



Mental Health First Aid: Moving Towards Zero Suicide

September is Suicide Prevention Awareness Month and at Beacon, we want to take the opportunity to talk about suicide without increasing the risk of harm.

Beacon's white paper "We Need to Talk about Suicide" was only the beginning of our journey toward our goal, Zero Suicide. We have now begun Mental Health First Aid (MHFA) training for our staff to support the Zero Suicide initiative.

MHFA is an eight-hour course that teaches participants how to identify and understand the risk factors of mental health issues and how to best respond to an individual experiencing a mental health crisis. Participants also learn about the importance of intervention and how to connect people to local and national resources for appropriate help and support.

In early August, we graduated nine Beacon colleagues from the MHFA program. This adds to the number of individuals in our New York and Colorado offices who have become MHSA certified.

September 2017

Provider Handbook • [Read More](#)

Contact Information • [Read More](#)

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Ideas and suggestions for future editions?

PRcommunications@beaconhealthoptions.com.

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MHFA gives Beacon staff the opportunity to rethink how we talk about suicide not only with our members; but also our colleagues, loved ones, and others in our lives. It also helps us look inward, because even though we are mental health professionals, we are also people who face the very real stressors all individuals do. With MHFA, we become more effective in communicating about suicide and other mental health illnesses, all the while reducing the stigma that often surrounds these conditions.

Our objective is for 1,200 employees to complete MHFA training in this, the first year of the program here at Beacon. Our ultimate aim is to have every Beacon employee, no matter their role, complete the eight-hour MHFA course.

At Beacon, we start the conversations that matter for all of our stakeholders, including our valued provider partners. We encourage you to learn more about Mental Health First Aid and even complete the course yourselves!



For more information:

- [NAMI's Suicide Prevention Awareness Month website](#)
- [Mental Health First Aid](#)
- [Beacon's white paper "We Need to Talk about Suicide"](#)
- ["We Need to Talk about Suicide" webinar](#)
- [Suicide prevention blog posts from Beacon Lens](#) ■

Beacon Represents...

Beacon strives to provide you with the thought leadership, strategic planning, and best practice information to help you stay abreast of the latest trends in behavioral health care delivery. We share this expertise through white papers, prevention initiatives, data analyses, and speaking engagements at various industry conferences. This month, Beacon plans to attend and/or present at the following conferences:

- National Association for Rural Mental Health's **43rd Annual Conference** is being held in San Diego, CA from Sept. 6-9. Beacon Colorado's team of Lisa Clements, PhD, Vice President, Transformation and Tina Gonzales, Jail Discharge Care Planner is presenting *Data Sharing Solutions for Rural Mental Health and Justice Systems*.
- **The HERO Forum** is being held in Phoenix, AZ from Sept. 12-14. Rich Paul, Chief Partnership Officer, Federal/Employer Division and client partner Charles Lattarulo, Ph.D. Global Director, Healthy Minds, American Express are presenting an overview of the American Express Healthy Minds Campaign.
- Florida Association of Health Plans' **Annual Conference** is being held in Orlando, FL from Sept. 13-15. Beacon is a proud returning sponsor for this conference.



“It is expected that Beacon providers maintain appropriate standards for appointment availability. Additional information is outlined in the “Appointment and Availability Standards” section of the [Provider Handbook](#).”

- New York Association of Psychiatric Rehabilitations Services’ [35th Annual Conference](#) is being held in Kershonkson, NY from Sept. 13-15. Beacon is presenting a workshop is titled: *Resiliency—Life Happens: Thriving Through Challenges to Recapture Your Dreams*. After attending the presentation, please stop by our exhibit table!
- Wisconsin Association of Health Plans’ [Annual Conference](#) is being held in Madison, WI from Sept 14-15. Beacon is a proud sponsor of this conference.

