

Managed Care Behavioral Health Interventions

Jordan Weisman, Psy.D

Behavioral Health – Chief Medical Officer

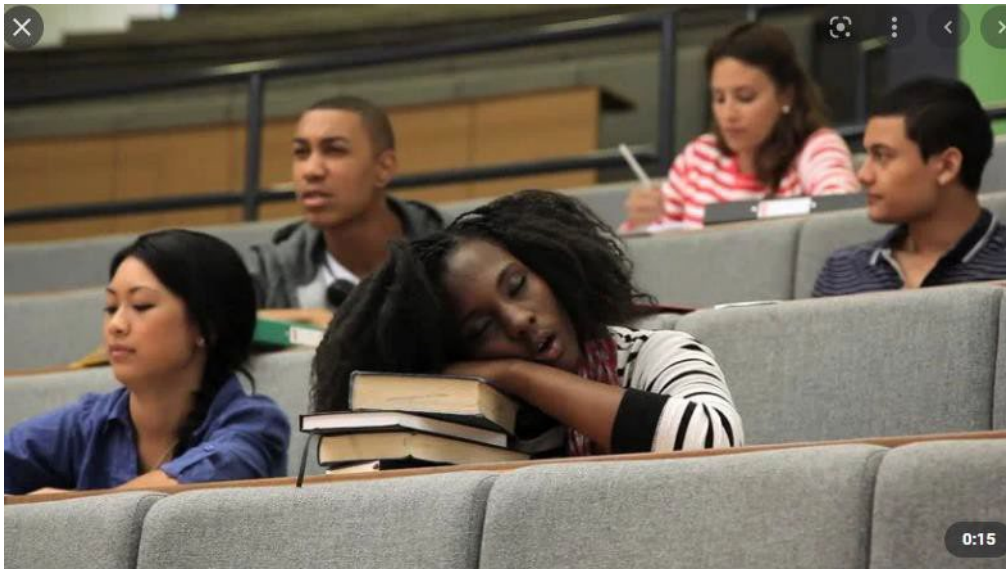


Delivering the Next
Generation
of Health Care

Agenda

The Behavioral Health Chief Medical Officer

- Disclosures (because we have to make the attorneys happy)
- My exciting life story....
- Who is your client?
- The Role of the Managed Care BH-CMO
- Real Life Interventions
- Ethical Issues
- Go Eagles
- Questions



Disclaimers

- There will be topics discussed and real-life examples provided. These may be unsettling. I do not mean to present these issues for shock value, but to provide a real glimpse into my [professional] world. Trust me, my personal life is probably more unsettling.
- All clinical samples have been redacted – that is, the names and identifying information of participants have been changed. No Personal Health Information will be disclosed during this discussion. (You all know about HIPAA, right?)
- Sometimes, stories and examples may be similar to your personal experience or to that of an associate. Please remember, this is an open lecture, no therapeutic relationship exists in this venue; there are no rules of confidentiality that apply within the lecture room / Zoom meeting. Caution is advised regarding sharing personal information.
- I tend to babble. Someone needs to give me a “10 minute warning”.

Disclosures / Conflict of Interest

- I am the Behavioral Health – Chief Medical Officer of AmeriHealth Caritas – Delaware. The contents of this training were not influenced in any way by my employment.
 - I am not aware of any conflicts of interest.
 - I have no financial agreements that have influenced the contents of this training.
 - I would be more than happy to develop a lucrative financial agreement, preferably near an ocean.
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A little bit about me...

As a licensed psychologist in the Commonwealth of Pennsylvania, Delaware, New Jersey, and Florida, I have been assessing and treating children, adolescents, and adults in forensic settings for over 20 years, and worked in the behavioral health field for 30 years.

As an instructor, I have realized that [many] lectures are boring. Open discussion makes for a more interesting hour.

