

Behavioral Healthcare Providers

Provider Handbook

2023 Edition

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Introduction

Behavioral Healthcare Providers (BHP) is a nonprofit corporation dedicated to enhancing behavioral health through providing quality health care services since 1995. BHP has established a comprehensive, multi-state network of managed behavioral services. This managed network offers the complete continuum of integrated managed behavioral care, providing ambulatory, residential, acute, and supportive behavioral services. BHP's psychiatrists, psychologists, and therapists have the experience and ability to work effectively with managed care organizations. BHP offers geographic convenience, expedited access, and quality outcomes provided by an efficiently managed network of professionals. BHP desires to improve behavioral care delivery systems while helping people and communities improve their behavioral and emotional health. BHP has experience in delivering care in clinically and financially integrated systems of primary care and behavioral professionals.

BHP maintains compliance with National Committee for Quality Assurance (NCQA) guidelines for Managed Behavioral Healthcare Organization and is knowledgeable about DHS guidelines.

BHP is a wholly owned subsidiary of MHealth Fairview.

Mission Statement

BHP is a nonprofit behavioral health care organization dedicated to helping people and communities reach their potential. BHP is dedicated to enhancing behavioral health through innovation.

I. Contact Information

Department	Phone	Fax	Email
Contract & Credentialing	763-545-1746, option 7	763-486-4436	nservices@bhpnet.com
Triage and Transition Services	763-210-4690	763-486-4439	DECHelp@bhpnet.com
BHP Scheduling Department	763-210-4670	763-486-4439	Intakedept@bhpnet.com
Main Number/Reception	763-525-1746 1-866-604-2739	763-486-4436	N/A
Quality Improvement	763-210-4687	769-486-4437	Quality@bhpnet.com

II. Website

BHP provides updates to behavioral health information and services through our website www.bhpcare.com. The website includes the following:

- Most Recent Provider Manual
- Documents and Forms
- Level of Care Guidelines
- Clinical Practice Guidelines
- Quality and Preventative Health Information
- Case Management program Information
- Credentialing links and information
- Notice of Privacy Practices for BHP
- Member Rights and Responsibilities
- Provider Search Feature Including Location and Specialization

III. Network Services

Behavioral Healthcare Providers (BHP) has a robust and comprehensive network of over 2,500 combined programs and providers throughout Minnesota and bordering states. Our network includes hospitals, substance abuse facilities, community mental health centers, psychiatrists, psychologists, licensed clinical social workers, licensed practicing professional counselors, clinical nurse specialists and licensed marriage and family therapists.

A. Information Changes

The MN Uniform Practitioner Change Form is required to change a provider's information including;

- Primary practice location
- Billing address location
- Phone/Fax/Email changes
- Name changes
- Social Security Number (SSN) or Tax Identification Number (TIN) & National Provider Identifier (NPI)

B. Credentialing Criteria

Minimum criteria for consideration as a Provider in the BHP Network include:

- Be licensed for independent practice, or in compliance with Supervisee Agreement
- Maintain acceptable level of professional liability insurance (preferred coverage is \$1,000,000 occurrence/\$3,000,000 aggregate but may vary according to State law or Plan requirements) ❖
- Have an email address and access to the internet
- Have 24-hour coverage

C. Site Visits

As part of the credentialing or re-credentialing process, BHP may conduct a structured site visit of offices/locations. Site visits include an evaluation using the BHP site visit standards and BHP clinical recordkeeping standards. Any site visit will be arranged in advance.

D. Practitioner Rights

BHP makes available the information provided in a practitioner's credentialing file for their review. This policy also makes allowance for the practitioner to be able to ensure that all information is accurate, to their best understanding and knowledge, and for ensuring confidentiality. This includes notification of the following situations or information:

- The right to review information submitted to support their credentialing application;
- The right to check the status of the application and publicly available documents at any time during the credentialing process;
- The right to correct erroneous information such as substantial variation in the information collected during the credentialing process versus the information submitted by the practitioner.
- Notification of these rights and of the credentialing decision within 60 calendar days of the decision

IV. Referral Population

As a provider in the BHP network, you will receive referrals for patients through several service lines.

Emergency Crisis Assessments and Intervention (DEC) is a service that utilizes Licensed Mental Health Professionals (LMHPs) and provides clinical assessment and intervention for patients coming to an Emergency Department in a Mental Health or Addiction crisis. These services are provided within all of the M Health Fairview hospital EDs as well as several non-Fairview hospitals throughout Minnesota and northern Wisconsin. These services are available twenty-four hours per day; 7 days per week.

