

Provider eNews

FEDERAL MENTAL HEALTH PARITY (FMHP)

In December 2010 and January 2011 ValueOptions® held Webinars to educate our provider network about the provisions of the Federal Mental Health Parity (FMHP) Act. The name of the educational Webinar series was "Outpatient Services - Revised Clinical and Administrative Processes under Federal Mental Health Parity (FMHP)"

As many of our providers learned during the Webinars, the FMHP Act requires that ValueOptions® change its processes related to the clinical management of mental health and substance abuse services. It is important that providers verify a patient's benefit plan prior to requesting services via the ProviderConnectSM benefit tab or by calling the appropriate telephone number located on the back of the member's benefit card. All care and services must continue to meet medical necessity requirements.

In case you missed the educational Webinars you can download the presentation slides by going to the following link:

<http://www.valueoptions.com/providers/ProNews.htm>



We also wanted to include additional questions asked during the Webinars to continue to educate our provider community. Please read the frequently asked questions (FAQ) listed below and be sure to read our FAQ document on a regular basis to learn more about the changes associated with FMHP. The link to the Federal Mental Health Parity FAQ is at the end of this article.

Frequently Asked Questions

- Q:** I am familiar with parity pertaining to serious mental illness diagnoses. However, this sounded like it will apply to all mental health claims, regardless of the diagnosis, is that correct? Since it is a federal act will it apply to all insurance companies within the parameters of affected plans as defined by the act?
- A:** FMHP act does not differentiate by diagnosis as some state regulations did. The law applies to all diagnoses. All plans affected by FMHP must comply with the law.
- Q:** Would you please explain more about what "outlier" cases are?
- A:** Cases where the provider requests more sessions than are typically used for this diagnostic group.
- Q:** Does the request for the Outpatient Review Form (ORF) have to be completed online?
- A:** The ORF can be submitted online, via fax or on paper.

Additional information on mental health parity can be found at:

http://www.valueoptions.com/providers/Files/pdfs/Mental_Health_Parity_FAQ.pdf

Listen to one of the FMHP Webinar recordings at:

http://www.valueoptions.com/providers/Training/Training_Workshops_Archives_2010.htm.

OUTPATIENT VALUESELECTSM 2011 UPDATE

The ValueSelectSM designation recognizes network outpatient providers for engaging in activities that promote clinical effectiveness, member access to services, member satisfaction, and administrative efficiency. ValueSelectSM providers are eligible for a number of valuable benefits, including distinction in our provider search engine.

The ValueSelectSM designation process has been modified for 2011 in two respects. First, the minimum electronic claims submission rate performance goal will be 75%. This change reflects the rapidly increasing rate of electronic claims submission, which speeds provider payments while also reducing errors. The second change is the addition of a complaints review to the designation process. ValueOptions[®] will now review complaints received for a provider within the past 2 years. An excessive number of complaints that are considered substantiated will disqualify a provider from ValueSelectSM. The 2011 ValueSelectSM Program Description further details the program and is available online at www.valueoptions.com/providers/Providers.htm under the "Spotlight" section.

ON TRACK OUTCOMES PROGRAM

The ValueOptions[®] On Track Outcomes Program is designed to help clinicians incorporate client-reported feedback into their counseling and psychotherapy practices. A growing body of research demonstrates the power of this type of routine feedback to improve patient outcomes. The *On Track* program gives clinicians valuable tools to track client progress relative to benchmarks, to identify clients at risk for poor outcomes, and to demonstrate the impact of their services. *On Track* is based on a brief client-completed assessment and online reports. The *On Track* Outcomes program is intended for use by clinicians providing psychotherapy and EAP counseling services to our commercial membership.