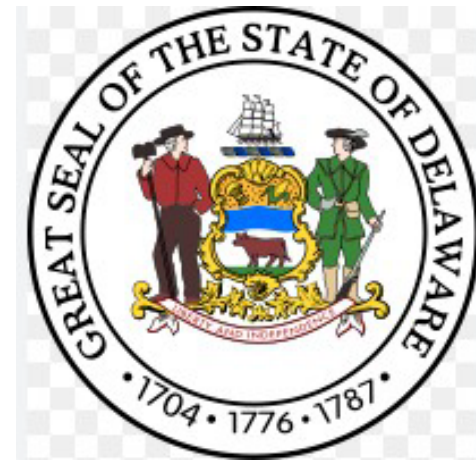


The Role of the Behavioral Health Chief Medical Officer

(Pretty Impressive Title, huh?)

Who is your client?

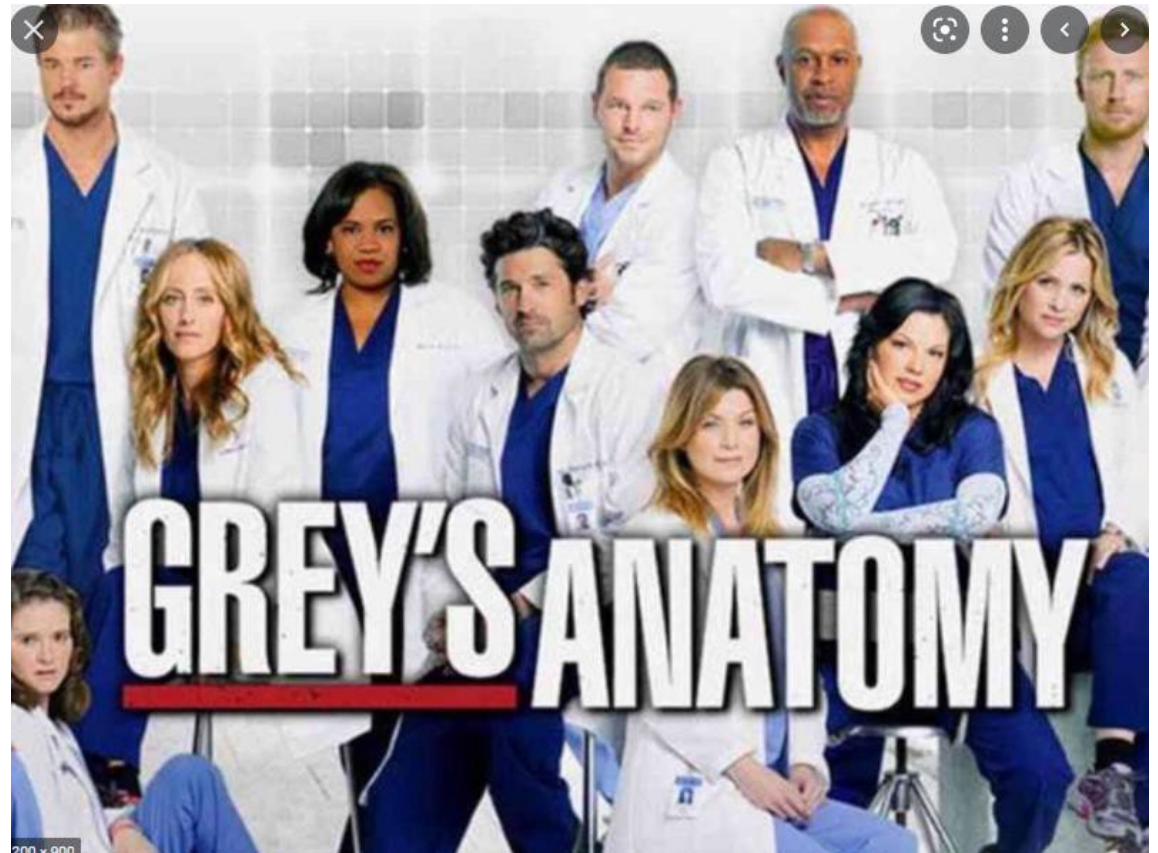
- The State of Delaware
 - Make sure that state citizens get all of the MH / SA services they need
 - Combat the Opioid Crisis
- The Company
 - Make sure the members get all of the BH / SUD treatment they need – ie: medically necessary (we'll get to that...)
 - Follow CMS guidelines and NCQA regulations
 - Project a positive image
 - Combat the Opioid Crisis



The Role of the Behavioral Health Chief Medical Officer

Who is your client?

