

beacon Valued Provider eNewsletter



Advancing Medication-Assisted Treatment through Education

As overdose deaths involving opioids continue to increase at alarming rates, Beacon asserts its support for medication-assisted treatment (MAT) as an evidence-based practice and key element for recovery. The American Society of Addiction Medicine (ASAM) describes the efficacy of MAT in its publication, The ASAM National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use. MAT is not a stand-alone treatment choice; rather, it can be very effective as part of a holistic treatment program that includes behavioral, cognitive, and other recovery-oriented interventions, treatment agreements, urine toxicology screens, and utilization of Prescription Drug Monitoring Programs (PDMPs). MAT represents a fundamental shift from how substance use disorders (SUDs) have been historically treated. Evidence shows MAT can lead to better outcomes, including:

- Decreased opiate-related deaths
- Improved overall health and productivity when people are adequately treated and monitored

March 2018

Provider Handbook • Read More Contact Information • Read More

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Contact Us:

Ideas and suggestions for future editions? PRcommunications@beaconhealthoptions.com. Do not have internet access and need a hard copy? Call: 800-397-1630

- Enhanced compliance with-and retention in-treatment
- Decreased illicit drug use

Improved education and treatment models ultimately help members successfully complete a withdrawal management protocol, access MAT, and adhere to MAT programs.

Beacon continues to partner with our providers, members, health plans, Medicaid agencies, policy makers, and our medical leadership to implement the key elements of the chronic disease model of care, such as increasing awareness and access to evidenced-based treatment (including MAT) in each of our markets.

We ask our providers to consider what resources they make available to members with opioid use disorder, and their families, who are considering which medication-assisted treatment may be best for them.

For more information, read our **white paper**, "Confronting the Crisis of Opioid Addiction," through our Beacon Lens page (scroll to bottom) or access additional opioid treatment resources through the **Substance Use Disorder** section of our Expertise web pages.

CONFRONTING THE CRISIS OF OPIOID ADDICTION

A BEACON HEALTH OPTIONS WHITE PAPER

Tips for Submitting ABA Progress Notes

Beacon asks our providers, including those providing Applied Behavior Analysis (ABA) services, to document the delivery of all treatment, including the use of evidence-based guidelines, treatment protocols, and progress towards treatment goals.

Our documentation standards are informed by industry practice, licensing boards, and regulatory and accrediting bodies. Specifically for ABA treatment, thorough progress notes are vital to timely claims payment.

Progress notes must be submitted and should include:

- A treatment plan
- Start and stop times for timed services
- Data and goals for maladaptive behaviors for direct ABA services
- Consent-to-treat forms
- A physician's order for treatment

Progress notes should be legible and support the service billed, and be signed and dated by authorized personnel. The treating professional must meet the requirements to provide the service.

The provider section of Beacon's website includes Clinical Practice Guidelines for treating members with Autism Spectrum Disorder. Visit the **Clinical Practice Guidelines** page and scroll down to "Autism Spectrum Disorders (ASD)" to see guidelines from the American Academy of Child and Adolescent Psychiatry and the American Academy of Pediatrics. Additionally, our **ABA** networkspecific page includes links to general ABA and training information, and state-specific documents.

If you have additional questions while completing notes for a member, contact Beacon based on the behavioral health phone number located on the member's insurance card.

Look for articles discussing military family life, the impact of deployment and combat stress, and common issues that military families face.

The Importance of EAP Providers

A study from research and technical advisory firm Forrester Research, Inc., **Predictions 2018**: **Employee Experience Powers the Future of Work**, highlights key shifts in the workplace that will contribute to growth by helping employees improve customers' experiences.

Among the study's findings is that in the U.S., only 32 percent of employees are engaged. Employees' lack of engagement is reinforced by employers focusing on factors like employee recognition, rather than finding the underlying cause of the disengagement.

Participating providers in Beacon's EAP network play a vital role in supporting member health and well-being. As reported in EASNA's **The Value of EAP**, "... employees who use EAPs often experience positive changes in their work performance, such as having fewer days late or absent, higher levels of work productivity, and improved work team relations."

We rely on our EAP providers to assist with short-term, solution-focused counseling. In addition, through the EAP process, if a complex issue is discovered, members are more likely to accept referrals for mental health or substance use services to continue treatment.

To learn more, visit the Workplace Health and Performance area of our Expertise web page.

New Feature: Serving Those who Serve

Beginning with the April newsletter, Beacon will include information to help our providers better understand and work with military members and their families. We will present articles discussing military family life, the impact of deployment and combat stress, and common issues that military families face, as well as language, culture, and camaraderie of the military.

