



## United Behavioral Health

July 23, 2010

Eleanor Lewis, Sr. Network Manager

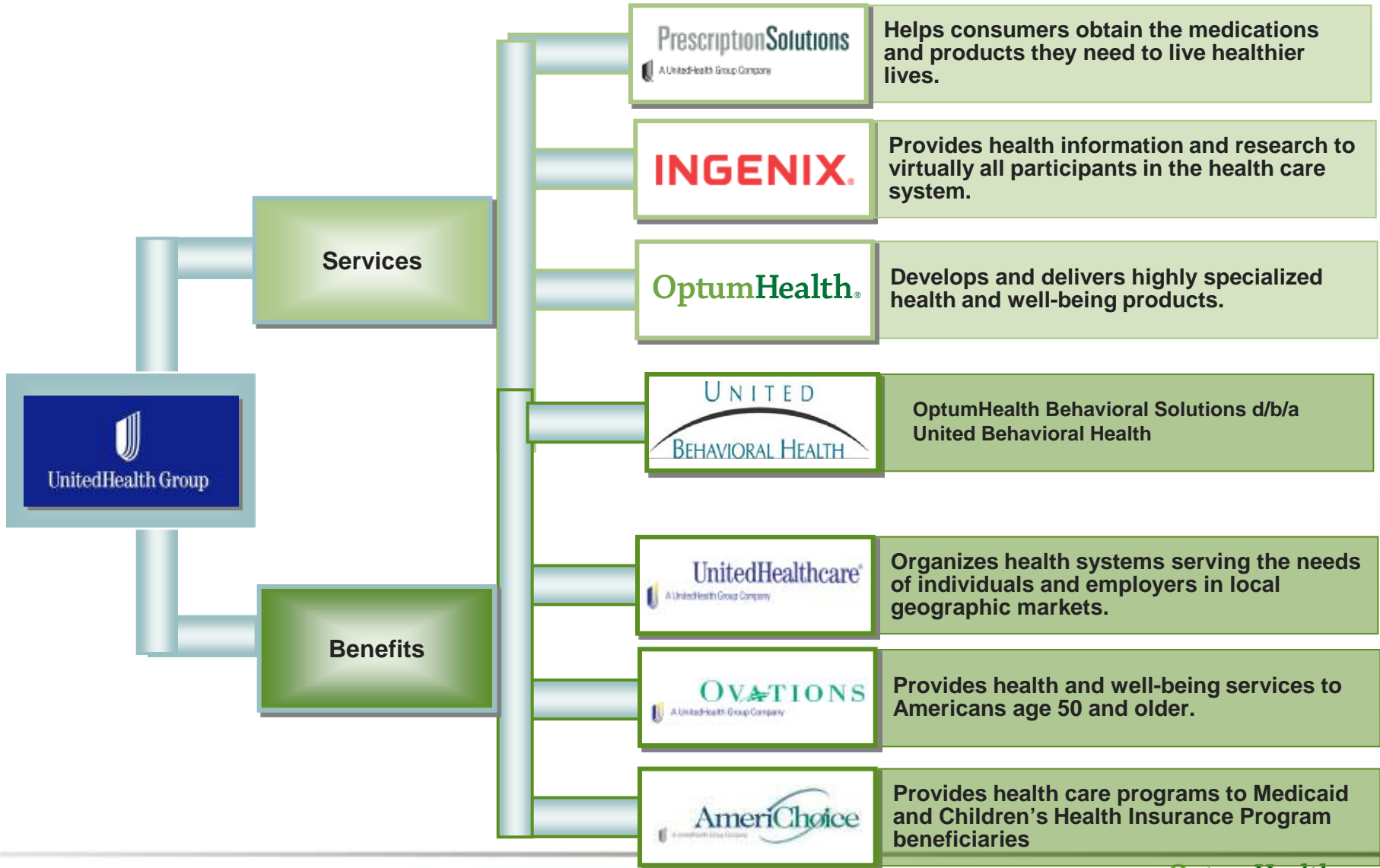
Wendy Smith, Network Manager

8/3/2010

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# The United Family



# Local Network

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**ME Membership: 70,000 members**

