

# NBH News

## Northeast Behavioral Health

### Mission:

To provide a comprehensive array of superior behavioral health services that support safe, successful, and self-sufficient lives throughout our twelve counties.

### Provider Newsletter

This is the first edition of our new provider newsletter. Our goal for this newsletter is to insure good communication and coordination with our Provider Network.

There are many exciting developments that affect our day to day mode of operation...not only at NBH but also for you. We will to keep you up to date on the developments in Federal and State Medicaid regulations, practice guidelines, evidenced based mental health practices and many other topics.



### Mind Benders

Often during a session, our clients get stuck in an irrational perception or belief -- thinking their way is the only way to see it. A quick demonstration can sometimes open their mind to a new perspective.

Ask them to tell you the two ways to interpret each of the following:

**LOVEISNOWHERE.**

**THEYTOLDHIMTOBEATTHEFRONTDOOR.**

**WOMEN WITHOUT HER MAN  
WOULD BE NOTHING.**

**YOU'LL BE LUCKY TO GET HIM  
TO WORK FOR YOU.**



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### We want to pay you!

You have worked hard. Your clients are making good progress. You deserve to be paid — without a lot of hassle. However, Federal and State Medicaid regulations requirement have to be met before NBH can issue payment.

To prevent claim problems follow these simple steps:

- ◆ Get an authorization before services are provided.
- ◆ Send all required forms (Intake Summary, Service Plan, CCAR, and Release of Information) in a timely matter which are complete and signed.
- ◆ Claims must be for the same CPT code as authorized.
- ◆ Dates of service must fall within the dates authorized.
- ◆ Send your claims directly to:  
NBH Claims  
InNet, Inc  
6801 S Yosemite Street, Suite 101  
Centennial, CO 80112

## Mark German Joins the NBH Team

Mark German, MA, LPC, has joined Northeast Behavioral Health replacing Rachel Torgerson as the Outpatient Utilization Coordinator. Mark will be your contact to coordinate authorizations for outpatient treatment. He will also review and track service plans and CCARs and conduct semi-annual provider audits.

Mark has over 35 years of managed

mental health care and clinical experience. He served as National NE Region Network Manager and as Executive Director in Milwaukee and Des Moines for United Behavioral Health. He was the Mountain States Area Director for Aetna's *Human Affairs International* mental health division. Most recently, he was Mental Health Director at the El Paso County Jail in Colorado Springs.

Mark resides in Brighton, CO, with his wife, dog and 4

cats. Mark and two of his pets are certified in Animal Assisted Therapy. Mark's interests include presidential politics and history. He collects presidential memorabilia, biographies, campaign buttons, stamps, etc. He has 2 adult children who live in Colorado Springs and Phoenix.

Mark looks forward to working with you. You can contact him at any of these three telephone numbers.

970-347-2375  
888-296-5827  
970-392-1354 (fax)



## State releases Request for Proposal

On September 10th, the Department of Health Care Policy and Financing (HCPF) released the final version of the Request for Proposal (RFP) for the Colorado Medicaid Program. NBH is now in the process of preparing its proposal to retain its contract as the MHASA for the 12 northeast counties in Colorado. One of the many changes in the RFP is that the MHASA will be called a Behavioral Health Organization (BHO).

NBH has confidence that we will remain the BHO for this area. Our many years of service and experience as a managed care organization within this Colorado region is a definite advantage. We have you as providers to thank for the strengths you have added to our success.

The proposal is due October 12, 2004, and the tentative date for a final decision is set for October 27, 2004. We will keep you informed as we receive more information.

## NBH gears up for External Quality Review Site Visit

The Balanced Budget Act of 1997 requires State Medicaid agencies to develop a quality assessment and improvement strategy that is consistent with standards established by the Department of Health and Human Services. The regulations specifying these standards was finalized in June of 2002. The purpose of the EQR site visit is to determine the extent to which we have complied with the Federal quality standards for Medicaid contractors.

NBH's site visit is scheduled for mid-November. We are currently reviewing the protocol for this visit. NBH has strived to provide the best services for our consumers and to comply with standards set by the Federal government. We feel we will receive a favorable report after the site visit.