Each month, you will find the article under the headline of "Serving Those Who Serve." Sources for the information we will share include content from Beacon's Achieve Solutions and Military OneSource EAP websites, Department of Defense sites such as the Center for Deployment Psychology and Military OneSource, and others grounded in clinical research and focused on the needs of service members, veterans, and their families. In addition, we encourage all providers to complete the Center for Deployment Psychology's Military Culture: Core Competencies for Health Care Professionals course. The free course is available online and includes continuing education credit. According to the Department of Veteran Affairs, the modules are presented using interactive features, video vignettes, case examples, and treatment planning scenarios. The training was developed using research, surveys, and extensive interviews with service members and veterans.

Take the course any time, or begin with the self-awareness exercise to understand your own beliefs, expectations, and biases about military culture. Find the course, exercise, and other resources at the Center for Deployment Psychology **website**. ■

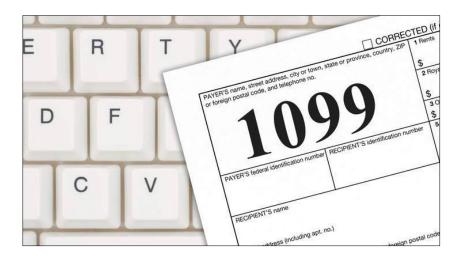
Form 1099 on the Way

Tax season is in full swing!

Beacon sent IRS Forms 1099 MISC and INT to provider pay to vendor addresses by the end of January 2018. 1099s are generated for providers who were issued total payments of \$600 or more in 2017.

Please note: Beacon has many different legal entities. Providers may receive multiple forms if total payments of \$600 or more were issued from different legally recognized entities within our organization. Each form was sent in a separate envelope, and all were mailed by January 31, 2018.

If you have questions, please contact our 1099 Hotline at 703-390-4936. This is a voice mailbox monitored by our Finance Department, and all calls will be returned within three business days.



ProviderConnect: Giving You Control

With the goal of helping larger practices manage their own staff in ProviderConnect, the Super User functionality was born. While offering additional flexibility, the ProviderConnect Super User functionality maintains the need to enhance security measures for providers and ensure compliance with HIPAA regulations.

With this functionality, you can:

- Create new login accounts
- Deactivate login accounts
- Control user access to certain areas within ProviderConnect

Super Users can grant varying levels of functionality to employees within their office, so that only specific employees will have access to processes and information. For example, a Super User can restrict access so that their accounts payable clerk can only process claims.



Beginning in April 2018, CMS will start mailing new Medicare cards with MBIs to people with Medicare. Three user types are available:

Super User (Administrator)

- Manages other users' login accounts
- Creates new login accounts and disables users
- Controls access to specific areas within ProviderConnect

Managed User (with rights managed by the Super User)

• Managed by a Super User and only has access to functions to which they have been granted access

Standard User

- Not managed by another user or does not manage other users
- Has access to certain areas of ProviderConnect depending on his/her assigned role

For additional information, please refer to the "Role-based Security" section in the **ProviderConnect User Guide**.

To obtain a Super User Account, complete the **Account Request** form (scroll to the section titled Forms) and include information for the Super User sections. For additional assistance with ProviderConnect, please call the EDI Helpdesk at 888-247-9311 from 8 a.m.-6 p.m. ET or email e-supportservices@beaconhealthoptions.com. ■

New Medicare Cards Are Almost Here

In recent editions of the Valued Provider eNewsletter, we've discussed upcoming changes to Medicare cards to help you prepare. Here is the latest information from the Centers for Medicare and Medicaid Services (CMS) to ensure you are ready in April. For more information, visit the **CMS Medicare Card Providers** page.

Look at your practice management systems and business processes and determine what changes you need to make to use the new Medicare Beneficiary Identifier (MBI). You'll need to make those changes and test them by April 2018, before CMS mails out new Medicare cards. Even though CMS will stop using Social Security Numbers to identify Medicare beneficiaries, what won't change is how your Social Security Number's used for the IRS and tax reasons, like on your W-9.

What should I do to get ready for the new Medicare cards and MBIs?

It's important that you're ready to see people who don't have their SSNs on theirs cards, because anyone who is new to Medicare in April 2018 and after will only get a card with the MBI.

You may want to consider:

- Automatically accepting the new MBI from the **remittance advice (835) transaction**.
- Identifying members who qualify for Medicare under the Railroad Retirement Board (RRB).

If you don't already have access to your Medicare Administrative Contractors (MAC) provider portal, **sign up** so you can use the provider MBI look-up tool starting in June 2018. Your office/facility staff might want to coordinate with your billing/administrative staff, who may already have portal access.

How will I get members' MBIs?

Beginning in April 2018, CMS will start mailing new Medicare cards with MBIs to people with Medicare. To learn when your members may begin receiving their new cards, see the 13 **states and territories** in the first wave of mailings.

Beginning in October 2018, through the **transition period**, when you submit a claim using your member's valid and active HICN, CMS will return both the HICN and the MBI on every remittance advice. The MBI will be in the same place you currently get the "changed HICN."