## Maine Network

MD	MSW	PHD	RN	Total
56	826	137	43	1062

**9 Community Mental Health Clinics Consisting of 400+ Clinicians**

**22 Unique Facility Contracts with a Variety of Sites across the State**

# Maine Network Development

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## Key Development Focus

- Child/Adolescent Development
- Psychiatric Access
- Medical/Behavioral Integration
- Autism Programs (Applied Behavioral Analysis)

## Current Initiatives

- Group Entity Project – ability to support group level referrals, authorizations and payment

## New Programs

- In Home Therapy and Medication Management
- Bridge on Discharge
- Urgent Appointments
- Diversionary Programs for Inpatient Services
- Ambulatory Detox Protocols and Authorization Processes
- MH and SA IOP and PHP to Aid in the Continuity of Care

# Contact Information

Contact for:	
<b>Commercial Clinical Network</b> <b>Services located in Maine</b>	Wendy Smith Network Manager ph: 207-253-1017 fax: 207-253-1017 e-mail: <a href="mailto:wendy.smith@optumhealth.com">wendy.smith@optumhealth.com</a>  Catherine McGarty Network Associate ph: 781-348-5612 fax: 781-348-5696 e-mail: <a href="mailto:catherine.mcgarty@optumhealth.com">catherine.mcgarty@optumhealth.com</a>
<b>General Network Inquiries</b> <b>8 a.m. to 5 p.m. EST</b>	Phone Queue: 1-877-569-8745 Line answered live by clinical network staff. During peak times calls may roll to voice-mail and your call will be returned within 1 business day.
<b>Public Sector</b>	Kristie Hammonds Network Manager ph: 276-452-4688 fax: 877-243-3413 e-mail: <a href="mailto:kristie_j_hammonds@uhc.com">kristie_j_hammonds@uhc.com</a>

# Contact Information cont.

<p><b>Care Coordination</b></p> <p>Member Eligibility/Benefits Outpatient Authorizations Inpatient Authorizations 24 Hour Access</p>	<p>Member eligibility and routine outpatient authorization may be obtain through ubhonline @ <a href="https://www.ubhonline.com">https://www.ubhonline.com</a></p> <p>In order to ensure the best service for our members and providers, please call the phone number on the back of the member's card prior to rendering services in order to verify benefits and to obtain an authorization if need be.</p> <p>Commercial Business: 800-888-2998 (option 3) Harvard Pilgrim Health Care: 888-777-4742</p>
<p><b>Wellness Assessment</b></p> <p>Specific questions regarding ALERT/Wellness Assessments</p>	<p>Wellness Assessments P.O. Box 27430 Houston, TX 77277 fax: 800-985-6894</p> <p>Peter S. Belson, MSW, LICSW Clinical Practice Specialist ph: 781-348-5624 fax: 414-208-2909 e-mail: <a href="mailto:peter.belson@optumhealth.com">peter.belson@optumhealth.com</a></p>

# Contact Information cont.

<b>Claims/Customer Service</b>	Health Plan Accounts: 800-557-5745 (option 3) Employer Accounts: 800-333-8724	
<p>Complete the standard HCFA/CMS-1500 or UB-04 billing forms, listing the individual providing the service, credentials, ICD-9 or DSM-IV diagnostic codes, CPT procedural codes, standard charges and 7-digit provider number as illustrated on each authorization form.</p> <p>Claims may also be submitted electronically via <a href="http://www.ubhonline.com">www.ubhonline.com</a> secure transactions.</p>		
<b>Claims Addresses</b>	<b>UBH &amp; EAP</b>	<b>HPHC</b>
	P.O. Box 30755 Salt Lake City, UT 84130-0755	P.O. Box 30602 Salt Lake City, UT 84130-0602
<b>Appeals</b>	866-556-8166	
<b>ubhonline</b>  Claims Entry/Inquiry  Eligibility/Benefits  Certification Requests  Demographic Updates  Live Chat	<a href="https://www.ubhonline.com/html/contactUS.html">https://www.ubhonline.com/html/contactUS.html</a>  An instant message feature that allows you to "chat" live with a UBH Technical Support Representative. Hours: 8 a.m. to 5 p.m. Central  Toll-free Telephone 866-209-9320  Hours: 7 a.m. to 9 p.m. Central	



