



February 2018

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An Underutilized Best Practice: Long-Acting Injectables

Severe and Persistent Mental Illness (SPMI) impacts 9.8 million American adults or 4.1% of the adult population. The most significant SPMI conditions include schizophrenia, schizoaffective disorder and bipolar disorder. People with severe and persistent mental illness (SPMI) have significant risk for relapse and hospitalization when they do not take their medication as prescribed. The resulting destabilized periods impact all aspects of their life. Several studies have demonstrated that long-acting injectable antipsychotics (LAI-AP) improve recovery and the duration of time people with SPMI spend in the community as opposed to hospital settings.

During periods of destabilization, people with schizophrenia spectrum disorders may experience positive and negative mood symptoms, medical and substance use comorbidities, and cognitive dysfunction that significantly impair social and occupational functioning. Schizophrenia is a leading cause of years lost to disability, particularly impacting adolescents and young adults. The treatment of schizophrenia conditions aims to reduce symptoms and prevent relapse. Improved functioning and recovery across the lifespan are important goals as well.

Antipsychotic medications are a central evidence-based practice that reduce psychotic symptoms and greatly decrease the risk of relapse. However, medication effectiveness is dramatically decreased by non-adherence. A meta-analysis of studies found that non-adherence is prevalent in an average of 41% of participants. Prescribers are often unaware of this issue and generally overestimate medication adherence.

Article continued on page 2.

Long-Acting Injectables (continued)

Studies also indicate that as little as a 10-day lapse in medication refills can result in a doubling of inpatient admission rates.

Beacon Health Options (Beacon) strongly recommends that psychiatric prescribers use a shared decision-making process and systematically offer an LAI-AP as a first-line treatment to most individuals who require long-term antipsychotic treatment. LAI-APs are recommended for individuals with schizophrenia, schizoaffective disorder, and bipolar disorder. Based on individual treatment response and medication history, either second-generation antipsychotics (SGA) or first-generation antipsychotics (FGA) LAI-APs may be used after the first episode of schizophrenia. First-generation LAI-APs (depot neuroleptics) must be avoided for bipolar disorder conditions.

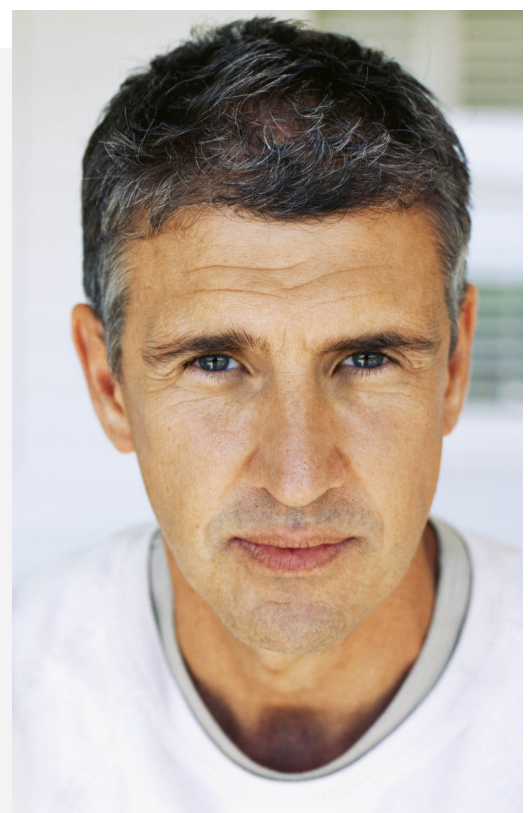
Long-Acting Injectable (LAI) Antipsychotic Drugs were first developed in 1966 as a long-acting medication for psychosis, administered intramuscularly (IM) with a one- to four-week effective period. LAIs include Haldol Decanoate (Haloperidol), Prolixin Decanoate (Fluphenazine), Risperdal Consta (Risperidone), Invega Sustenna/Trinza (Paliperidone), Zyprexa Relprevv (Olanzapine pamoate), Abilify Maintena (Aripiprazole), and Aristada (Aripiprazole lauroxil).

