
From: Credible Behavioral Health, Inc. <jaclyn.o'donnell@credibleinc.com>
Sent: Thursday, March 30, 2017 7:31 AM
To: Credible Education
Subject: Credible Behavioral Health Industry News & Updates - March 2017



Industry News & Updates - March 2017

DEAR PARTNER,

Based on Partner surveys and user group feedback, Credible is now providing monthly updates on billing/payer, clinical, and industry news to help keep our Partner Community up-to-date. Below please find our monthly update focused on clinical and industry oriented news. You can find all updates for billing/payer, clinical, and industry news in the Help section.

Federal Policy Updates

[SAMHSA Modernizes Confidentiality Requirements for Substance Use Disorder Client Information](#)

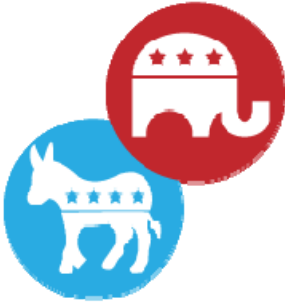
The new Final Rule was issued to modernize its requirements and facilitate the health information exchange required for participation in new payment models, while addressing the privacy concerns of clients seeking treatment for substance use disorders. The Final Rule was scheduled to be effective February 17, 2017; however a recent Trump administration regulatory freeze has delayed the effective date until at least March 21, 2017.

In general, 42 C.F.R. Part 2 prohibits the disclosure of substance use disorder diagnosis, referral or treatment information outside of a part 2 program unless there is client consent. Part 2 programs include:

1. Individuals and entities (other than general medical facilities) that hold themselves out as providing, and provide, substance use disorder diagnosis, treatment, or referral for treatment; or
2. Identified units within general medical facilities that hold themselves out as providing, and provide, substance use disorder diagnosis, treatment, or referral for treatment; and
3. Medical personnel or other staff in general medical facilities whose primary function is the provision of substance use disorder diagnosis, treatment, or referral for treatment and who are identified as such providers

[Article: [The National Law Review](#) & [SAMHSA Press Announcement](#)]

Bipartisan Caucus Aims to Address Opioid Crisis



Rep. Hal Rogers (R-Ky.) and Rep. Stephen F. Lynch (D-Mass.) are bringing together Republicans and Democrats to address the crisis of prescription drug misuse that has challenged red and blue states alike. The bipartisan Congressional Caucus on Prescription Drug Abuse was first initiated in 2010, and the lawmakers say now is a critical time to relaunch the caucus and continue its work.

[Full Article: [Behavioral Health Executive](#)]

House Votes to Overturn Rule Restricting Gun Sales to the Severely Mentally Ill

The House on Thursday struck down an Obama-era regulation that could block some recipients of disability benefits from buying guns. The House voted 235-180 to roll back a rule that required the Social Security Administration to report people who receive disability benefits and have a mental health condition to the FBI's background check system. The database is used to determine eligibility for buying a firearm. Critics said the rule stripped Second Amendment rights from people who are not dangerously mentally ill, such as those who have eating disorders or mental disorders that prevent them from managing their own finances. The American Civil Liberties Union sided with Republicans in urging the repeal of the rule, writing in a letter to members of Congress that, "We oppose this rule because it advances and reinforces the harmful stereotype that people with mental disabilities, a vast and diverse group of citizens, are violent." [Full Article: [The Hill](#) & ACLU: [Letter to The House](#)]

Industry News

How to Manage Bad Debt from Clients



What can behavioral health providers do to better manage the possibility of bad debt resulting from patients not handing over their deductibles or co-pays? As health insurance premiums, deductibles and copays have risen, so has the possibility of incurring bad debt for behavioral health providers. With more clients covered under high-deductible plans or Medicaid managed care plans, the new payer mix has shifted more of the burden for payment onto the client and collection onto the provider. While providers can pursue, these payments using aggressive collections practices, or outsource to collections agencies, many avoid doing so because they don't want to damage their client relationships—especially when those clients are part of a particularly vulnerable population. This article outlines steps an agency can take to overcome bad debt. [Full Article: [Behavioral Healthcare Executive](#)]

APA Position Statement on Medical Euthanasia

The American Psychiatric Association, in concert with the American Medical Association's issued a statement highlighting their position on medical euthanasia. Both organizations stated that a psychiatrist should not prescribe or administer any intervention to a non-terminally ill person for causing death. [Full Article: [PsychiatricTimes.com](#) and [APA Resolution on Assisted Suicide](#)]



Aetna Loosen Rules for Covering Addiction Treatment



Aetna, one of the nation's largest insurance companies, will remove a key barrier for clients seeking medication to treat opioid addiction. The change will take effect in late March 2017 and apply to commercial plans. Specifically, Aetna will stop requiring doctors to seek approval before prescribing medications — such as Suboxone — that are used to mitigate withdrawal symptoms, and typically given along with steady counseling. [Full Article: [Kaiser Health News](#)]