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On Line Access  
[www.ubhonline.com](http://www.ubhonline.com)

# Accessing the UBH Web site

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- Web site: [www.ubhonline.com](http://www.ubhonline.com)
- From the home page, you can access both secure transactions, which require a User ID and password, and general information, which does not require a User ID.
- The site can be accessed 24 hours a day, seven days a week
  - We do have to sometimes bring the site down for routine maintenance or for enhancements
  - Availability standard is 99%
- The ubhonline Support Center can be reached toll-free at 866-209-9320. This help desk will provide support to our users Monday through Friday, 7:00 am-9:00 pm Central time
- Also available during business hours Monday through Friday is our LiveChat feature where users can have a 1:1 online chat with a support person

ubhonline - Clinician Portal - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Refresh Mail Print

Address <https://www.ubhonline.com/> Go Links

ubhonline®

Log In First-time User

Home About Us Clinical Resources Admin Resources Tech Resources Guided Tour Our Network Contact Us

**ANSWERING THE CALL: Claims Customer Service Telephone Access Streamlined. Take our online survey!**

[Learn more](#)

**Quick Links**

- Contact Us
- Join Our Network
- Forms
- User ID Assistance
- Level of Care Guidelines
- CFE
- ALERT®
- FGM
- NPI
- Guidelines/Policies
- ubhonline.com Survey
- EDI Claims

**Admin News**

NEW – Facilities can now access ubhonline.com!

Facilities can now access Eligibility & Benefits, Claim Inquiry, and EPS. Click on the First-time User link above (right) to request a login.

Improve the speed of payment, tips for claims filing!

Why file electronically? You can efficiently reduce or eliminate many of the most common claim submission errors that result in payment delays. [Learn more](#)

Important Benefit Change Notice for New York Child Health Providers

Beginning November 1, 2009, the Child Health Plus program will eliminate the annual limit on mental health/substance abuse benefits - specifically, the limit of 30 days per calendar year for inpatient treatment and 60 visits per calendar year for outpatient treatment.

Remembering the basics, ensuring quality of care

Coordinating care with other health professionals is a critical element of

**Treatment Updates**

TRICARE UMVS

Visit the TRICARE UMVS page for specific information. [Learn more](#)

The Center for Medicare and Medicaid Services (CMS) requires fraud, waste and abuse training

The Centers for Medicare and Medicaid Services (CMS) is requiring annual compliance training related to fraud, waste and abuse. [Learn more](#)

Reminder to Network Providers

To help ensure timely access to care and service, UBH has established a specific standard of care for routine appointments. [Learn more](#)

OptumHealth Introduces WebNeuro!

WebNeuro is a web-based screening tool which measures an individual's social, emotional and general cognition to predict real world functioning. [Learn more](#)

**Working Together**

Updated Version of the Medicare Advantage Regulatory Requirements Appendix goes into effect January 1, 2010 for all contracted providers

Recently, a mailing was sent to all contracted clinicians, groups and facilities in our network concerning a revision to their Medicare Advantage Regulatory Requirements Appendix. [Learn more](#)

Just in Time for the Holidays!

Save some money on your holiday shopping with CFE's Business Partner Rewards Programs. [Learn more](#)

Campaign for Excellence Posts Third Quarter Scores for Enrolled Clinicians!

For an overview of the Campaign for Excellence program, visit the CFE page. [Learn more](#)

ATTN: All Florida Medicaid Network Clinicians

- Cultural Competency Plan Available online!
- Nursing Home Consultations and Services Needed.
- Receive Payment and EOBs

**Transactions**

- Eligibility & Benefits
- Cert Request
- Cert Inquiry
- Claim Entry
- Claim Inquiry
- My ubhonline
- My Practice Info

liveandworkwell

Info about members and member services. [Click here >>](#)

survey

Take a survey to help us serve you better. [Click here >>](#)

The center section of the ubhonline.com Home Page can help you stay aware of new information, as well as changes and enhancements to processes and procedures within UBH. Links within the headlined topics will take you directly to more detailed information available for that subject.