- The member
 - Provide all needed services
 - Coordinate Care
 - Insure that providers are implementing evidenced based care
 - Pay for services
 - Minimize paperwork



The Role of the Behavioral Health Chief Medical Officer

Medically Necessary Services

- Says Who?
 - Evidenced Based Treatment Protocols
 - The American Society of Addiction Medicine (ASAM)

Non-Medically Necessary Services

- Denials
- Appeals
- Peer-to-Peer Reviews

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Think outside the box....

The Narcan Initiative

In April 2018, the medical management team of ACDE designed initiatives to combat the rising mortality rate associated with illicit opiate use and accidental overdose from prescribed opiates for pain management. To that end, a multipronged approach focusing on increasing the availability of Narcan to those with an opiate use disorder or prescribed opiates for pain, education for providers regarding the ASAM Clinical Practice Guidelines for Opiate Use Disorder, increasing the availability of Medication Assisted Treatment (MAT), and aggressive outreach to those at risk of overdose was enacted.

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Think outside the box....

The Narcan Initiative

- In June 2018, ACDE successfully petitioned the State of Delaware to remove the \$3 copay for Narcan;
- In January 2019, a Provider Bulletin was sent to all BH / SUD providers encouraging the prescription for Narcan to all members with an Opiate Use Disorder diagnosis, or those prescribed an opiate for pain management. This bulletin described the process for obtaining Narcan, as well as education for family members;
- In April 2019, ACDE presented the 2019 Assessment and Treatment of Substance Abuse Disorders Conference which provided free Continuing Education Units for physicians, nurses, psychologists, social workers, and addictions professionals. This conference was attended by over 280 professionals and government associates;

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Think outside the box....

The Narcan Initiative

- All pharmacy profiles for members with two Narcan fills or greater are reviewed by the Pharmacy Director for clinical concerns. This is approximately 20-30 members per month. The Pharmacy Director completes a brief synopsis of the medication profile for those identified members. The Pharmacy Director forwards the information to the Behavioral Health CMO for review. After any additional input, the Behavioral Health CMO sends the profiles and recommendations for follow up to Rapid Response and Clinical Care Coordination for the necessary outreach calls. Calls are also made to any member who had Narcan administered via EMS or in the Emergency Department.

Since inception, ACDE has seen an increase of over 500% for prescriptions of Narcan for ACDE members.

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Think outside the box....

The ADHD Performance Improvement Plan

Attention Deficit / Hyperactivity Disorder (ADHD) is one of the most common neurodevelopmental disorders of childhood, often diagnosed during the preschool years. According to the Centers for Disease Control and Prevention (CDC), approximately 6% of children and adolescents within the United States meet diagnostic criteria for ADHD, with higher rates shown in community samples. Over 400 AmeriHealth Caritas members are diagnosed with ADHD.

The American Academy of Pediatrics (AAP) published a clinical practice guideline for the diagnosis and treatment of children with ADHD. Focusing on treating clinicians throughout the provider network, ACDE provided detailed education on the AAP Clinical Practice Guidelines for the Assessment and Treatment of ADHD and member specific data. Following this education, ACDE members showed significant improvement in the adherence to the AAP guidelines, which include participation in behavioral therapy and medication management.

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Think outside the box....

