time To Register: Click here Organizer: CMS Description: Learn about Physician Quality Reporting System (PQRS) negative payment adjustments, PQRS feedback reports, and the PQRS informal review process for program year 2015 results and 2017 payment adjustment determination.

• **SAMHSA: BHbusiness Plus:** Want to learn how to streamline aspects of your business operations, but don't have the time to participate in a learning network? BHbusiness Plus now offers self-paced **online courses available at no cost and on demand** for providers wishing to engage in independent learning. Should you wish to receive continuing education (CE) credit from NAADAC for the courses, you may choose to do so for a small fee. To view more, please click here.

BHACA: Outcome-Based Evaluation

 Webinar – Patient Engagement: Strategies for improving outcomes and experience while lowering costs
 Date & Time: Tuesday, July 26, 1:00 PM Central time
 To Register: Click here

Organizer: Health Care IT News

Description: Join Abhishek Singh of the Everest Group, Stephanie Bartels, patient engagement solutions leader for Dell Services, and John DuBois, managing director of customer engagement for Dell Services, in a webcast where they will explore the key success factors and challenges of enabling patient engagement in the digital age. Everest Group will share key findings from a recent study on the current state of patient engagement maturity among providers. Stephanie and John will show you how mobile, social, and customer relationship management tools can improve patient outcomes and where to look for ROI in your own strategic plans.

Additional Items of General Interest

• *Clock ticks on financial crisis for Texas hospitals*: The federal government wants Texas to spend taxpayer dollars more efficiently, setting up a showdown that could trigger a financial crisis for the state and its hospitals. The U.S. government's argument is simple: Providing health care coverage to the working poor costs less than

reimbursing hospitals when those same people can't pay their medical bills. The federal Centers for Medicare and Medicaid Services says Texas has the right to refuse to expanded coverage for the poor, but federal taxpayers shouldn't have to underwrite that bad decision. The center has given Texas officials until December 2017 to come up with a better plan, or it will begin phasing out the \$5.5 billion a year that keeps our safety-net hospitals afloat. To view more, please click here.

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.