A Crisis in the Public Service Psychiatric Workforce

Finding psychiatrists for clinical services has long been difficult and is now getting much harder. It is even more difficult if such programs are located within predominantly ethnic minority or rural communities. The shortage of psychiatrist has expanded to impact a large urban university with a world-renowned department of psychiatry has been unable to find psychiatrists for its student health clinic. Psychiatrists, knowing they are a rare commodity, are asking for as much as \$400,000 in annual compensation for a full-time position. This article outlines partial solutions to address the shortage of psychiatrists and alternative an organization can



employee to hire a psychiatrist. [Full Article: PsychiatricTimes.com]

Treatment Interventions

Meta-Analysis of Vitamin and Mineral Supplements on Brain Illness



B Vitamins Reduce Schizophrenia Symptoms, Study Finds

A review of worldwide studies has found that add-on treatment with high-dose b-vitamins - including B6, B8 and B12 - can significantly reduce symptoms of schizophrenia more than standard treatments alone. The research - on the effect of vitamin and mineral supplements on symptoms of schizophrenia - is funded by The Medical Research Council and University of Manchester, and is published in *Psychological Medicine*, one of the world's leading psychology journals. [Full Article: [EurekAlert!](#), Original Study: [Cambridge University](#)]

How Folate and a Genetic Mutation Can Impact Depression Risk

Research has linked folate deficiencies to depression. Per a study published in the *Journal of Psychiatry & Neuroscience*, one-third of depression clients were deficient. Folate, also known as vitamin B9, is available in foods like dark green leafy vegetables, oranges, nuts, beans, and whole grains. The vitamin is critical in breaking down the food we eat and converting it into energy. Our bodies need it to make DNA and RNA as well as amino acids, which help maintain all our living cells. This B vitamin is especially significant for stabilizing our mood. [Full Article: [Psych Central News](#), Original Study: [Journal of Psychiatry & Neuroscience](#)]

The Prevalence and Risk for Depression and Anxiety in Hospice Caregivers

A new University of Missouri study discovered that nearly one-quarter of hospice caregivers were moderately or severely depressed and nearly one-third had moderate or severe anxiety. Currently, more than 34 million people in the U.S. care for terminally ill loved ones, but few resources are available to help them navigate the challenges they encounter. Researchers recommend that health providers remember to treat the whole family, providing ongoing screening to family caregivers to identify early signs of depression and anxiety. The study appears in the journal *Palliative Medicine*. [Full Article: [Psych Central News](#), Original Study: [Journal of Psychiatry & Neuroscience](#)]



HiMSS and Behavioral Health

It is apparent that a big-data revolution is underway in the healthcare industry. With the passing of the HITECH Act in 2009 and the subsequent promotion and adoption of meaningful use health information; Silicon Valley, Boston Tech, and legacy tech firms have found the healthcare field a

breeding ground for new business and innovation. The most prominent healthIT company at the 2017 HiMSS conference was IBM. IBM's Watson artificial intelligence system (AIS), best known for its successful 2011 run on Jeopardy, is enmeshed into the foundation of the leading healthcare research organizations. IBM is bullish about its mission to support the healthcare field achieve remarkable outcomes, accelerate discovery, and cures. The Watson Health AIS accomplishes this remarkable outcome by, "reading" the anonymized data in clients' electronic health records to determine patterns and predict future outcomes and trends. This process is known as predictive analytics and acts as a forecast of future events with a reasonable level of reliability.

The University of California, San Francisco, Cognitive Behavioral Therapy Plus (CBT+) research team is using Watson Health cognitive computing to provide researchers useful real-time clinical insights from its peer therapy group messaging board. The HiMSS presentation was entitled "Create Safe, Effective Automated Behavioral Health Services." The speakers outlined how consumer technology and Watson AIS is being used to track clients' emotional themes, emotional changes, correlate personality traits, measure engagement, and authenticity, and spoke encouragingly regarding how leveraging the power of big data in concert with an established evidence based treatment model resulted in a 70% increase in clients' engagement vs. traditional 1:1 therapy. While it may be a while before the seeds of the initial behavioral health research produce meaningful predictive analytics for everyday practitioners, it is clear the delivery of behavioral health services will be transformed by the coming technologies.

Thank you for your continued Partnership,

Jaclyn O'Donnell

Executive Vice President

o. 301-652-9500 | f. 240-744-3086

e. jaclyn.o'donnell@credibleinc.com | w. www.credibleinc.com

Mission: Improve the quality of care and lives in Behavioral Health
for clients, families, providers and management.

301.652.9500 | info@credibleinc.com | www.credibleinc.com

This communication is proprietary and confidential to Credible and its Partners. No part of this document may be disclosed to a third party or published externally without prior consent of Credible Behavioral Health, Inc.