LAI-APs have demonstrated effectiveness in treating schizophrenia and other severe psychotic disorders. They ensure stable blood levels, leading to reduced risk of relapse. Newer LAI-APs offer additional advantages as they are easier to dose optimally and produce fewer side effects. To provide integrated treatment, including medication management, it is important to address psychosocial needs as well as incorporate personal preferences whenever possible within the person-centered care plan. Intensive care coordination can help address secondary considerations related to LAI-AP adherence, including transportation, scheduling, health education, access to community support resources, and provider coordination.

Beacon expects in-network facility providers to offer LAI-AP interventions as a standard evidence-based treatment option for appropriate inpatient cases. In turn, Beacon supports care coordination resources to address continuity of care concerns following LAI-AP initiation and subsequent transition to community-based care.

Clinicians should consider each person's preferences, prior experience with antipsychotics, health status, and the specific side-effect profiles of the medications when selecting an LAI-AP. Because LAI-AP dosages are not immediately changeable to adjust for side effects, LAIs may need to follow an initial course of oral medications.

As an evidence-based clinical approach, Beacon strongly recommends that psychiatric prescribers use a shared decision-making process and systematically offer an LAI-AP as a first-line treatment to most individuals who require long-term antipsychotic treatment. [Click here](#) to view Beacon's Best Practice for Severe and Persistent Mental Illness paper.



“Beacon expects in-network facility providers to offer LAI-AP interventions as a standard evidence-based treatment option for appropriate inpatient cases. In turn, Beacon supports care coordination resources to address continuity of care concerns following LAI-AP initiation and subsequent transition to community-based care.”

Upcoming Prevention Funding Opportunities

Looking for funding for your organization's prevention program? Check the listings below for grant programs from PCCD and Blueprints. Now open to applications.

Justice Assistance Grants (JAG) from PCCD. Funding across PCCD strategic objectives. Small planning awards are also available to develop local strategic plan; \$15K, one year only. *Application Due Date—March 26, 2018.* [Apply now.](#)

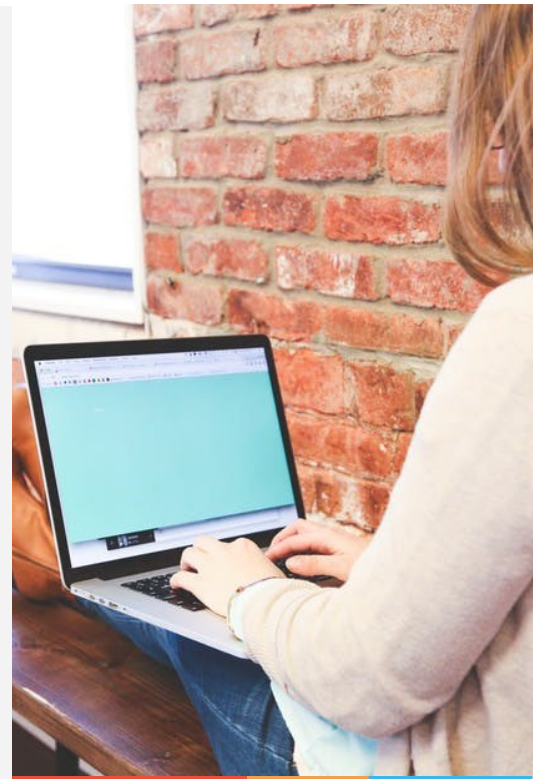
Blueprints Funding for LifeSkills Training. For implementations beginning Fall 2019. Priority given to applications submitted by March 30th. The grant covers costs for a three-year implementation, including teacher training, teacher stipends or substitute teacher reimbursement for training, teacher manuals, and consumable student workbooks. The grant also includes program sustainability planning and attendance at a Training of Trainers workshop. *Application Due Date - October 18, 2018.* [Apply now.](#)

Coming Soon...