When we can, we’ll share pertinent industry news and event recaps from these conferences in future editions of our newsletter. ■

Appointment Availability Reminder

Beacon uses a variety of mechanisms to measure a member’s access to care with participating practitioners. Unless other appointment availability standards are required by a specific client or government-sponsored health benefit program, service availability is assessed based on the following standards for participating practitioners:

- An individual with life-threatening emergency needs is seen immediately
- An individual with non-life-threatening emergency needs is seen within six hours
- An individual with urgent needs is seen within 48 hours
- Routine office visits are available within 10 business days ■

Intensive Case Management Program

Last month we discussed the Intensive Case Management (ICM) program that Beacon offers to our members. The ICM Program offers assistance to members, pre- and post-discharge, in coordination with medical managed-care delivery systems, disease-specific educational materials, and individualized case management services including patient safety education and monitoring.

The ICM team targets members based on high-risk criterion or diagnostic categories. We include both adults and children as we identify conditions with high-risk needs. We outlined the criteria for admission to the program last month and encourage you to consider any of your patients who meet those criteria.

If you have a patient you would like to refer to case management, you may do so via [ProviderConnect](#). After logging in, click the “Enter Case Management Referral” link on the home page and then follow the prompts to complete a brief referral. Beacon clinicians will review the request and follow-up with the member as appropriate.

The screenshot shows the 'Case Management Referral' form in the ProviderConnect system. The form is titled 'Case Management Referral' and includes a 'Please note' section stating that availability for the program may be subject to contracted services for the health plan. Below this, it says 'Required fields are denoted by an asterisk (*) adjacent to the label.' The form is divided into two main sections: 'Current Member' and 'Contact Details'.
Current Member Section:
- Member ID: XXXXXX4321
- Effective Date: 01/01/2001
- Expiration Date: (blank)
- Member Name: ASLAN, SUSAN C
- Alternate ID: XXXXX4321
- Date of Birth: 12/02/1979
- Client: APW
- Source of Case Management Referral: PROVIDER
- Reason for Case Management Referral: A list of reasons is shown in a scrollable box, including 'COMPLEX CO-MORBID BH AND MEDICAL HEALTH', 'COMPLEX PSYCHIATRIC CASES', 'DIAGNOSTIC SPECIALTY UNIT', 'HIGH UTILIZER', 'MEDICAL COORDINATION/INTEGRATED CARE', 'MULTIPLE ER ADMISSIONS', 'MULTIPLE FAILED PLACEMENTS', 'MULTIPLE FAILED SA TX ATTEMPTS', 'MULTIPLE IP ADMISSIONS', and 'NEW/UNSTABLE HIGH RISK DG-DISSOCIATIVE IDENT'. The text 'COMPLEX CO-MORBID BH AND DEVELOPMENTAL DELAY' is also visible in a separate box.
- A text area for 'Please provide brief details that you feel are important for us to know for the referral (0 of 250)' is present.
Contact Details Section:
- Provider ID: 123456
- Provider Name: PETER TUMNUS
- Member's Contact Name: TEST
- Contact Relationship: ALTERNATIVE CARE PROVIDER (dropdown menu)
- Member's Contact Number: 111 111 1111
Buttons for 'Submit' and 'Cancel' are at the bottom of the form. The footer of the page reads '© 2017 Beacon Health Options® ProviderConnect v5.06.00'.

“If you have a patient you would like to refer to case management, you may do so via [ProviderConnect](#).”

Reminder: Preferred Laboratory—Quest Diagnostics®



We are proud to partner with Quest Diagnostics as our preferred laboratory. When laboratory testing is considered medically necessary, we strongly encourage Beacon providers, groups, and facilities to refer members to Quest as their first choice for all plans that offer a covered benefit for laboratory services. This is a potential cost-saving opportunity for our members through reduced or eliminated deductibles, co-payments, and/or co-insurance.



“When laboratory testing is considered medically necessary, we strongly encourage Beacon providers, groups, and facilities to refer members to Quest as their first choice for all plans that offer a covered benefit for laboratory services.”

