



Behavioral Health Management recognizes the diverse and changing needs of organizations involved in Behavioral Health Medicine.



Representative Patrick J. Kennedy speaking at a rally for mental health parity legislation in March on Capitol Hill

**BEHAVIORAL HEALTH
MANAGEMENT**
Increasing Profitability

PO Box 572
Chesterfield, MO
63006
www.bhmpc.com

E: results@bhmpc.com
P: 1-888-831-1171
F: 314-594-9034

Welcome to the Behavioral Health Management Newsletter

In the quickly changing industry of managed care it is essential to remain one step in front of the competition. BHM will continue to strive to bring you the latest news and information from the forefront of managed care, along with helpful tips on topics that you can implement within your organization and detailed information on the latest developments within BHM.

Mental Health Parity and the Future of Managed Care

The month of Oct. is a pivotal time for many Managed Care Companies and Insurance companies with the implementation of the Paul Wellstone Mental Health and Addiction Equity Act. These changes will take effect on or before Oct. 3, 2009. For more detailed information please see the BHM white paper "*Mental Health Parity Preparedness: opportunity for managed care organizations*"

Quick Facts:

- The Parity Bill was part of the \$700 billion dollar bailout of Wall street firms under TARP
- The legislation requires group health plans of 51 or more employees to cover mental illnesses at the same level as physical ailments
- The plan does not require coverage for mental and substance abuse ailments, but ensures equitable coverage if these things are covered

"The enactment of mental health parity legislation resolved a 12 year struggle on Capitol Hill to close gaps in insurance coverage that have put at great disadvantage mental health patients and their families."- (Akron Beacon Journal, 10/10)

Specifics of Parity Legislation

Most recent legislation does not allow increased restriction of, or variable financial requirements for services falling under the umbrella of mental health or substance abuse coverage. Specific areas which must meet criteria are:

- Deductibles
- Co-payments
- Co-Insurance
- Out of pocket expenses

The goal of the new parity legislation is to provide the following:

- Equal benefits
- Equal limits
- Equal cost-sharing

The recent legislation prohibits treatment limits for mental health and substance abuse services which are disproportionate in restriction to those of other medical benefits including:

- Limits of frequency of treatment
- Caps on the number of visits
- Caps on days covered
- Any other limits which fall under the scope or duration of coverage

Plans under recent parity legislation will continue to have an aggregate lifetime limit, as well as an aggregate annual limit which will be applied to medical health disorders as well as mental health disorders

In cases where a primary payer does not have resources to treat within network, out of network coverage must be available provided that there is similar out of network coverage for other medical benefits.

Both employers and insurance carriers will be allowed to choose which mental health and substance abuse disorders they want to cover.

- There is no coverage mandate under federal law
- Any diagnosis which is covered must be covered under parity
- Employers and providers may choose to exclude coverage for behavioral health and substance abuse with no penalty



Keys for Parity Preparation

- Review organization history of health care coverage patterns
- Evaluate integration of physical and behavioral health within your current organization
- Procure relationships with outside vendors if in house care is not possible
- Carefully reevaluate your plans provider network
- Evaluate potential changes in the following areas:
 - Removal of limits
 - Change in co-payments
 - Change in insurance
 - Covered diagnosis

“PARITY IS AN UNEQUALLED OPPORTUNITY FOR EFFECTIVE INVESTMENT IN MENTAL HEALTH.”

BHM partners with Klages Web Design for launch of new website

Behavioral Health Management has been Partnered with Klages Web Design in the development of a more informative and user friendly site. Not only will the new site have a new look, but many more features to help to meet the needs of our clients. In the development of the new site associates of BHM have worked extensively on making the content of our site as relevant as possible to the continued changes within the field of Behavioral Health Management. "We have really expanded the definition and information of our available services on the site in an effort to better reach our target audience" stated Mark Rosenberg, President of BHM. It has been a project long in the making, but one which we are extremely happy with the results.

Our ultimate goal is serving the client and increasing their satisfaction in any way possible. We believe that by redesigning the site we can provide people with more valuable information in a more easily accessible format. In the upcoming months BHM will continue to work with Klages Web Design for the official launch of the revamped site.

Among the new features of the site which are currently available for viewing are an expanded list of the services provided by BHM, as well as a new white paper concentrated on the hot topic of Mental Health Parity, and an expanded area featuring company news and events which will highlight current BHM projects and speaking engagements.



<http://www.klageswebdesign.com/>



BHM Provides Bright Ideas for Financial Improvement at NCPC Conference

Behavioral Health Management was recently a sponsor of the North Carolina Providers Council 2009 Annual Conference. In attendance for BHM was President Mark Rosenberg, MD, PhD. The conference which was held Oct. 6th and 7th at the Sheraton 4 Seasons in Greensboro, NC featured a variety of speakers and focused on "Crating Innovative solutions for the future." BHM presenters provided attendees with a talk centered on understanding managed care and improving profitability. As stated by Mark Rosenberg "behavioral health is constantly changing, and a large percentage of behavioral health organizations have seen a steady increase in denied claims and reduced revenue. These health care claims which are rejected or denied lead to millions of dollars of lost revenue each year." The insightful talk focused on ways that an organization can immediately work to turn around revenue reduction. BHM associates illustrated how immediately impactful change is possible and provided proven steps to improving revenue.

TO LEARN MORE ABOUT IMPROVING
PROFITABILITY THROUGH DENIAL
REDUCTION PLEASE CONTACT US AT:
RESULTS@BHMP.COM

BHM: Upcoming Events

Oct. 5, 2009

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US Psychiatric and Mental Health Congress of 2009

Date: Nov. 2nd through the 5th, 2009

Location: Mandalay Bay Conference Center, Las Vegas, NV

Contact Information: <http://www.cmellc.com>

Contact Number: 1-800-447-4474

Content: presentation by President Mark Rosenberg, MD, PhD

- Dr. Rosenberg: Denial Reduction and Improving Profitability

Fall Managed Care Forum 2009-10-07

Date: Nov. 12th and 13th, 2009-10-07

Location: Bellagio Hotel, Las Vegas, NV

Contact information: www.namcp.org

Contact number: 1-804-527-1905

Content: BHM will be presenting 4 talks on various topics related to managed care

- Dr. Rosenberg: Inattention, Hyperactivity and Impulsivity: the Diagnosis, Management and Treatment of Behavioral Deficits Attributed to ADHD Diagnosis
- Dr. Rafeyan: Depression: the Physical and Fiscal Impact on Patient, Society, and Payers
- Dr. Faber: Developing a Cost Effective Disease Management Program for the Bipolar Disorder Patient Population
- Dr. Sicuro: Alzheimer's Disease: Early Diagnosis and Treatment



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