## Using What Works!

### Evidenced Based Mental Health Practices

The Northeast Behavioral Health Quality Improvement Committee has adopted ten new Practice Guidelines based on the “Colorado Work Group For Evidenced Based Mental Health Practices - Final Report” and “The Recovery Model.” The Colorado Work Group report is the result of the work of 14 mental health experts, consumers and family members in collaboration with the Colorado Department of Human Services – Division of Mental Health. The group worked over 18 months to develop the practices. Evidence Based Practices have been shown to be consistently effective in systemically conducted scientific research. They include:

- ◆ **Cognitive Therapy** methods that involve redirecting the client’s attention, perceptions, thoughts and beliefs, away from irrational and self defeating patterns, to specific measurable solution-focused behavior change.
- ◆ **Dialectical Behavioral Therapy** methods provide clients training in interpersonal effectiveness skills in individual and group settings. DBT relies heavily on

contingence management using the relationship with the therapist as the main reinforcer. DBT has been found to be highly effective with Borderline Personality Disorders. A good summary of DBT is available at [www.priory.com/dbt.htm](http://www.priory.com/dbt.htm)

- ◆ **Proven psychiatric medications, in combination with psycho-therapy and other treatment components.**
- ◆ **Supported employment** facilitates employment and offers clients ongoing support to thrive in competitive employment. Clients reap the benefits of self-sufficiency, self-efficacy and self-esteem.
- ◆ **School Based Services** have been found to be especially effective in early identification and prevention, and in the behavior management of ADHD and conduct problems.
- ◆ **Family Based Services** often incorporates home visits and informal resources that provide a strategic, structural, focused, and short-term model of treatment.

- ◆ **Home Based Crisis Intervention** provides in-home services for children at high risk of hospitalization or placement. It includes skill building, referral and linkage and/or respite care.
- ◆ **Family Psycho-education** combines education, problem solving, crisis intervention and support.
- ◆ **Consumer-driven Wellness Recovery Action Plans** promote the use of community supports, peer services, consumer action and accessing clinical services.
- ◆ **Wraparound Case Management Services** for multi-problem consumers incorporates case management and formal and informal supports.

The Recovery Model is a process, an outlook, and a guiding principle. It promotes hope, empowerment, taking responsibility, building on strengths and perseverance. It places a priority on self-help and consumer and family advocacy. More information can be found in the books [Strategies for Independence](#) and [Creating the Life That You Want](#) by Ed Knight,

or in the Recovery Fact Sheet at [www.aaworldhealth.org](http://www.aaworldhealth.org).

We appreciate your efforts in following and supporting use of these practice guidelines. If you want a copy of the final report of the Colorado Work Group for Evidence Based Mental Health Practices and materials on the Recovery Model, please contact us.

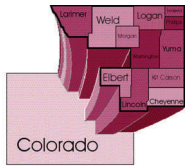
**CCARs — Need to be — Complete, Correct & Always Reviewed**

OK, so CCAR really means Colorado Client Assessment Record.

To meet the State’s strict requirements, we need your help in making sure ALL of the CCAR is complete. The items most often overlooked are:

- ◆ Overall/Change in Level of Functioning
- ◆ Overall Degree of Problem Severity
- ◆ Overall Strengths/ Resources
- ◆ Place of Residence

Please proof them and make sure all pages are included before sending them on the NBH.



# Northeast Behavioral Health

1306 11th Avenue  
Greeley, CO 80631

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## Provider Manual

Many of you have already received our updated Provider Manual. The rest should be mailed out over the next two weeks.

The manual is divided into sections such as General Information, Consumer Affairs, Clinical Services, Provider Assistance and Information, Utilization Management, Quality Improvement, Right to Appeal, Billing for Services, Clinical Forms, Compliance and Fraud, and HIPPA. There is an appendix with brochures, CCAR instructions and other information for your general usage.

There has been many changes to Consumer Affairs such as Grievance Procedures, Second Opinions, Alternative Means in Requesting Information, Advance Directives and Accommodation for Special Needs.

Many of the forms in Section 9 have been updated. We have also added new forms such as Psychiatric Services Only Service Plan and the Medical Necessity Review. We have also included a few miscellaneous forms for your use if you wish.

You may make copies of these forms, however we

ask that you not make any changes to them. If you would like the forms in electronic format, please contact us.

The section on Compliance and Fraud includes our Compliance Policy and Fraud information.

If you do not receive your copy of the manual by end of October or if you have any questions, please call us.

### **Important Contact Information:**

Outpatient Authorizations:

Mark German  
970-347-2375

Provider Relations:

LaRue Leffingwell  
970-347-2374

Claims Information:

Sylvia Job  
970-347-2379

Inpatient/Intensive Services:

Anne Mitchell  
970-347-2282

Or toll-free 888-296-5827

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