Aloha!

The purpose of this communication tool is to provide Purchase of Service (POS) providers with up-to-date new or revised information, and to assist us when implementing new Adult Mental Health Division (AMHD) business activities and initiatives. We welcome your ongoing feedback and suggestions for improvement as we work to develop this valuable communication tool. Please contact us if there are any topics you would like to see in the Provider Bulletin.

AMHD Chief Corner (Acting Chief, Dr. William Sheehan)

Happy New Year! At least, Happy New 'Fiscal' Year! July 1 marked the beginning of Fiscal Year 2011. I think it will be very interesting for us all. One thing for certain, it will be a year of change. In November, we elect a new Governor. On December 6, the new Governor is sworn in and then we'll get a new cabinet. This will result in transition from our current administration to a new administration. We are planning to do what we need to so the transition will be a smooth one for our consumers, our employees, and our providers. The state's financial condition remains uncertain, but it does seem like there are some positive signs for the economy. State workers continue furloughs and pay cuts for this fiscal year. We'll need to continue to be fiscally responsible and live within our means this fiscal year, as well. As always, we'll remain ready for unanticipated changes in our financial health and respond to the challenges as they come.

There are some personnel changes I want to tell you about. As of June 30, our service area administrator positions were concluded. Dr. Tom Vendetti (Maui County), Ms. Anne Sturgis (Hawaii County), and Dr. Angela Correale (Kauai County) concluded their service with the Adult Mental Health Division. We appreciate their contributions to our system and the care of our consumers, and wish them well in their future endeavors. Ms. Linda Appel (Honolulu County), although concluding her service as our Service Area Administrator, continues with the Division, and is working into new responsibilities and duties. We welcome her in her new role with us.

Director Fukino has appointed 4 individuals to fulfill the responsibilities of service area administrator in each county. They are: Ms. Trina Tom (Maui County); Ms. Tracey Wise (Hawaii County); Mr. Rick Detucci (Kauai County); Mr. Troy Freitas (Honolulu County/Oahu). These responsibilities will be in addition to their current duties as employees in our Community Mental Health Center System. Please extend them your welcome, support, and collaboration.

Also effective as of July 1, other Division staff members have taken on new duties. Mr. Brian Higgins, Ms. Karen Krahn, and Mr. John Jansen have transitioned out of the Division and taken on new, increased responsibilities for the Department of Health. They are working in an exciting new project, called the Center for Operational and Regulatory Excellence (CORE), which I'll be telling you more about it in a future newsletter. We thank them for their dedicated service to the Division, and look forward to continuing our work with them in their new roles.
With these changes, there will be reorganization of duties and responsibilities within the Division. I'll share more with you about that in the August newsletter.

So, just a few days into our New Year, and already lots of things are happening! Thanks for your continued support and efforts on behalf of our consumers.

**Transition of AMHD Consumers with QUEST Benefits**

On April 29, 2010, the Department of Health (DOH) and Department of Human Services (DHS) jointly announced that QUEST members currently receiving behavioral health services from the Adult Mental Health Division (AMHD) would begin receiving some of those services through their QUEST health plans. This QUEST transition process is to begin July 1, 2010 for QUEST members with last names A-K and September 1, 2010 for QUEST members with last names L-Z.

The QUEST health plans have up to sixty (60) days to conduct eligibility assessments to determine if the QUEST members with last names A-K, who are currently receiving ongoing Medicaid Rehabilitation Option (MRO) services from AMHD, should continue to receive those services through a QUEST provider. During that interim period, it is expected that those consumers will continue to receive all currently authorized services from AMHD and its contracted providers.

Although transition of QUEST members with last names L-Z won’t begin until September 1, 2010, AMHD and its contracted providers are expected to begin billing the QUEST health plans for authorized services for *all* QUEST consumers A – Z, *starting on July 1* and continuing until the date of notification of completion of the eligibility assessment by the QUEST health plan. AMHD contracted providers need not obtain a contract nor a pre-authorization with a QUEST health plan in order to be reimbursed for these transitional services as AMHD is arranging with DHS for these services to be pre-authorized by the QUEST health plans.