Quest Diagnostics is a national, preferred laboratory with more than 2,200 convenient patient service centers. It's easy for members to access convenient testing locations. Quest offers more than 3,500 tests—from routine blood tests to complex genetic and molecular testing—to meet the diverse needs of our members. Our goal is to help you get the information you need to provide the best care possible.

Quest also makes it easier to schedule medically necessary appointments. Members can schedule lab testing online through Quest. To find a location and schedule an appointment, please direct your patients to visit www.QuestDiagnostics.com/Ezappointment or they can call 866-MYQUEST (866-697-8378).

To verify that a member has a covered benefit for laboratory services, providers should check eligibility and benefits in [ProviderConnect](#) or call customer service as indicated by the phone number for behavioral health located on the member's medical ID card. ■

Claim Process Improvement Program: Project Overview

Part of Beacon's strategy for continuous improvement is a transformative Claims Process Improvement (CPI) program, which is well underway for 2017. The program includes changes to several work streams designed to improve our provider experience:

- **Front-end Claims (Mailroom):** Transition to a centralized shared-service process is underway. We encourage providers to submit claims via electronic means. If submitting on paper, we also recommend to always verify claims mailing addresses prior to submitting claims.
- **Data-Driven Management:** Beacon is implementing improved data-driven management techniques to enhance metrics for claims processing and operations.
- **EDI/Data Exchange:** Beacon is improving the intake and processing of electronically submitted claims through the implementation of a single gateway for front-end claims intake for all Beacon submitters. In addition, we will be implementing a centralized, shared-service process for validating and managing the exchange of data between Beacon and our trading partners.
- **Payment Integrity and Claims Analysis:** Beacon has engaged Nokomis Health to provide us with analytical services related to payment integrity and claims analysis.

Nokomis employs an analytical claims engine—ClaimWise™—to conduct this analysis and identify claims paid contrary to national and industry standards.

If you have questions about a specific claim rejection, contact the customer service department based on the member's benefit plan. If you need technical assistance related to electronic claim submission, contact our EDI Helpdesk at 888-247-9311 Monday through Friday between 8 a.m. and 6 p.m. ET or email e-supportservices@beaconhealthoptions.com. ■

Demographic Information Review Reminder

To maximize business potential and assist Beacon in providing accurate referrals for members seeking services, we ask all providers to maintain accurate demographic data. As outlined in our [Provider Handbook](#), we ask you to contact us with any demographic changes or changes to appointment availability in advance, whenever possible and practical. Most information, such as specialty, gender, office hours, proximity, appointment availability, and licensure can be easily updated through the "Update Demographic Information" section on [ProviderConnect](#) to ensure information reflected in our online directory is accurate.

Beacon will send reminders like this throughout the year. This is in no way to advise that information is inaccurate; however, it is our goal to provide a steady reminder to review often and update as necessary. As a Qualified Health Plan through the Centers for Medicare and Medicaid Services (CMS), Beacon must follow all requirements set forth by CMS, including communicating with providers as necessary to ensure compliance. These requirements are beneficial for our

entire provider network and support a key Beacon T3 strategic goal, which is to deliver superior customer service.

Beacon verifies demographic data through various channels. While information may be accurate with us, if something is outdated through the Council for Affordable Quality Healthcare® (CAQH), for example, an update there will ensure that everything stays consistent. If you have made an update within the last quarter and your information is current, no action regarding this reminder is necessary. If you take no action, it will be considered confirmation that current information is up to date and accurate.



If you have any questions or need assistance updating your demographic data, contact our National Provider Service Line at 800-397-1630 between 8 a.m. and 8 p.m. ET, Monday through Friday or email your local [Regional Provider Relations team](#). ■



“The 2015 NSDUH data also demonstrates that approximately 22 million individuals 12 years of age and older needed treatment at a specialty facility (inpatient) for illicit drugs or alcohol use.”

