

Dear BHACA Community,

We hope your New Year continues to be off to a good start!

BHACA Blast #28 Headlines:

- **Thanks for all of your interest in the upcoming CEU class, “Fundamentals of Billing, Collecting, and Credentialing for Behavioral Health,”** which the Network of Behavioral Health Providers is offering in partnership with Houston Community College. **This class is FULL.** We will be in touch when additional registration periods open up for future classes. Thank you.

- **This Week’s BHACA Featured Outcome Measure is the ASSIST (Alcohol, Smoking and Substance Involvement Screening Test).** Please find more information below in the Outcome-Based Evaluation section.

More in a fortnight,

The BHACA Team

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NBHP website – www.nbhp.org

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BHACA: Integrated Health Care (IHC)

- **January Issue of Collaborations Focuses on Funding, Billing, and Reimbursement** – The latest issue of the AIMS Center’s Newsletter, *Collaborations*, available [here](#), provides, among other information, resources related to funding, billing, and reimbursement of integrated health care services. The lead article provides information about **new CMS payment codes in the latest Medicare Physician Fee Schedule that allow providers to bill for chronic care coordination and telehealth services (over the phone) in primary care settings. These services may be performed by behavioral health providers, and depression and anxiety are included in the list of eligible chronic conditions.**

- ***Two New Resources on Integration of Primary Care into Behavioral Health Settings:***

- ***New Milbank Report – Integrating Primary Care into Behavioral Health Settings: What Works for Individuals with Serious Mental Illness*** – This report from the respected Milbank Memorial Fund, released in December 2014, assesses and synthesizes primary evidence sources from the last decade concerning integration of primary care into behavioral health settings. The report provides a summary of outcomes from behavioral health integration models that target populations with serious mental illness and substance use disorder; identification of behavioral health integration models supported by evidence and strategies for implementing these models; and technical assistance resources for integration efforts. The report is available [here](#).
- ***New Brief – Transforming the Workforce to Provide Better Chronic Care: The Role of a Behavioral Health Nurse Care Coordinator in Minnesota*** – Hennepin Health, a safety-net accountable care organization in Minnesota, has begun to [integrate primary care](#) into the Hennepin County Mental Health Center through the use of a behavioral health nurse care coordinator. The behavioral health nurse care coordinator works with patients to ensure their care is comprehensive and coordinated by doing complete assessments of patients’ medical health, behavioral health, and social needs, as well as providing basic on-site medical triaging and patient education. In addition to highlighting state policy implications, this brief also showcases how [Amber Morgan](#), the behavioral health nurse care coordinator, is able to drive

- ***Collaborative Family Healthcare Association (CFHA) Webinar – Working with Patients with Borderline Personality Disorder in Primary Care***

Date & Time: Tuesday, January 27, 2:00 PM Central time

Speaker: Shandra Brown Levey, PhD, Director of Behavioral Health Integration, A.F. Williams Family Medicine Center and Clinical Health Policy Research and Evaluation Associate, Eugene S. Farley, Jr. Health Policy Center, Department of Medicine, University of Colorado School of Medicine

To Register: <http://www.cfha.net/?page=Webinars>

Description: Dr. Levey will discuss practical tools for primary care providers and behavioral health providers in primary care settings to use when treating patients with Borderline Personality Disorder (BPD) and related behaviors.

Objectives:

- To understand the prevalence and related statistics of BPD.
- To recognize the diagnostic criteria and conceptualization of BPD.
- To recognize and be able to apply practical clinical skills and constructive responses to behaviors related to BPD.

- ***Resources Are Now Available Online for the Southeast Texas Regional Healthcare Partnership Region 3 Learning Collaborative Event*** – Resources from the December 10 and 11 event can be found [here](#). Among the available resources are those from the Behavioral Health breakout session facilitated by BHACA team members Elizabeth Reed and Alejandra Posada, along with Shannon Evans from Harris Health’s 1115 Waiver-DSRIP team.

BHACA: Choosing a Certified Electronic Health Record System

- **Beginning in 2015, more providers *may* be moving into Stage 2 of Meaningful Use. However, not as many providers as anticipated are pursuing Stage 2 due to the reporting burden (1 year of reporting vs. 90 days for Stage 1). In not pursuing Stage 2, many providers are walking away from extra incentive monies.** In keeping with this kick-back, legislation to ease the attestation burden under Stage 2 of meaningful use has been reintroduced in Congress. To read more: [click here](#).
- **Learn more about meaningful use, in general, from CMS:**
www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Getting_Started.html

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

- **Please consider participating in an upcoming provider webinar training if you serve a dual eligible client population (Medicare and Medicaid) in Harris County**, as an estimated 47,000+ Harris County residents will be enrolled in a new Medicare-Medicaid Plan (MMP) between March and August of 2015. (In addition to Harris County, other participating counties around the state include Bexar, Dallas, El Paso, Hidalgo, and Tarrant counties.)
 - A wealth of general information on the dual demonstration pilot:
<http://www.hhsc.state.tx.us/medicaid/managed-care/dual-eligible/>
 - Access the provider training PowerPoint here:
<http://www.hhsc.state.tx.us/medicaid/managed-care/dual-eligible/dual-demo.pdf>

Upcoming “Dual Demonstration” Provider Training Webinars:

February 26, 2015

Time: 2:00-4:00

Registration link: www1.gotomeeting.com/register/654254872

BHACA: Outcome-Based Evaluation

- **BHACA Blast #28: Featured Outcome Measure – ASSIST (Alcohol, Smoking and Substance Involvement Screening Test)**
 - **What is the ASSIST?**

The Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) is an 8 item questionnaire that was designed to screen for substance use.
 - **What does it measure?**

The ASSIST is comprised of 8 questions, all of which are surrounded around these substances:

 - tobacco products
 - alcohol
 - cannabis
 - cocaine
 - amphetamine-type stimulants (ATS)
 - sedatives and sleeping pills (benzodiazepines)
 - hallucinogens
 - inhalants
 - opioids
 - 'other' drugs

For an example of the ASSIST, please [click here](#).
 - **For which populations/age(s) is the ASSIST appropriate?**

At this time, the ASSIST has only been validated for use in an adult population; between 18 and 60 years of age.
 - **How long does the ASSIST take to complete?**

For most people, the ASSIST can be completed in about five or ten minutes and can be incorporated into the normal consultation.
 - **How is it administered?**

The ASSIST is designed to be administered by a health worker to a client using paper and pencil.
 - **Can I get the ASSIST in other languages?**

The ASSIST is available in English and Spanish. Any other translations from English should be as direct as possible to maintain the integrity of the tools and documents. If anyone is interested in finding the ASSIST in other languages, they should contact the [World Health Organization](#).
 - **A note about BHACA's Featured Outcome Measures**

Our intention is to expand awareness of and knowledge about existing outcome measures within the BHACA community. In featuring a

measure, we do not mean to endorse it as the right fit for your practice, because the appropriateness of a measure for any one behavioral health practice must be evaluated with that specific practice in mind. We hope you enjoy our featured outcome measures section.

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.