QUEST consumers in AMHD services have received letters from DHS and their QUEST health plans informing them of the QUEST transition and providing them with health plan and DHS contact information regarding the transition. AMHD is sending letters only to QUEST consumers who have been receiving services from AMHD that will not be available from QUEST after the transition (i.e., non-MRO services). AMHD will continue to provide these specified non-MRO services after the transition, if there is a current authorization for those services. Providers may request continuing stay authorizations for those services, if the consumer continues to be eligible for and meets the continuing stay criteria for the service.

We understand that the QUEST transition may be confusing or stressful for some of our consumers. To the extent that you have consumer consent to communicate with their other service providers, it is AMHD’s expectation that you will coordinate with QUEST health plan providers to assist and support your consumers’ transition to QUEST health plan providers for continuing behavioral health services, as appropriate.

If you have any questions about this transition, please contact Dr. Edward Suarez, CBCM Service Director at 808-453-6941.

***Facts for Transition of Behavioral Health Services for QUEST Health Plan Members***

**Adult Mental Health Division (AMHD)**
- Last name- "A" to "K" 7/1/10 - behavioral health services transition date
- Last name- "L" to "Z" 9/1/10 - behavioral health services transition date
- Forensically Encumbered No Change (incl: CR, Jail Diversion, MH Court)

**Child and Adolescent Mental Health Division (CAMHD)**
- SEBD services transition to occur on January 1, 2011

**Community Care Services (CCS) Program**
- Behavioral Health Services transition to QUEST health plans on 7/1/10
**Contact Information**

- AlohaCare Behavioral Health Plus Program 973-2630
- AMHD Office of Consumer Affairs 586-4685
- Provider Relations 586-4689
- CAMHD Provider Relations 733-9333
- HMSA QUEST Behavioral Health Services
  Provider 1-888-809-8876
  Member 952-4400 or 1-888-225-4122 (toll free)
- Kaiser QUEST Behavioral Health Services 432-7600 Oahu, 888-945-7600 NI
- Med-QUEST Division Provider Relations 692-8099

QUEST Transition documents are located on the AMHD website under "Just Released".

This transition is only for consumers who receive their services through the QUEST health plans (AlohaCare, HMSA, and Kaiser Permanente). This transition does not affect consumers in the QUEST Expanded Access (QExA) program (Evercare QExA and ‘Ohana Health Plan).

**AMHD Consumer Health & Wellbeing Survey**

In Fiscal Year 2009, for the first time, the Hawai‘i Adult Mental Health Division (AMHD) surveyed the physical health of 1,777 consumers from Clubhouses, CMHCs, and POS Providers. The questionnaire used 12 health related questions from the Behavioral Risk Factor Surveillance System (BRFSS) survey, which allows us to compare the health of the AMHD population with the health of the overall population in the state of Hawai‘i.

The most significant findings from this survey show that:

- More than half of the AMHD consumers smoke every day or some days (57% versus 15.5% for the overall state of Hawai‘i population).

Compared to the general population, AMHD consumers are:

- about 4 times more likely to smoke everyday (46% versus 12%).
- 2 times more likely to have diabetes (19% versus 8%).
- 1.6 times more likely to be obese (37.5% versus 23%).
- almost 3 times more likely to report that their general health is fair or poor (39% versus 15%).
- 1.5 times more likely to report having angina or coronary heart disease (4.5% versus 3.1%).
- 4 times more days of being impaired (7.7 days of impairment a month versus 1.9 days).

Also, AMHD consumers report:

- twice the number of days during which their physical health was not good (7.8 days versus 3.3 days).
- over 3 times more days during which their mental health was not good (10.1 days versus 3.1 days).

Additionally, a cluster analysis based on health related quality of life and risk for health disorders allowed us to assign respondents to four distinct groups: (1) Those with better health related quality of life and low risk for health disorders (42%); (2) Those with worse health related quality of life but low risk for health disorders (28%); (3) Those with better health related quality of life but elevated risk for health disorders (17%); and (4) Those with worse health related quality of life and elevated risk for health disorders (13%).

