
From: Credible Behavioral Health, Inc. <jaclyn.o'donnell@credibleinc.com>
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To: Credible Documentation
Subject: Credible Behavioral Health Clinical News and Information - July 2018

CREDIBLE

Behavioral Health Software



Clinical News & Information - July 2018

DEAR CREDIBLE,

In our July newsletter, you'll find news and information of interest to behavioral health clinicians. You can find a copy of this newsletter – along with our payer and billing newsletters, health care industry news, and product release notes – in Credible Help under General Information > Release Notes and Communications.

Upcoming Events

- August 12-18: National Health Center Week
- August: National Immunization Awareness Month
- August: Summer Sun Safety Month

Federal Policies Impacting Behavioral Health

[Senate Passes Bill Allowing Behavioral Health EHR Incentives](#)

The Senate passed a bipartisan bill allowing CMS to offer incentives for behavioral health EHRs, aiming to improve care quality for patients. The bi-partisan [Improving Access to Behavioral Health Information Technology Act](#) (S.1732) was passed by the Senate in May, allowing CMS to offer incentives to providers that implement behavioral health EHRs.

Introduced by Senator Sheldon Whitehouse, the bill states that providers eligible for such incentives would include psychiatric hospitals, community mental health centers, clinical psychologists, clinical social workers, and “hospitals, treatment facilities, and mental health or substance use disorder providers that participate in a State plan under title XIX or a waiver of such plan.”

Sources: [EHR Intelligence](#) and [Senator Whitehouse](#)

CMS Opioids Roadmap

Although some progress has been made in efforts to combat the opioid epidemic, the latest data from the Centers for Disease Control and Prevention indicate the crisis is not slowing down. CMS published a [roadmap](#) outlining their efforts to address this issue of national concern. In this roadmap, they detail their three-pronged approach to combating the opioid epidemic, focusing on:

- Prevention of new cases of opioid use disorder (OUD)
- Treatment of patients who have already become dependent on or addicted to opioids
- Utilization of data from across the country to target prevention and treatment activities

Current estimates show that over two million people suffer from opioid use disorder, with a prevalence in Medicare of 6 out of every 1,000 beneficiaries. To decrease that number, it is crucial that Medicare beneficiaries and providers are aware that there are options available for both prevention of developing new cases of OUD and the treatment of existing cases. CMS is working to ensure that beneficiaries are not inadvertently put at risk of misuse by closely monitoring prescription opioid trends, strengthening controls at the time of opioid prescriptions, and encouraging health care providers to promote a range of safe and effective pain treatments, including alternatives to opioids. They are also developing communications with beneficiaries explaining the risks of prescription opioids and how to safely dispose of them, preventing their misuse by others.

Sources: [CMS Announcement](#) and [The CMS Blog](#)

Treatment Interventions

Surescripts: Potential Patient Safety Issues – Leading Zero in Medication History

Surescripts recently determined that some Medication History response messages provided by certain pharmacy benefit managers (PBMs) and pharmacies may be missing leading zeroes in front of decimals in the **Drug Descriptions** or **Drug Strength** fields, which could result in misinterpretation.

Requested Action: Please communicate this potential risk to all end-user prescribers immediately and encourage them to carefully review any patients’ medication product strengths and dosages that contain decimals until the issue is resolved. (See **Credible Connections**, below.)

Methadone, Buprenorphine After Opioid Overdose – Lower Risk of Death

Treating patients who survive an opioid overdose with either methadone or buprenorphine appears to significantly reduce their risk of death for at least 12 months, but only a third of opioid overdose survivors may be receiving these medications, according to a [report](#) in the Annals of Internal Medicine.

Source: [Annals of Internal Medicine](#)

10 Exciting Psychology Books for Your Summer Reading List

The school year is over, and it is time to rest and reinvigorate! Below is a list of fascinating books for psychology teachers this summer which will have you prepared and excited for new students this fall.

- [The Hope Circuit: A Psychologist's Journey from Helplessness to Optimism](#)
- [Behave: The Biology of Humans at Our Best and Worst](#)
- [Rock-Breaks-Scissors: A Practical Guide to Outguessing and Outwitting Almost Everybody](#)
- [The Lost Boys: Inside Muzafer Sherif's Robbers Cave Experiment](#)
- [Beat Boredom: Engaging Tuned-Out Teenagers](#)
- [Evicted: Poverty and Profit in the American City](#)
- [Lab Girl: A Story of Trees, Science, and Love](#)
- [Against Empathy: The Case for Rational Compassion](#)
- [The Memory Illusion: Remembering, Forgetting, and the Science of False Memory](#)
- [Psych Experiments: From Pavlov's Dogs to Rorschach's Inkblots, Put Psychology's Most Fascinating Studies to the Test](#)

Source: [American Psychological Association's Psych Learning Curve](#)

Credible Connections

Leading and Trailing Zeroes in Prescriptions

Credible Behavioral Health Software has settings to mitigate medications errors involving leading or trailing zeroes.

- **eRx: Use trailing and leading zeros validation when creating prescriptions** – When creating a prescription, always insert leading zeroes before the decimal point for amounts less than one and must not allow trailing zeroes after a decimal point.
- **eRx: Use trailing and leading zeros validation when adding medications** – When adding a medication, always insert leading zeroes before the decimal point for amounts less than one and do not allow trailing zeroes after a decimal point.

To enable these settings for your Domain, please open a task ticket and submit your request.

State-Specific DEA and NADEA Numbers

Credible Behavioral Health Software is capable of capturing **State-specific DEA numbers and NADEA (or XDEA numbers)**. These allow prescribers with appropriate certification and

registration to prescribe Methadone, Buprenorphine, and other controlled substances through **Credible eRx**.

This is done via the **Employee navbar > Provider Profile**. Please note that a user must have the **Security Matrix: ManageDEANumbers** right for their login profile to be able to edit the numbers.

Also, with the **Electronic Prescriptions of Controlled Substance (EPCS) module**, those medications can be created and sent electronically to an EPCS registered Pharmacy.

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

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