

Dear BHACA Community,

**BHACA Blast #34 Headlines:**

- **This Friday! On April 17<sup>th</sup>, please join us for a panel discussion titled, “How Medication Fits into the Pathways of Recovery: A Cross-Training on Medication Assisted Treatment (MAT) as an Option for Substance Use Recovery.”** The Houston Recovery Initiative, the Houston Recovery Center, and BHACA are co-sponsoring this educational event on **April 17<sup>th</sup> from 9am to 11am at The Houston Recovery Center.** **Find more information and please let us know if you plan to attend at [http://www.mhahouston.org/hriandbhaca\\_april17/](http://www.mhahouston.org/hriandbhaca_april17/).**
  
- **Registration Almost Full! – Brief Behavioral Health Interventions in Primary Care: Billing Considerations and Clinical Training** – BHACA, the Harris County Healthcare Alliance, The Council on Alcohol and Drugs Houston, and Beacon Health Strategies are co-sponsoring this educational event on **May 8<sup>th</sup>.** Healthcare administrators, billing staff, behavioral health clinicians, and other healthcare professionals are invited to learn about integrating brief behavioral health interventions into a primary care setting, from both a financial and a clinical perspective. **Find more information and register to attend at <http://www.mhahouston.org/events/399/>.**

All best,

The BHACA Team

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NBHP website – [www.nbhp.org](http://www.nbhp.org)

MHA website – [www.mhahouston.org](http://www.mhahouston.org)

**BHACA: Integrated Health Care (IHC)**

- ***New from SAMHSA: Guide to Medications for Alcohol Use Disorders*** – This new publication from SAMHSA provides guidance for the use of medication-assisted treatment for alcoholism and alcohol abuse in clinical practice. The guide summarizes approved medications and discusses screening and patient assessment, treatment planning, and patient monitoring. To download the guide, please [click here](#). **Interested in hearing more about this topic? Attend this Friday’s panel discussion titled “How Medication Fits into the Pathways of Recovery: A Cross-Training on Medication Assisted Treatment (MAT) as an Option for Substance Use Recovery” co-sponsored by the Houston Recovery Initiative,**

**the Houston Recovery Center, and BHACA. For more information, please see [http://www.mhahouston.org/hriandbhaca\\_april17/](http://www.mhahouston.org/hriandbhaca_april17/).**

- ***American Psychiatric Association Recommendations for IHC Training*** – As we all know, providing high-quality integrated health care requires a perspective and a set of competencies not always emphasized in traditional provider preparation programs. In an important step towards meeting the goal of preparing providers for IHC, the American Psychiatric Association (APA) recently issued recommendations for training psychiatrists for integrated health care. To learn more about this important action and to read the recommendations, please [click here](#).
- ***CEU Workshop – What is a Recovery Coach?***  
**Date & Time:** Friday, April 24, 9:00 AM – 12:15 PM  
**Location:** The Council on Alcohol and Drugs Houston, 303 Jackson Hill St., Houston, TX 77007  
**Cost:** \$30  
**CEUs:** 3 CEUs will be offered for LCDC, LMFT, LPC, and Licensed Social Workers  
**For More Information and to Register:** [Click here](#)  
**Description:**  
This training provides an overview of Peer Recovery Coach functions and roles in the lives of individuals with substance use disorders. The course will cover the distinctions between the Clinician/Counselor, Peer Recovery Coach, and Sponsor. Participants will gain an understanding of a state-approved working definition of “recovery,” the spectrum of attitudes, stigmas and labels, Recovery Wellness Plans, Recovery Pathways, recovery capital and barriers, and ethical guidelines for a Peer Recovery Coach.
- ***Webinar – Understanding the Affordable Care Act and SBIRT***  
**Date & Time:** Wednesday, April 29, 2:00 – 3:30 PM Central time  
**To Register:** <http://hospitalsbirt.webs.com/aca-sbirt>  
**Description:**  
The implementation of the Affordable Care Act (ACA) has resulted in many changes that affect addiction, mental health, and medical professionals, especially regarding substance use prevention and treatment services like SBIRT. This free webinar is designed to help you remain compliant with this historic legislation, as well as maximally benefit from it by integrating SBIRT into your current practices. Learning objectives:
  - Identify how SBIRT can be integrated in order to prepare helping professionals to work in the framework of the ACA and the desired integration of substance abuse services into primary care.
  - Disseminate information about how to integrate screenings within the ACA’s role to expand the coverage of treatment and recovery services to those covered under the ACA.
  - Assist participants in understanding the new health system and processes providers and beneficiaries must follow under the ACA to provide screenings.

## **BHACA: Choosing a Certified Electronic Health Record System**

- ***Moving Toward Interoperability with 2015 Proposed Technology Certification Criteria:*** The ONC has proposed new rules regarding certification criteria for health IT technology for 2015. The proposed rule is open for public comment through May 29, 2015. Review the proposed rule and find instructions re. providing public comment here: “2015 Edition Health Information Technology (Health IT) Certification Criteria, Base Electronic Health Record (EHR) Definition, and ONC Health IT Certification Program Modifications [Proposed Rule – March 20, 2015 \[PDF 2.4MB\]](#).”
- ***CMS invites the public comment on Stage 3 of Meaningful Use,*** specifically on the notice of proposed rulemaking on **Stage 3**. Submit public comments electronically at: <http://www.regulations.gov>.