2018 Violence and Delinquency Prevention Program (VDPP) Funding from PCCD. Funding will be available for a range of evidence-based programs that can:

- Promote healthy youth development
- Prevent problems like substance abuse, delinquency and school failure
- Serve preschool through high school youth and/or their families

For a full list of eligible programs and information to get ready to apply, [click here](#). For targeted help writing an effective grant, check out the EPISCenter's new video library, [Evidence Based Programs 101](#).



Did you know?

The vbh-pa.com website is built with accessibility in mind for our visually impaired users. Visually impaired users can use screen reader software to read page content.



In 2018, Value Behavioral Health of Pennsylvania Will Become Beacon Health Options

Value Behavioral Health of Pennsylvania (VBH-PA) will become **Beacon Health Options (Beacon)** in 2018. There will be no changes to provider procedures or HealthChoices member benefits. Check your inbox for emails from VBH-PA, *ValueAdded* newsletter articles, and our website for updates as to when this change becomes official.

Provider Tips: Credentialing and Re-Credentialing Made Easy!

Credentialing and re-credentialing is not an exciting topic. We recognize the time it takes to get the application done. Your first question may be, why do we have to do this? The answer is because the Centers for Medicaid and Medicare says so in CF42 §438.228. There is no way around it. Here are some tips on how to make it easier.

Set reminders on your calendars. Identify your re-credentialing month and year. Identify the month that is 34 months after that date and put in a calendar reminder. Re-credentialing applications are often sent a couple of months before the due date. Now you can be on the lookout for the application packet.

Multiple Providers. If you are re-credentialing multiple providers, keep a spreadsheet with the information of the providers for whom you complete the applications. The spreadsheet should include the person's name, date of birth, PROMISe identification number, license number, provider number by BH-MCO, and expiration dates. A modified version of this for single providers is good to have on hand.

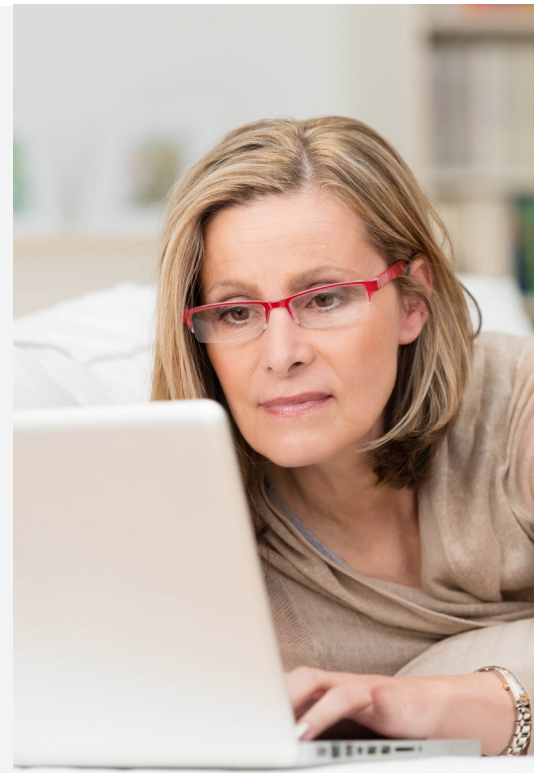
Complete and save the full application. Most of the BH-MCOs in Pennsylvania are now using the same credentialing/re-credentialing application. Each BH-MCO has attachments that are specific to their own policies, but the main information is the same. Complete one application, save it for the next time, and then simply update.

Complete the CAQH and update it anytime there is a change. Did you move? Did your name change? A lot of what is needed for credentialing and re-credentialing can be gotten here. If it is accurate, you are more than halfway done.

Owner Discloser Form. We have noticed that most applications are returned because the Owner Discloser form was not completed. Complete it!

Review Before Submitting. Please be sure to fill in all of the required fields.