Here's what network clinicians have to say about On Track:

- ⇒ "I realize that having a method of measuring the severity of the problems my clients have is very important. I had been looking for years for something that I could give to everyone regardless of diagnosis. For the first time I felt I had an effective tool to help me determine the effectiveness of my treatment." (Mississippi)
- ⇒ "I have found that the forms catch aspects of their functioning that I may have otherwise missed due to the tendency to focus on the most pressing issues first. I am glad that we have had the opportunity to participate." (Oklahoma)
- ⇒ "I often show my clients the paper copies of the forms, which I keep until case closing, as they provide concrete representations of their progress and further empowers them to understand their role in symptom reduction." (Oregon)
- ⇒ "While I usually am pretty well attuned to these changes or lack of change from the content of the sessions, occasionally I am alerted to an adverse change that the client hasn't spontaneously disclosed--e.g., someone who has never before reported thoughts of self-harm but who gives a response on the current CFF indicating such thoughts." (Texas)
- ⇒ "On Track provides clear, concise, confidential client feedback in potential areas of concern AND also highlights effectiveness of treatment. The Client Feedback Form is easy to use and compliance is high. I am also provided with feedback about the therapeutic relationship that is material for discussion." (Tennessee)

On Track is provided to network providers at no cost. To learn more about the *On Track* program visit our web page at <http://www.valueoptions.com/providers/News/OnTrack.htm>.

Interested providers can also attend a live "Introduction to On Track" teleconference held every month. The next teleconference is:

⇒ **Thursday, February 10, 2011 1:00 to 2:00 PM EST Webinar ID: 967-048-714**

Dial 1-877-785-0477, Access Code 6417542, to join the call. Go to www.joinwebinar.com to view the webinar presentation during the call.



Contact Us: Please send your comments, ideas and suggestions for upcoming editions of Provider eNews to PRelations@ValueOptions.com.

1099 QUESTIONS?

It is tax season!

ValueOptions® will be mailing 1099s no later than January 31, 2011. 1099s are only issued for providers who were issued total payments of \$600 or greater in 2010.

In order to answer your questions regarding your 1099, ValueOptions® has set up a specific 1099 Hotline. Please call 703-390-4936. This is a voicemail box that is monitored by our Finance Department. All calls will be returned within 3 business days.

For more information please visit our website or call the ValueOptions® Provider Services Line at 1-800-397-1630.

ARE YOU USING PAYSPAN HEALTH?

ValueOptions® partners with PaySpan Health, a multi-payer adjudicated claims settlement service that delivers electronic payments and electronic remittance advices based on your provider preferences. With PaySpan Health, you stay in control of bank accounts, file formats, and accounting processes. You can access PaySpan by going to the following website: www.payspanhealth.com

If you use a Mac, try using Firefox as your browser. If you need to download Firefox please go to:

<http://www.mozilla.com/en-US/firefox/ie.html>

For additional information regarding PaySpan Health please review the “Electronic Funds Transfer (EFT) Training for Providers” under the “Spotlight” section of www.ValueOptions.com/providers.

PARTNERING FOR QUALITY AFFORDABLE HEALTHCARE

Effective January 1, 2011, the ValueOptions® health plan partner MVP Health Care will provide health insurance for the newly formed Finger Lakes Municipal Health Insurance Trust. The Trust is comprised of nine local municipalities and the Rochester Housing Authority. Included are the Towns of Chili, Henrietta, Penfield, Perinton, Pittsford, Victor and Webster, the villages of East Rochester and Fairport, and the city's housing authority.

As always, we look to our provider network to assist in partnering with us in making quality healthcare affordable for our members. For information regarding benefits or eligibility, please call the number on the back of the member's identification card. For information about becoming part of the MVP provider network, please call our Provider Line at 1-800-397-1630, representatives are available Monday through Friday, 8am to 5pm ET.

GIVING VALUE BACK TO THE PROVIDER WEBINAR SERIES

ValueOptions® is proud to announce the return of our “Giving Value Back to the Provider” Webinars. The educational Webinar series will be offered to our providers twice a quarter. The presentations will introduce and discuss our new and exciting initiatives for you, the provider.

What information will the Webinar include?

- Overview of ValueOptions®
- Credentialing and Contracting Information
- Overview of Clinical Operations and Initiatives
- ProviderConnectSM Overview
- And much more!

Upcoming Dates and Times of Webinars:

Date	Time
March 10, 2011	2:00 PM - 4:00 PM EST
March 11, 2011	11:00 AM - 1:00 PM EST

Who should attend the Webinar?

All providers affiliated with ValueOptions® are invited to attend.

How to Register for the Webinars:

Register for the Webinar that best fits your schedule by clicking on the corresponding registration link.