The people in Cluster 4, poor health related quality of life and high risk for medical disorders, are those among our consumers who are likely most in need of ongoing medical care for chronic ailments. What we do not yet know is the nature and extent of the co-occurring medical problems that our consumers undoubtedly endure.
These findings clearly indicate that the population served by the AMHD is significantly less healthy and has a greater medical morbidity risk than the overall population in Hawai‘i and that greater effort should be made to monitor their physical health and risky, health related, behaviors.

Paradoxically, this survey also found that AMHD consumers reported significantly lower rates than the general public of being told by a medical professional that they have high cholesterol.

This may more likely be due to a lack of access to health care and appropriate testing than anything else. We have included questions about access to medical and dental care with this fiscal year’s (FY2010) consumer satisfaction survey to determine if, in fact, our consumers do report more limited access to health care.

**AMHD RFI’s & RFP’s**

The AMHD released Request for Proposals for Fee-for-Service Psychiatric Services (Additional Services) on the island of Oahu (RFP No. HTH 420-8-10), and on the island of Hawaii (RFP No. HTH 420-9-10).

Current and future procurement notices are posted on the State Procurement Office's Procurement Notice website, which may be accessed from: [http://www4.hawaii.gov/bidapps/](http://www4.hawaii.gov/bidapps/). If you have any questions on current or future RFI’s and RFP’s, please contact the AMHD Contracts Unit at (808) 586-8287.

**E-ARCH Program**

Please see below for updates and announcements about the AMHD E-ARCH Program. We begin a new fiscal year with the goal of continuing to remain stable with our admissions and to look at filling vacancies with hospital patients that need your compassion, care, and acceptance. Thank you for your outstanding service as Primary Care Givers (PCGs) and private pay RN case managers. If you have a vacancy, please let us know so that we may schedule a screening appointment.

**Monthly Provider Meeting:**

- Please RSVP by Monday, July 27, 2010. Call 453-6397. Thank you!
- This month’s meeting is an administrative meeting.
  - Tuesday, July 28, 2010
    - 9:30 a.m. – 10:30 a.m.
    - 870 Fourth Street, Pearl City (Linda and Stacy’s office)
- Responses to questions received at last month’s meeting (6/22/10)

Several PCGs attended last month’s meeting and shared concerns about general administrative procedures. See below for a summary of the concerns and responses.

**Concern #1:**
When we fax information, we don’t get a call to say that you received it. How will we know that the information we faxed was received?

**Response #1:**
We apologize for any inconvenience. We are unable to telephone the sender for each fax we receive. We offer two ways to reassure you that your fax was received. First, if your fax machine has a feature that will let you print a confirmation page, please use it. The confirmation page will indicate whether some, all or none of the faxed pages were sent. Second, if you prefer to receive a confirmation from us, please include a note either on your fax cover page or a separate page stating specifically that you want us to confirm we received your fax. Indicate whether we should fax a note back to you or if we should call you on the telephone. When we sort our faxes and see your note, we will respond to your request.

**Concern #2:**
My claim form gets returned because I made a mistake such as missing one digit in the authorization number or forgetting to write the number of units. Why can’t AMHD staff just fix it? It’s a small error and it costs more money in postage, time to mail the claim form back to the provider to correct, and then I have to wait longer to get my reimbursement check because I had to resubmit my claim form.
Response #2:
A “clean claim” is a red CMS claim/billing form that is received with zero (0) errors. Errors can be small like missing a digit or can be large like forgetting to sign the claim form. In any case, it is not the expectation that AMHD staff will alter claim forms for any reason. Please understand that it is your responsibility as the contracted provider to verify the accuracy of your claim form. Just as when you write a personal check, the company you are writing the check to cannot alter your check. If they receive your check with an error, they return the check to you for correction. Our policy for “clean claims” is the same. It is unethical and irresponsible for anyone other than you to alter claim forms. If your claim form is returned to you, please carefully review the Return to Provider (RTP) form. The RTP form explains why your claim is being returned to you.