Your Provider Field Coordinators are here to help with any questions you may have regarding credentialing/re-credentialing. Please [contact them](#) if you have any questions.



Credentialing and Re-Credentialing Made Easy!

There's no way around it, providers must go through the credentialing process. Use these tips to help you get one step up on the process.

Summer Therapeutic Activities Programs (STAP)

Please consider summer plans when completing evaluations for children.

Evaluations for Summer Therapeutic Activities Program (STAP) must be comprehensive and include all of the information required in the Comprehensive Child/Adolescent Strengths-Based Evaluation (Life Domains) (CCASBE-LD). Abbreviated evaluations will not be accepted to determine medical necessity for STAP.

If a child is currently receiving BHRS and has a current evaluation that recommends STAP, there may be no need for either an additional ISPT or a new evaluation specifically recommending STAP. STAP providers will maintain a staff ratio that will manage children with no additional TSS. It will, therefore, be a rare occurrence that a TSS will be authorized for attendance at STAP.

For all STAP providers, please remember to inquire with your respective counties to obtain a letter of support. Please remember if you made any changes to your service description, you will need to submit the changes for approval to OMHSAS.

Providers who are considering providing a Summer Therapeutic Activities Program in 2018 are required to submit a VBH-PA application for STAP. Applications are located on our website at http://www.vbh-pa.com/wp-content/uploads/sites/9/provider/info/pr/STAP_Application.pdf

STAP Packets for Authorization

Mail complete packets (evaluation, evaluation cover sheet, ISPT sign-in sheet, treatment plan, plan of care, and family choice form) for STAP authorizations to: Beacon Health Options, P.O. Box 1840, Cranberry Twp., PA 16066-1840, Attention: Clinical Department. This address is for all VBH-PA members.

Applications, county letters of support, and approved service descriptions for STAP are due to VBH-PA/Beacon by March 15, 2018, attention Charlotte Chew, Provider Relations Director, Beacon Health Options, P.O. Box 1840, Cranberry Twp., PA 16066-1840. These documents are required every year.

If you have any questions about STAP, please email or call: Charlotte.Chew@beaconhealthoptions.com or (724) 744-6313.



STAP Applications, county letters of support, and approved service descriptions for STAP are due to VBH-PA/Beacon by March 15, 2018.

Together, We Can Help Our Members Quit Smoking

Talk about it! Ask patients if they smoke and if they have ever considered quitting. You just may help that person quit and help their loved ones avoid the second-hand smoke.

The national average of smoking prevalence in the US in 2016 was 17%. In Pennsylvania, the state average was 18%. As a provider, you know the many negative health consequences of smoking, including cancer, breathing problems, heart attacks, and stroke. Even second-hand smoke causes breathing problems including asthma. While we know that quitting is difficult and patients may have mixed feelings about quitting, Value Behavioral Health of Pennsylvania/Beacon is here to help. We can help get members connected to smoking cessation counselors. We also want to make you aware that the Pennsylvania Department of Health is providing assistance as well through the **PA Free Quitline 1-800-QUIT NOW** and pa.quitlogix.org.

Tips as you talk to patients:

- Keep it positive!
- An important statistic is that nearly half of all Americans who once smoked eventually quit smoking. (<https://www.webmd.com/smoking-cessation/default.htm>)
- Even if they've tried before, it may take several attempts to kick the habit for good.

Facts that may be helpful to convey:

- After you quit, your body begins to heal within 20 minutes of your last cigarette. (smokefree.gov/rewards-of-quitting)
- As quickly as 12 hours after quitting, the carbon monoxide (harmful substance from smoking) decreases to lower levels. (healthline.com)
- The nicotine leaves your body within three days. (smokefree.gov/rewards-of-quitting)



Questions to ask patients:

- Have you thought about why you smoke? (Common reasons include reducing tension, controlling weight, improve attention/focus.)
- Have you thought about trying to quit?
- Have you thought about the reason(s) you'd consider quitting?
- Have you considered what might help you? (e.g., counseling, tobacco replacement, anti-crave medication)
- Have you thought about when you might try to quit or other circumstances that might help you be successful?