- On March 13, 2020, I was told to water my plant and leave the office.....**The Pandemic**
 - Telehealth
 - Confidentiality and the relaxation of HIPAA
 - Signing consent
 - Telephone and Skype / Facetime
 - Medication Assisted Treatment (MAT)

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Reframing the Narrative : The Assessment and Treatment of Sexualized Behaviors in Diverse Populations

March 13, 2024

Delaware State University

8:30am-12noon

There are frequent misconceptions surrounding sex offenders, those with intellectual or developmental disabilities and sexualized behavior, and those susceptible to human trafficking. This conference will work to dispel myths, and educate providers and collaborating government agencies on the treatment options available when dealing with these populations.

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Reframing the Narrative : The Assessment and Treatment of Sexualized Behaviors in Diverse Populations

Sex Offenders: Best Practice in Assessment and Treatment

Stacey Ginesin, Psy.D., Clinical Director, Pennsylvania Sexual Offenders Assessment Board

- Sex offenders are portrayed as universally predatory, deviant, and at very high risk to reoffend. Research shows otherwise; sex offenders are a heterogeneous population, with differing degrees of risk and need. This presentation will provide accurate information about factors that lead to sexual offending. Participants will learn about empirically validated instruments to measure risk and need, and how assessment is used to guide treatment. Participants will also learn about current best practices in treatment of this challenging population.

Assessment and Treatment of Sexualized Behaviors within the Intellectual Disability/Developmental Disability Population

Nicholas DeMarco, Psy.D, Director, IDD and Mental health Supports, Philadelphia Coordinated Health Care, Southeastern Region Health Care Quality Service Unit

Stacey Watkins, Deputy Director, Delaware Division of Developmental Disabilities

- There are frequent misconceptions regarding the sexual desires and proclivities of Delawareans with Intellectual and Developmental Disabilities. This session will focus on the normal development of sexual behavior within the ID/DD community, and sexualized behaviors which require specialized assessment and treatment.

Human Trafficking in Delaware — The Multicultural Impact

Steve Eichel, Ph.D., ABPP, CST

Caroline Brittingham, Delaware Deputy Attorney General, Delaware Department of Justice

- This session will review the demographic and backgrounds of Delawareans susceptible to human trafficking, as well methods of psychological coercion employed by perpetrators. A review of the multicultural impact, with discussion of the Latino, Asian, and Western African populations in Delaware, will occur.

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions:

Reframing the Narrative : The Assessment and Treatment of Sexualized Behaviors in Diverse Populations

March 13, 2024

Delaware State University

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Steering Committee:

Kecia Winchester, Regional Manager – Probation and Parole, Delaware Department of Corrections

Dr. Gwendolyn Scott-Jones, Dean, Delaware State University School of Behavioral Sciences

Dr. Sherry Nykiel, Delaware Division of Medicaid and Medical Assistance

Major Rob Hudson, Deputy Principal Assistant to Secretary Nathaniel McQueen, Delaware Department of Safety and Homeland Security

Amanda Levering, Director of Complex Case Coordination, Office of the Secretary - DHSS

Lt. Robert Cowden, Delaware State Police

Dr. Amy Diehl-Ianetta, Delaware Department of Services to Children, Youth, and their Families

Dr. Laura Cooney, Clinical Director, Forensic Associates of Delaware

Dr. Elizabeth Kuneman, Clinical Psychologist, People's Place

Dr. Doug Tynan, Delaware Psychological Association

Brian Citino, ACDE Director of Marketing

Dr. Jordan Weisman, ACDE BH-CMO

The Role of the Behavioral Health Chief Medical Officer

Real Life Interventions: Tough Decisions

- Not Evidenced based but research supported
 - Neural Feedback for ADHD
 - ABA for Conduct, Anxiety, or ASD over 21
- Not evidenced based experimental
 - Cheaper alternatives
 - Coaches versus licensed doctoral level psychologists
 - Texting apps / CBT via app
- Denials without significant and appropriate alternative treatments
- Other Examples:
 - Equine Therapy
 - A Physician Assistant prescribes suboxone to our members, no treatment. He may be a pill mill, or he may be just a prescriber. Do I throw him out of the network?



Questions and Comment

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