# UBH On-Line – cont. - Home Page

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- There are 4 main sections of the Home Page:
  - Left side has Quick Links to frequently requested information
  - Top has links to general information and the guided tour
  - Center section is used for general UBH announcements and Admin News; Treatment Updates and Working Together
  - Secured Transaction and log on box is on the right

# ubhonline.com – Secure Transactions

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- Secured Transactions log on box is on the right side of home page screen:
  - Clicking under “Transactions” brings the user to the login page, and then to the secured transaction menu
  - Clicking any of the secured transactions brings the user to the login page, and then to that transaction
  - Clicking “view information” gives future users information about obtaining a UserID
    - Contact the ubhonline Support Center at **(866) 209 9320**, or Use the LiveChat feature
    - User ID & initial temporary password is then sent to clinician.
    - Upon receipt, clinician accesses the site to complete the registration process.

# ubhonline.com – Other Secured Features

<b><u>Claim Entry</u></b>	Submit outpatient behavioral health claims with a valid certification number OR a member's ID and Date of Birth, and EAP claims with a valid certification number.
<b><u>Claim Inquiry</u></b>	Check the status of previously submitted claim, research both paper and electronic claims and review claims up to eighteen months.
<b><u>Eligibility &amp; Benefits</u></b>	View coverage information for enrollees.
<b><u>My ubhonline</u></b>	View claims and certifications submitted on ubhonline, as well as update your email address or change your ubhonline password.

# ubhonline.com – No Log-In Required

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■ On the Top and the Left Side of the ubhonline Home Page, visitors to the site may access information and resources that do not require a Log-In ID and password. For example:

- **clinical resources** includes information about –
  - The ALERT program
  - Level of Care and Best Practice Guidelines
  - Patient Education materials
  - Newsletters
  - Forms
  
- **our network** includes –
  - Clinician directories
  - Information on joining the network
  - Information on locating your network manager
  - Recredentialing FAQs



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**Focus on Quality  
Treatment**

# Requirements of ALERT (Algorithms for Effective Reporting and Treatment)

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- The one-page Wellness Assessment (WA) is offered to the member at multiple points during each episode of care to identify targeted risks and to measure treatment progress.
- Clinicians provide the WA to each new UBH member (or to the parent/guardian of a child or adolescent) at session one or, if the member is in crisis, at the second session.
- Former clients returning to treatment for a new episode of care (typically billed with CPT code 90801) should also complete the WA at session one of the new episode of care.
- A second WA is administered at session 3, 4 or 5.
- Care Advocates receive algorithm results based on member responses to the WA, and may contact clinicians to conduct a brief clinical review and to assist in coordinating additional services, when indicated.
- You may receive a letter alerting you to a targeted risk which has been identified. This letter does not require a call back to UBH; however, if you need additional resources, you may call a UBH Care Advocate for assistance.
- Some targeted risk factors identified after the review of the second WA may result in a clinician being asked to administer a third WA at a later point.
- If a member did not complete the WA at session one and does not return for a second session, please complete the client and clinician demographic sections located at the top of the WA, fill in the “MRef” bubble, and return it to UBH.

# How ALERT Adds Value For Network Clinicians

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- ALERT provides a confidential, objective and validated means of assessing members by identifying specific clinical risks and potential poor outcomes
- The WA promotes an outcomes based psychotherapeutic approach
- The WA is easy and quick to administer
- Assists you with coordination of care when indicated
- Multiple administrations of WAs during the course of care and at 4 months follow-up provide real-time feedback about change in functioning including maintenance of clinical gains or unexpected setbacks
- Limits your administrative work
  - You will receive letters or calls only on those members who are identified as being most likely to benefit from additional care advocacy interventions
  - Outpatient Treatment Reports and close-ended authorizations are no longer required

# Campaign for Excellence (CFE) – What is it?

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- CFE is a clinical outcomes recognition program
- CFE was developed in partnership with our Clinician Advisory Council composed of industry-leading experts in the quality evaluation of clinicians
- We study and measure the member outcomes for the clinicians in our network. Clinicians are tiered based on performance
- Our clinician-level analysis accounts for variance in patient severity, so that providers who work with more severe cases are reviewed accordingly
- We share our outcomes data with participating clinicians to support continuing quality improvement as part of this program
- We are committed to recognizing clinicians who achieve superior outcomes
- Members can see who are top tier providers

