

Great Lakes Provider Satisfaction Survey

ValueOptions[®] understands that provider feedback is vital to learning about areas that need improvement. In the past, many of you have participated in the annual Provider Satisfaction survey conducted by Fact Finders, an independent survey agency.

If you are a Great Lakes provider, please take a moment to complete the ValueOptions[®] Great Lakes Provider Satisfaction Survey administered through SurveyMonkey. Your feedback helps ValueOptions[®] improve our client and member services. All responses are anonymous and strictly confidential.

The survey will be available Dec. 1, 2008 through Jan. 15, 2009. To learn more please go to: http://valueoptionsdev/providers/GLProvider/GLSC_2008_Provider_Satisfaction_Survey.html
Thanks in advance for participating!

Electronic Funds Transfer & PaySpan Health Info

ValueOptions[®] has begun implementing Electronic Fund Transfer (EFT), an enhanced payment and reconciliation system. Just a few of the many benefits:

- FREE for all providers
- No wait time for paper checks or paper vouchers to be printed and delivered
- Improved flow through auto payments
- Export data into your Practice Management or Patient Account System

To learn more, please go to http://www.valueoptions.com/providers/Files/ppt/PaySpan_General_Training_Information.ppt or call our electronic billing hotline at 888-247-9311.

Substance Abuse, Health Problems and Sleep

The consequences of sleep deprivation (on productivity at work, health, sense of well-being and relationships) are substantial, but largely unappreciated. Employee assistance professionals can educate employees about the importance of sleep and its links to health and substance abuse problems.

You probably have quite a few clients with sleep problems. Consider that about 75 percent of adults experience sleep problems at least a few nights each week, according to the National Sleep Foundation. The National Institute of Health (NIH) estimates that at least 40 million people in the United States suffer from chronic sleep disorders.

Sleep problems associated with medical, mental and substance abuse problems

NIH recognizes that sleep problems are closely affiliated with medical disorders — such as cardiovascular disease, diabetes, obesity, cancer and Alzheimer's disease — and can mimic the experience of a medical disorder. Evidence also suggests that sleep disturbances can be a symptom or risk factor for substance abuse and mental health issues — including depression, adjustment disorders, bipolar disorder, generalized anxiety disorder, panic disorder, personality disorders, schizophrenia and somatoform disorders.

Regardless of whether sleep problems precede or follow a medical, mental health or substance abuse issue, the sleep disturbance needs to be addressed. Even if it is not the primary problem, it may exacerbate and/or compound the symptoms of an already complex diagnosis.

What Employee Assistance professionals can do

A sleep assessment is an important piece of an overall assessment by an Employee Assistance (EA) professional. The sleep assessment should evaluate the client's

current sleep habits and identify any disturbances and/or sleep debt.

An EA professional can also help clients understand the links between sleep behavior and mental and physical health. Specifically, he or she can:

- Provide information about sleep hygiene.
- Help implement a personalized healthy sleep program. The EA professional can help clients commit to their program, overcome obstacles, tap their support network and locate additional resources.
- Offer assistance in reducing stress. Because problem sleepers often report that high levels of stress disrupt their sleep, an Employee Assistance Program (EAP) should assist clients in recognizing the sources of stress in their lives and developing a strategy to manage stress more effectively.
- Assist with referrals when indicated. The EA professional should facilitate effective treatment linkages if there are any signs of a sleep disorder or if mental health, substance abuse, or physical health problems are interfering with sleep.

Improved management of sleep problems will raise the health and quality of life of all individuals, but especially those with substance abuse or mental or physical health issues, as these concerns often go hand-in-hand.

This summary is an excerpt from an article that was written by Mary Hill, LCSW, CEAP, regional manager of Health and Performance Solutions at ValueOptions[®], and was recently published in the *Journal of Employee Assistance*.

To read the full article, which includes sleep hygiene tips to share with clients visit: http://valueoptions.com/company/Coverage/pdfs/2008/100108_Article_Journal_of_Employee_Assistance_Sleep.pdf.

Treatment Record Documentation and Clinical Practice Guidelines Compliance: What is Required?

An essential component of quality behavioral health care is the consistent and complete documentation of the treatment record. All ValueOptions® providers are required to maintain member records in compliance with the policies and procedures of ValueOptions® and accrediting body standards for accreditations that ValueOptions® pursues (i.e. The National Committee for Quality Assurance (NCQA), Managed Behavioral Healthcare Organization (MBHO) standards and URAC Health Utilization Standards). Compliance is also mandatory for Federal and State regulations that require that “patient records are maintained in a manner that is current, comprehensive, detailed, organized, and legible to promote effective patient care and quality review.”

Treatment records are the primary vehicle for the maintenance and communication of a patient’s personal health information. Well-documented treatment records facilitate communication, coordination and continuity of care as well as promote efficiency and effective treatment.

The ValueOptions® Great Lakes Service Center’s guidelines for treatment record documentation define its expectations for practitioners. These guidelines require that treatment records should be legibly maintained and contain sufficient information to identify the member, support the diagnosis, justify the treatment and document the course and results of treatment accurately. At minimum, the treatment record should contain:

- General patient information, demographics
- Consent to release information to the Primary Care Physician and to other relevant treating health care providers
- Informed Consent Forms

- Relevant member histories including personal, family, medical, medication, psychiatric treatment and substance use, and any treatment
- Test results or other relevant treatment related information
- Presenting complaint(s)
- Clinical assessment, diagnosis and a treatment plan with measurable treatment goals
- Risk assessments
- If prescribed, documentation of medication, dosage and dates of dosage changes
- Progress notes that include the member’s current complaints, a clinical assessment and treatment provided (a risk evaluation is noted)
- Periodic reassessments of the treatment plan and goals
- Member status at discharge from treatment, including notation of any referrals.

The Great Lakes Service Center’s Quality Management Department staff regularly conducts audits of member treatment records. Providers not scoring at least 80 percent overall compliance are asked to develop a corrective action plan. During 2007, over 900 record reviews were conducted. Of the 900 records audited, 93 percent scored 80 percent or above. Audit questions with the lowest compliance rate were found with the following types of documentation:

- Evidence of coordination of care with the Primary Care Provider or evidence of member declination
- Evidence of coordination of care between behavioral health care institutions
- For individuals 12 and older, the documentation includes past and present use of cigarettes and alcohol, as well as illicit, prescribed and over-the-counter drugs

- The record shows evidence of coordination with a youth’s school to achieve school-related goals
- For children and adolescents, prenatal and perinatal events, developmental history are documented

Copies of the Great Lakes Service Center treatment record audit tool is available upon request by calling 248-697-0536.

ValueOptions® also monitors compliance with clinical practice guidelines for common diagnoses. According to records, the following identifies areas of diagnosis related treatment practice needing improvement:

- Major Depression (296.2 or 296.3 series): Mood, symptoms and suicidality are assessed at every visit
- Schizophrenia (295 series): When anti-psychotic medications are prescribed, there is evidence of observation for side effects including EPS
- Bipolar Disorder (296.0x, 296.4x, 296.5x, 296.6x, 296.7x, 296.89 series): Mood, symptoms and suicidality are assessed at every visit
- Co-occurring psychiatric and substance related disorders
- Plan includes barriers to adherence and interventions that address barriers
- Plan includes relapse, relapse triggers, skills needed for triggers, and contingency plans for difficult events
- Plan includes both substance abuse, psychiatric issues and interventions

The ValueOptions® Provider Handbook is available for download under Provider Online Services on ValueOptions.com.

Contact Us

Please send your comments, ideas and suggestions for future editions of Provider eNews to PRelations@ValueOptions.com.