How can I help my members?

Let your members know their new cards and new numbers are coming and ask them to bring their new Medicare cards to their appointments. Flyers that you can post or hand out to your patients are available in **English**, **Spanish**, **Korean**, **Chinese**, **Japanese**, **Vietnamese**, or **Arabic**.

In the meantime, if the address you have on file is different from the address you get in electronic eligibility transaction responses, ask your members to correct their address in Medicare's records by contacting the **Social Security Administration**.

You can also go to CMS' **partners and employers** page to find and order these and more resources to share with your members about the new Medicare cards and MBIs. ■

Appointment Availability Reminder

According to Beacon's Provider Handbook, participating providers are expected to maintain established office hours and appointment access. Beacon's provider contract requires that the hours of operation of all network providers be convenient to the members served and are not discriminatory. For example, hours of operation may not be different for commercially insured members vs. public fee-for-service-insured individuals.

Except as otherwise required by a specific client and/or government-sponsored health benefit program, participating providers are required to maintain the following standards of availability for appointments:

- Life-threatening emergency: immediately
- Non-life-threatening emergency: within six hours
- Urgent needs: within 48 hours
- Routine office visits: within ten business days

Our goal is to provide a steady reminder to review demographics often and update as necessary.



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**.

Have You Checked Your Demographic Information?

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 or appointment availability changes 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**.

Beacon will send reminders like this throughout the year. This is in no way to advise that information is inaccurate. Our goal is to provide a steady reminder to review often and update as necessary, to ensure information reflected in our online directory is accurate.

As a Centers for Medicare and Medicaid Services (CMS) Qualified Health Plan, 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 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 with the Council for Affordable Quality Healthcare® (CAQH), for example, your 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 your 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 **Regional Provider Relations team**.

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(e) beacon lens

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:

- Probe the system to improve opioid use disorder treatment
- Practical steps to clinical excellence
- The Kennedy Forum Illinois: Mental Health Justice
- Serious Mental Illness and Cancer: Treatment Outside the Box
- Stronger Support for Americans who Risk their Lives for Ours: Changes for Veterans
- Half the Battle: My Story of Bipolar Disorder in an Already Sober World

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!

New York Providers: Webinar Opportunities

Below is our New York team's monthly webinar schedule. Many of these sessions are general enough for any provider to attend; however, some of the information is specific to New York State contracts and lines of business. Registration for all webinars is required.

NYC Webinars Beacon Payment Integrity: Introduction to Compliance	
Wed., March 14, 2018 from 2 p.m3 p.m. ET	Register Now!
Adverse Incident Reporting	
This webinar will cover adverse incidents, types of inci will also discuss potential quality-of-care issues.	dents to report, and how to report them. We
Thursday, March 22, 2018 from 11 a.m12 p.m. ET	Register Now!
Managed Care 101	
We will cover the basic terminology and provide general guidance on how to work with Beacon.	
Wednesday, March 21, 2018 from 3-4 p.m. ET	Register Now!
Beacon Provider Orientation	
This webinar will provide information about authorizations, QMP/HARP, HCBS, PROS/ACT, and billing, and is designed for providers new to Beacon and Managed Care.	
Thursday, March 8, 2018 from 11 a.m12 p.m. ET	Register Now!
Billing, Claims, and eServices	
This webinar will cover how to bill and use our online e	Services portal.
Thursday, March 8, 2018 from 3-4 p.m. ET	Register Now!
Thursday, March 15, 2018 from 11 a.m12 p.m. ET	Register Now!
Follow-up After Hospitalization/HEDIS Measure Overv	iew
This webinar will cover new HEDIS measures for follow	up after hospitalization.
Thursday, March 22, 2018 from 3-4 p.m. ET	Register Now!

For any New York-specific provider training questions, please email **nyptrainings**@ **beaconhealthoptions.com**.

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Beacon Commercial Webinars

The following webinars are designed for providers contracted with Beacon's commercial network. These sessions will review our ProviderConnect system and support efforts to educate providers about our electronic resources. Providers will learn about various system functionality, as well as administrative updates.

Note: Various contracts may offer specific trainings and resources. Visit our **Network Specific Info** page to learn more.

Looking for information related to a Beacon Health Strategies plan? Visit our **Provider Login** page and enter the state and health plan to access resources.

Overview of ProviderConnect

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

- Tuesday, April 10, 2018 1-2 p.m. ET
- Tuesday, May 8, 2018 1-2 p.m. ET

Authorizations in ProviderConnect

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

• Wednesday, April 18, 2018 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, March 13, 2018 1-2 p.m. ET
- Wednesday, May 9, 2018 1:30-2:30 p.m. ET

ProviderConnect Tips and Tricks

Reviews hot topics and recent enhancements related to ProviderConnect.

• Thursday, March 29, 2018 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.