Value Behavioral Health of Pennsylvania/Beacon is here to help! If interested in a referral, or to speak to a counselor about reducing or stopping cigarette use, we can refer members to our network of providers.

Important Contacts:

- Value Behavioral Health of Pennsylvania/Beacon: 1-800-615-8503
- PA Free Quitline 1-800-QUIT NOW
- pa.quitlogix.org

2018 Annual Fraud and Abuse Training Mandatory Training for Providers

The VBH-PA/Beacon Program Integrity Department is now offering the 2018 Annual Fraud and Abuse Training in one format. This new and easy format is for both established providers and new providers. Established providers are defined as providers that were in the VBH-PA/Beacon Provider Network or have been paid for services prior to the beginning of 2018. New providers are defined as providers that have recently joined the VBH-PA/Beacon Provider Network or started to be paid for services in 2018. Please keep in mind that all providers that provide services for VBH-PA/Beacon are required to attend Annual Fraud and Abuse Training. If a provider is unable to attend the Annual Fraud and Abuse Training, the provider is responsible to independently review the mandatory training and document when the training is completed within their records. However, VBH-PA/Beacon recommends providers attend the live webinar training since additional information will be available from the questions and answers during the training.

If you are an established provider prior to 2018, or a new provider in 2018, the Annual Fraud and Abuse Training will be available on the following dates. Please click on one of the links below to register for the Annual Fraud and Abuse Training:

New & Established Providers Annual Fraud and Abuse Trainings		
Webinar Date	Time	Registration Link
March 2, 2018	1:00–2:30PM	https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e99a7508d2a13a154a26e366ec022ea77
March 16, 2018	1:00–2:30PM	https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e291dc6d14b7d50794449b9e0cbfee786
March 30, 2018	1:00–2:30PM	https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e2d2c3e17e155aca6ec7cf991c267852e
June 15, 2018	1:00–2:30PM	https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e3de9bb1be5631643d931192823c39231
September 21, 2018	1:00–2:30PM	https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e2d7338a579ba437487219e3ae91eb9fc
December 7, 2018	1:00–2:30PM	https://beaconhealthoptions.webex.com/beaconhealthoptions/onstage/g.php?MTID=e9ae4772bb55ae5d1b6acbce2b195864e

If you have any questions on which training to attend, please feel free to contact Christina Smouse, Program Integrity Auditor, by email Christina.Smouse@beaconhealthoptions.com.

WELCOME! Brad Eckels has been named as Manager of Program Integrity at Value Behavioral Health of Pennsylvania. Some of you may remember Brad from his previous work in our Program Integrity Department from 2013 through 2014. He has spent the last several years as the Clinical Fraud and Abuse Auditor for UPMC Health Plan but was delighted to return to his roots at VBH-PA and serve as our new Manager of Program Integrity. Brad is a licensed professional counselor and has worked in the provider community for Family Services of Western Pennsylvania, Wesley Spectrum Services and Aldelphoi Village. Welcome back, Brad!

Save the Date

Value Behavioral Health of Pennsylvania



Presents the

18th Annual



Adult Recovery Forum



Friday, April 13, 2018
Pittsburgh Marriott
North
Cranberry Township

General Registration Coming Soon.

[Nominate Someone Today!](#)

Deadline for nominations is
March 1, 2018.

[Reserve Exhibit Space at Forum](#)

Deadline for exhibitor reservations
is March 15, 2018.

HealthChoices' VBH-PA members living in Armstrong, Beaver, Butler, Fayette, Greene, Indiana, Lawrence, Washington and Westmoreland Counties are invited to attend. Crawford, Mercer and Venango County HealthChoices' members will have the opportunity to attend other regionally held VBH-PA Forums in 2018.