Recredentialing with Beacon

In an effort to streamline processes for our provider community, Beacon has made changes to our provider network structure which will make recredentialing with Beacon easier. Providers who are credentialed with both Beacon Health Strategies and former ValueOptions will now only need to recredential once every three years for Beacon Health Options.

Providers are still encouraged to participate with CAQH. However, Beacon will continue to offer one universal application for all providers who choose not to utilize CAQH. In addition, providers have the option to submit their recredentialing applications online using our ProviderConnect portal.

According to Beacon's [Provider Handbook](#), “recredentialing for participating providers is required every three years, or such shorter period of time where required by a specific state law or regulation. The process for recredentialing begins approximately three months prior to the end of the initial credentialing cycle or the preceding recredentialing cycle, as applicable.”

Providers are notified via provider pulse phone call when the recredentialing process begins. Additional reminders are sent via email, fax, or mail. Further outreach occurs when necessary to ensure that providers complete the recredentialing process within the allotted timeframe and avoid disenrollment. ■

Medication-Assisted Treatment (MAT) for Opioid Use Disorder

Beacon has launched an initiative to increase the rate of engagement in treatment for opiate dependency. Based on 2015 the National Survey on Drug Use and Health (NSDUH), approximately 7 million Americans use or are dependent on opiates. This is a significant increase compared to the 2 to 4 million reported in the 2013 survey. The 2015 NSDUH data also demonstrates that approximately 22 million individuals 12 years of age and older needed treatment at a specialty facility (inpatient) for illicit drugs or alcohol use.

Involvement in community self-help programs, integration of behavioral and psychosocial approaches, and medication management are effective strategies of treatment. This integrated approach has the potential to play an important role in the successful treatment of opioid use disorder and provide a foundation for recovery.

Beacon has adopted the following from Substance Abuse and Mental Health Services Administration (SAMHSA) TIP 43: Medication-Assisted Treatment for Opioid Addiction in Opioid Treatment Programs and TIP 40: Clinical Guidelines for the Use of Buprenorphine in the Treatment of Opioid Addiction, the American Society of Addiction Medicine (ASAM) National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use, as well as a Naltrexone Guide for the Treatment of People with Opioid Dependence. These resources, located on Beacon's [Clinical Practice Guideline page](#), provide consensus and evidence-based guidance on the use of these medications. The goal of these documents is to provide information that physicians can use to make practical and informed decisions about the use of medications to treat opioid addiction.

A one-page reference sheet based on TIP 40 and a pocket guide based on TIP 43 are available under "Substance Use Resources" on Beacon's [North Carolina Engagement Center \(NCEC\) State Government and Health Plans page](#). For additional resources and available programs, visit the [SAMHSA website](#). ■

Medication Reconciliation

The Institute for Healthcare Improvement defines medication reconciliation as the process of creating the most accurate list possible of all medications a member is taking. This includes: drug name, dosage, frequency, and route. The list should be compared against the physician's admission, transfer and/or discharge orders, with the goal of providing the correct medications to the member at all transition points. Electronic prescribing (e-prescribing) and Electronic Health Record (EHR) allow greater ability to accurately reconcile medications.

More than 40 percent of medication errors are believed to result in reconciliation errors in transfers of care. Twenty percent of these errors result in harm. Furthermore, outpatient records have been noted to have medication discrepancies in 25 percent to 75 percent of the records.



The Joint Commission on Accreditation of Health Care Organizations reports that 60 percent of medication errors are a

result of communication failures. Contributing to this is poor self-management within the home, a lack of understanding, confusion, low health literacy, and cultural barriers.



Beacon has the ability and responsibility to help shape the conversation about behavioral health. Through the Beacon Lens blog, we respond rapidly to pressing and controversial areas in behavioral health today to help drive real, effective change. Here are some of our recent posts:

- [And the diagnosis is...](#)
- [Substance use: An old problem requires new solutions](#)
- [From misdiagnosis to stability: A story of struggle, of hope](#)
- [The 2017 NAMI National Convention: Behind the Booth](#)
- [Suicide's common tale: 'If only I had spoken with him'](#)

You can subscribe for email notifications for the blog by visiting the site directly. We look forward to your commentary.