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

- ***On April 14, a bipartisan effort in congress passed the Medicare Access and CHIP Reauthorization Act of 2015,*** taking significant, new steps to move Medicare away from a volume-based, fee-for-service (FFS) model and toward a value-based system that rewards quality of care. Immediately, this ends the perennial partisan tussles (which have happened 17 times since 2003) over the sustainable growth rate and prevents 21% cuts in the Medicare Physician Fee Schedule, but the legislation also has much broader implications regarding moving care toward a value-based reimbursement model. **Read more here:** <http://www.medscape.com/viewarticle/843078>, or here: <http://us2.campaign-archive2.com/?u=dcfdd33cdd540f634734cf274&id=4f38816547&e=1c1cb0c09e>.
- ***Has your agency begun to take steps to prepare for ICD-10? Key steps in preparation may include:***
  - Develop in-house schedule for updates and training to become prepared
  - ICD-10 software upgrades
  - Rigorous testing of software systems for claims throughput
  - Staff training/preparedness in documentation to support ICD-10 billing codes
  - Conduct (at least) basic internal testing of ICD-10 handling capabilities
  - Conduct (recommended) gold standard “end-to-end” testing (in which a claim is sent, approved or rejected, and an explanation of what happened—called an electronic remittance advice—is returned)

- Be aware of the pre-Oct. 1st testing periods offered by health plans with which you are in network
- Participate with the health plans you are in-network with re. provider training opportunities and testing periods
- Have a reserve of finances to cover for an increase in denials around Oct. 1, 2015

Read more here:

<http://www.modernhealthcare.com/article/20150410/NEWS/304109978>

- ***Volunteer for ICD-10 Medicare End-to-End Testing in July—Forms Due April 17:*** During the week of July 20 through 24, 2015, a third sample group of providers will have the opportunity to participate in ICD-10 end-to-end testing with Medicare Administrative Contractors (MACs) and the Common Electronic Data Interchange (CEDI) contractor. Approximately 850 volunteer submitters will be selected to participate in the July end-to-end testing. This nationwide sample will yield meaningful results, since CMS intends to select volunteers representing a broad cross-section of provider, claim, and submitter types, including claims clearinghouses that submit claims for large numbers of providers. *Note:* Testers who are participating in the January and April end-to-end testing weeks are able to test again in July without re-applying. ***To volunteer as a testing submitter:***
  - Volunteer forms are available on your [MAC](#) website
  - Completed volunteer forms are due April 17
  - CMS will review applications and select the group of testing submitters
  - By May 8, the MACs and CEDI will notify the volunteers selected to test and provide them with the information needed for the testing

***If selected, testers must be able to:***

- Submit future-dated claims.
- Provide valid National Provider Identifiers (NPIs), Provider Transaction Access Numbers (PTANs), and beneficiary Health Insurance Claim Numbers (HICNs) that will be used for test claims. This information will be needed by your MAC by May 29 for set-up purposes; testers will be dropped if information is not provided by the deadline.

Any issues identified during testing will be addressed prior to ICD-10 implementation. Educational materials will be developed for providers and submitters based on the testing results.

***For more information:***

- [MLN Matters® Article #MM8867](#), “ICD-10 Limited End-to-End Testing with Submitters for 2015
- [MLN Matters Special Edition Article #SE1435](#), “FAQs – ICD-10 End-to-End Testing”
- [MLN Matters Special Edition Article #SE1409](#), “Medicare FFS ICD-10 Testing Approach”

- ***As most behavioral health providers already know, parity continues to be difficult to enforce. A new study by NAMI further evidences that, in practice, equity is lacking regarding health coverage for behavioral health services on par with physical health services:***

<http://associationsnow.com/2015/04/survey-mental-health-issues-struggle-reach-parity-medical-issues/>. **NAMI report:** <http://www.nami.org/About-NAMI/Publications-Reports/Public-Policy-Reports/A-Long-Road-Ahead/2015-ALongRoadAhead.pdf>.

### **BHACA: Outcome-Based Evaluation**

- ***Quality Improvement Resource from the Institute for Healthcare Improvement (IHI) – How Do You Use a Driver Diagram?*** – If you’re embarking on an improvement project, it’s common to want to start testing changes right away. Once you have an aim, you want to achieve it. But how do you know the changes you intend to work on are the right ones to achieve your aim? A simple, yet effective improvement tool can help – the driver diagram. In a [new video activity](#) created by the IHI Open School, IHI’s Chief Medical and Scientific Officer, Don Goldmann, MD, explains how the visual, intuitive display of a driver diagram can help you understand where you’re going with your improvement effort. He explains that one purpose of a driver diagram is to map out the “causal pathway” between a specific change and the desired effect. Learning objectives:
  - Define the phrase “causal pathway.”
  - Explain the relationship between a driver diagram and a PDSA cycle.
  - Discuss why driver diagrams are useful to quality improvement work.
  - Differentiate between primary and secondary drivers.

**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.