AMHD E-ARCH Program News:
- There were no admissions and no discharges in May and June 2010.
- We continue to have one bed hold that is pending due to court related issues.
- We have four potential providers whose paperwork has been submitted and who are waiting for their contact to be executed. Thank you for referring your colleagues to our program.
- There are several AMHD E-ARCH consumers who are waiting to be accepted for AMHD E-ARCH placement. If you have an open E-ARCH bed and would like to schedule a screening appointment, please call Stacy.

AMHD Administrative Updates:
- Welcome, Sunny! Perhaps you received a phone call from him? Perhaps you met him at our office? Sunny Kurata is our summer youth intern. He will be working at our office until the end of July. He will be a senior at Aiea High School. Sunny will be helping us with administrative support functions and will also be doing job shadowing. We are so, so happy to have him on our team!
- AMHD furlough days for the month of July 2010 is Friday, 7/16/10 and Friday, 7/23/10.
- Standard Operating Procedures (SOPs) continue to be drafted. Please review and submit your feedback to us. Your input is important. Our program is team-oriented and our goal is to work together to develop accurate SOPs for this program.
- Almost all AMHD E-ARCH consumers have a signed room and board agreement form in our office. We ask that you please review and sign the document as well as assist with obtaining a signature from your consumer’s psych case manager. When you and the psych case manager have signed, we ask that you fax us a copy of the signed document. You may fax us anytime at 453-6399.
- We continue to monitor the status of timely claims payment. If you are experiencing a payment delay and have questions, please call Stacy.
- PCGs: Your quarterly AMHD Fiscal Documentation Form is due. Please fax it to 453-6399. You should have both Quarter 1 (January, February, and March) AND Quarter 2 (April, May, and June) information written on your form. DUE DATE to fax this form is Thursday, July 8, 2010.
- PCGs and RN case managers: A BIG THANK YOU for your understanding and cooperation with submitting your provider contract documents to us. We want to express our appreciation to you folks because we know that this task can be challenging. We will continue to work with PCGs and RN case managers who have not yet submitted the required documentation to us. We are in the process of updating documents in your provider contract file.

Reminders:
- Do you have a copy of your AMHD E-ARCH resident’s psych care plan (also referred to as the consumer’s Recovery Plan) and psych crisis plan on file? Please request these documents from the consumer and/or their psych case manager. Document your efforts to obtain both plans. PCGs are responsible for keeping a current copy in the chart. Recovery Plans are updated every six months. RN case managers are responsible for attaching the Recovery Plan to the medical care plan.
- Going on vacation? Please do not forget to send a copy of your official leave/vacation notice to the OSAA office. At minimum, the notice should include your name/E-ARCH address, leave start and end dates, and names/contact numbers of your substitute staff. We ask that you please send your notice to us at least two weeks prior to the start of your leave/vacation so that we may coordinate with your substitute staff and the AMHD E-ARCH consumer’s team prior to your departure. If you prefer to fax a copy, our fax number is 453-6399.
Please stay tuned as we go through changes. We will share any new news with you as soon as we are able to. Please be assured that you, your status as AMHD providers, and the residents that you care for under the AMHD E-ARCH Program are very important to us. If you have concerns about this, please call right away to let us know how you are feeling.

Please continue to contact us anytime you need assistance at (808) 453-6397 office; (808) 453-6399 fax.

**Learning Opportunities & Opportunities for Growth**

**July is National Minority Mental Health Awareness Month**
Throughout the month of July, NAMI states and affiliates are encouraged to join efforts across the country to increase public awareness of mental illness among diverse communities. Although the expression of outright discrimination has been greatly reduced in recent decades, more subtle and chronic forms of discrimination are still very real for certain groups in Hawaii, especially those individuals who are new to the islands, have little political power, are of a lower socioeconomic group, and/or have a severe mental illness. It doesn’t take much to reach out to these individuals by providing culturally sensitive and responsive mental health services. In the spirit of diversity and in the hopes of increasing work place morale, Office of Multicultural Services Director, Dr. Kimo Alameda, will continue to provide training on “Surviving and Thriving in Difficult Times: A Cultural Perspective” to interested providers and clubhouses. Dr. Alameda has already presented to a majority of providers and the evaluations have been very positive. If interested in this dynamic and informative training, feel free to call Dr. Alameda at 306-8223 to request an on-site presentation for your staff.