Date	Registration Link
March 10, 2011	https://www2.gotomeeting.com/register/430818851
March 11, 2011	https://www2.gotomeeting.com/register/943165875

2011 UPDATE ON PLANS ADMINISTERED BY VALUEOPTIONS® FOR THE BOEING COMPANY

Effective January 1, 2011, there will be some changes for Boeing plans administered by ValueOptions®. Please note these changes in regard to benefits and claims administration. ValueOptions® will continue management of the mental health and substance abuse benefits for most Boeing plans. As always, please contact ValueOptions® at (800) 892-1411 or log on to ProviderConnectSM to check benefits and member eligibility.

There are several changes to benefit plan coverage and design -- some in compliance with Federal Mental Health Parity and the Patient Protection and Affordable Care Act legislation, others a result of Boeing's annual review process. Some key reminders are:

- ⇒ **Behavioral health claims paid by ValueOptions®** -- Effective January 2011, ValueOptions® is the claims administrator for Boeing behavioral health claims. Many Boeing plans' behavioral health claims have previously been submitted to the local BCBS Plan or to a designated Regence BlueShield PO box. Behavioral health claims for dates of service after 1/1/11 should be submitted to ValueOptions® electronically or to the address below. All claims appeals for 2011 dates of service forward are also handled through ValueOptions® at **ValueOptions® P.O. Box 1290 Latham, NY 12110**. Claims for dates of service prior to 1/1/11 for plans previously administered through Regence BlueShield should continue to be submitted to Regence. There is no change in claims submission for the CIGNA HMO plan and UHC plans with MSA benefits managed by ValueOptions®.
- ⇒ **No precertification for Outpatient care** -- A primary change will be the removal of requirements for precertification of routine Outpatient care for dates of service 1/1/11 forward. Precertification will still be required for some services provided on an outpatient basis such as Outpatient ECT. Please continue to contact ValueOptions® to confirm benefits and eligibility. For more information about ValueOptions® management of outpatient care, click on the Federal Parity FAQ on the Provider tab at www.valueoptions.com.
- ⇒ **Detox covered under behavioral health benefits for all plans** -- Previously under the Selections, Selections Plus and Select Network plans, Detox was covered under medical as opposed to behavioral health benefits. Beginning in January 2011, Detox will be covered under the behavioral health portion of the benefit plan for all plans managed by ValueOptions® and will require the associated precertification or notification.
- ⇒ **Precertification or Notification required for Inpatient and alternative levels of care** -- It continues to be expected that as a ValueOptions® contracted provider, you contact ValueOptions® to provide clinical information upon which medical necessity determinations can be made.

FREQUENTLY ASKED QUESTIONS - HIPAA 5010

What is HIPAA 5010?

In January 2009, the Modifications to HIPAA Electronic Transaction Standards Final Rule were published as part of Health Insurance Reform. The Final Rule replaces current Version 4010 standards with Version 5010 standards and takes effect January 2, 2012.

With the Version 5010, the formats currently used must be upgraded from X12 Version 4010A1 to 5010. Formats that must be upgraded include:

- ⇒ Claims (837-I, 837-P)
- ⇒ Remittance Advice (835)
- ⇒ Claim Status Inquiry/Response (276/277)
- ⇒ Eligibility Inquiry/Response (270/271)
- ⇒ Requests for Authorization (278/278)

Some changes with 5010 standards include:

- ⇒ Prohibit use of PO Box address for Billing Provider
- ⇒ Require 9 digit zip code
- ⇒ Enhanced NPI Reporting rules
- ⇒ Expansion of the number of Diagnosis Codes to 12
- ⇒ Strong emphasis on COB information

Who is impacted by HIPAA 5010?

Entities impacted by HIPAA 5010 standards include:

- ⇒ Providers, such as physicians, alternate site providers, rehabilitation clinics and hospitals
- ⇒ Health plans
- ⇒ Health care clearinghouses
- ⇒ Business associates that use the affected transaction, such as billing/service agents and vendors.

Provider Reminders: Checking Benefits in 2011 and Notice of Provider Handbook Update

Checking Benefits 2011:

This is an important reminder for all providers to please check benefits for the period beginning January 1, 2011.

Provider Handbook Update:

ValueOptions® has posted the 2011 Provider Handbook. This handbook replaces in its entirety the previous version dated September 2009 and is available electronically at ValueOptions.com.

Please copy and paste the following URL into your Internet browser which will take you to our Provider Handbook page: <http://valueoptions.com/providers/Handbook.htm>.