If you have a topic suggestion, email: beaconlens@beaconhealthoptions.com. Together, let's lead the conversation on behavioral health! ■

Here are some important recommendations to help reduce these errors:

- Encourage your patients to maintain an accurate medication list and to bring this list with any updates to each appointment.
- Assess and monitor your patients' understanding/knowledge and compliance with taking medication.
- Compare your patients' list of current medications with the medications that you have prescribed. Reconcile medication lists at all transition points such as movement from one level of care to another or when seeing multiple physicians to manage care.
- If e-prescribing, allow access of medications prescribed by other providers. Comparing the available information with your prescriptions is an effective method of medication reconciliation.
- If you are participating in an EHR incentive program, medication reconciliation is a recommended meaningful use. For more information, view the CMS EHR incentive programs, and contact your EHR vendor for implementation within your program.
- Members enrolled in the Beacon's Intensive Case Management Program will discuss medications with their case managers. If there are any questions related to the accuracy of the medication list or to the members understanding, the case manager will contact you regarding the need for medication reconciliation. Your direction related to medication is essential to providing the best service to your patients. ■

2017 Annual Provider Satisfaction Survey

The 2017 Provider Satisfaction Survey project and data collection will begin during the fourth quarter of this year, so if you receive an invitation to participate from our vendor partner, Fact Finders, we encourage you to take the time to respond in a thoughtful manner—your feedback is invaluable to us as we work to improve our service to all our providers.

The team has our provider network's best interest in mind and will work around busy schedules to collect survey responses based on what works best for providers. Initially, we will reach out via email with an invitation to participate in the survey. Once participation is confirmed, those who prefer to complete the survey at their own pace can do so using an online link. In addition, the team is equipped to reach out so providers can complete the interview telephonically if that is their preference. ■

Webinars

Overview of ProviderConnect

Intended for providers and office staff becoming familiar with ProviderConnect for the first time.

- [Thursday, September 14, 2017 1-2 p.m. ET](#)
- [Tuesday, November 14, 2017 2-3 p.m. ET](#)

Authorizations in ProviderConnect

Designed for providers and office staff who submit authorizations through ProviderConnect.

- [Wednesday, October 11, 2017 1-2 p.m. ET](#)

ProviderConnect Claims

Designed for providers and office billing staff who submit claims electronically by either batch or directly through ProviderConnect.

- [Tuesday, September 19, 2017 2-3 p.m. ET](#)
- [Wednesday, November 15, 2017 2-3 p.m. ET](#)

ProviderConnect Tips and Tricks

Reviews hot topics and recent enhancements related to ProviderConnect.

- [Wednesday, October 4, 2017 2-3 p.m. ET](#)

Giving Value Back to the Provider

Introduces and discusses the new exciting initiatives for providers and familiarizes you with administrative, procedural, and general information about Beacon.

- [Thursday, September 7, 2017 2-4 p.m. ET](#)
- [Friday, September 8, 2017 11 a.m.-1 p.m. ET](#)

Introduction to On Track Outcomes

Provides an overview of this program which is designed to support network providers as they help clients stay “on track” in achieving their goals.

- [Wednesday, September 13, 2017 1-2 p.m. ET](#)
- [Thursday, October 12, 2017 1-2 p.m. ET](#)

To view previous webinar slides and recordings, visit our [Webinar Archive](#). For additional trainings and information, view our [Video Tutorials](#).

Note: Various contracts may offer specific trainings and resources. Visit our [Network Specific Info](#) page to learn more.

Looking for a Beacon Health Strategies plan? Visit our [Provider Login](#) page and enter the state and health plan to access resources. ■