# Focus on Driving Quality

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## CFE - Campaign For Excellence

### Clinical Outcomes Recognition Program

- External CFE Advisory Council composed of industry-leading experts in the evaluation of clinician quality
- Pilot profile reports sent to 6,000 clinicians for feedback, which was used by the Council to design the Campaign for Excellence
- Clinicians to be ranked by treatment outcomes from the Alert Wellness Assessments
- Consumer portals to be enabled to identify clinicians who meet program standards for quality
- To date, UBH nationally has about 4,000 providers participating in CFE, including 427 in MA, 27 in ME, 68 in NH, and 72 in RI

# Campaign for Excellence – The Benefits

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- Clinicians can see their scores and tier level online at [www.ubhonline.com](http://www.ubhonline.com)
- Clinicians receive the benefit of increased referrals through recognition on our member portal
- Established the Business Partner Reward Program to provide discounts and services to CFE enrollees
- Future phase to include Pay for Performance measures and incentives



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**Federal Mental  
Health Parity**

# Interim Final Rule: The Basics

- Published in Federal Register on February 2, 2010
- “Interim Final Rule” is a binding rule
- Some plans **must** comply with regulation by July 1, 2010 because they are on a mid year cycle
- Majority of plans must comply by Jan 1, 2011
- Special Exceptions to the Rules
  - Exclude Medicaid Managed Care Plans/SCHIP from regulations but not the law
  - Collectively bargained plans applicable at next collective bargaining cycle
  - Self insured plans subject to federal parity laws but not to state behavioral health laws



# General Rule and Categories

## General Rule:

Group health plans offering both medical/surgical benefits and mental health or substance use disorder benefits must ensure that the financial requirements and treatment limitations are no more restrictive than those predominately applied to substantially all medical/surgical benefits under the plan

- on a plan by plan bases
- by each benefit categories

## Categories

### Financial Requirements:

- Copayments
- Coinsurance
- Deductibles
- Out-of-pocket maximums
- Annual dollar limits on benefits\*
- Lifetime dollar limits on benefits\*

No coverage mandate – plans (or state law for insured plans) drive what is covered, but if you cover it, you **must** do so in parity

\*Exceptions to Interim Final Rule per 1996 MHP Act requirements.

# OptumHealth Behavioral Solutions

## Network Solutions in response to Parity

*Our managed performance-tiered network delivers the unmatched quality, size, transparency & efficient use of medical management tools that allow us to manage unit cost trends aggressively, minimizing the cost impact of parity.*

- ✓ **Performance Management** — We deliver value to our clients, members and practitioners by identifying those providers who deliver the best clinical outcomes
- ✓ **Innovative Management Tools** — Our proprietary and industry-leading management tools allow us to evaluate our practitioners on quality and cost and communicate that to consumers
- ✓ **Practitioner Engagement and Partnership** — We actively engage and support our practitioners to optimize their practice by steering of referrals, effective administrative supports and creative financial arrangements

### Deep Discounts

- **Clinicians: 35-45% average discount per procedure code**
- **Facilities: 42% average discount off billed charge**

Largest network available in the nation

- **Over 84,000 clinicians**
- **Over 5,000 service locations**

### Concentration of Practitioners

- **Highest ratio of practitioners to members in all national markets**
- **Rapid network development capabilities in rural markets**

### Highest Standards

- **Board Certification requirement for behavioral health physicians**
- **Mandatory ANCC certification in behavioral health for nurse practitioners**
- **Required EAP certification for all EAP network practitioners**

# In Summary

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- UBH will be in compliance as required and is reviewing all its current processes in light of the parity regulations
- Since UBH works with numerous medical plans, some processes may vary depending on the member's benefit plan
- UBH will continue to be responsible for overseeing the appropriate utilization of behavioral health benefits to ensure the right care, at the right time, in the most appropriate setting for its enrollees.