EmPATH Services: Within the FV Southdale Hospital ED there is a specialized emergency psychiatric service for adults called EmPATH (Emergency Psychiatric Assessment, Treatment and Healing). The service provides a more calming atmosphere than a medical ED and allows our LMHPs along with psychiatric providers and nurses to help stabilize patients and guide their clinical care. Advantages of the EmPATH include a calming physical setting, up to 48 hours of care and a full mental health professional team.

Transition Clinic: Our Transition Clinic services act as a bridge for those needing programmatic or outpatient MH services, but who are experiencing a delay in availability and the start of care. The Transition Clinic sees patients 7 days per week during days and evenings. LMHPs provide counseling services and the clinic has an APN who can help manage medication protocols, additionally the Transition Clinic team work closely with the Recovery Clinic to support patients in early SUD recovery.

Assessment Center: Patients recommended for outpatient programmatic care require a Diagnostic Assessment to ensure that they meet the clinical requirements of the programs and qualify for payer support for their care. LMHPs, LADCs and dual licensed clinicians within the Assessment Center provide Diagnostic Assessments and admission guidance for pediatric and adult programmatic care for patients with mental health, substance use and co-occurring disorders.

BHP Scheduling is a service that bridges the gap between medical providers and behavioral health services. Patients are referred for behavioral services by their primary care provider and/or clinic, Employee Assistance Program, or self refers through our website.

BHP Managed Population are patients with an insurance product contracted with BHP for utilization management. Care Management staff assist members in scheduling behavioral services such as individual therapy, substance use disorder assessments, psychological testing, etc. This population currently consists of PreferredOne commercial insurance products.

For all patients referred through BHP's service lines it is the expectation that providers and programs provide attendance outcomes for each patient scheduled. It is the goal of BHP to ensure all patients receive the necessary services to meet their behavioral health needs.

V. Quality

A. Clinical Quality Activities

BHP continues to monitor and assess clinical quality activities that reflect our organization's delivery system and patient population. We assess and evaluate at least three meaningful clinical issues that address the following considerations:

- Are meaningful and relevant to BHP's patients;
- Uses measures that are objective and quantifiable;
- Uses measures that are based on current scientific knowledge;
- Establishes goals or benchmarks for each measure;
- Data collection methods identify the appropriate population, draws appropriate samples and collect valid data;
- Data collected is quantitatively and qualitatively analyzed;
- Identifies opportunities for improvement, implements intervention to improve and measures the effectiveness of the interventions.

The data collected through the services provided to patients allows BHP to design clinical quality activities that address and satisfy the considerations listed above. BHP's services delivery system is internally designed to meet the varying requirements by patient needs and to capture extensive data that allows BHP to develop reports that are used in the daily monitoring and planning of quality activities.

B. Affirmative Statement Relating to Communication with Patients

Patients shall be given by their attending practitioner complete and current information concerning diagnosis, treatment alternatives, risks and prognosis as required by the practitioner's legal duty to disclose. This information shall be in terms and language that patients can reasonably be expected to understand. Patients may be accompanied by a family member or other chosen representative. This information shall include the likely results of the treatment and alternatives. This information shall be given to the patient, guardian, or other persons designated by the patient and his or her representative when deemed advisable. Individuals have the right to refuse this information. The patients shall have the right to a candid discussion of the appropriate or medically necessary treatment options, including medication treatment, for their conditions, regardless of cost or benefit.

VI. Privacy Information

A. Confidentiality of Records

The practitioners and staff in the BHP network provide case and utilization management to patients in need of mental health and chemical dependency services. To ensure compliance with confidentiality requirements as set out by regulatory agencies, the following parameters have been established:

- Each staff is required to sign a confidentiality document that states the employee's intent to comply with confidentiality protocols and federal and state laws governing confidential information. This document is signed upon the first date of employment and kept on file with the System Director.
- Security measures have been taken at the BHP operations site to ensure the safe keeping of confidential information. These measures include the following:
 - Office space where confidential information is stored requires a security card for access;
 - Entry into the computer system requires an employee specific password. An employee's job classification dictates the level of access they are allowed, as such, access into the database that contains confidential information is restricted;
 - All patient information is kept within file cabinets that are locked and not accessible to anyone except appropriate BHP employees;
 - Confidential information is used solely for the purposes of utilization review, quality assurance, discharge planning, case management, intake and referral, and billing. This information is shared only with organizations or persons who have the authority to receive such information.
 - When required, a release of information is obtained from the member. The member has the right to approve or refuse the release of identifiable personal information, except when release is required by law.
 - In the care and treatment of a minor or adults who are unable to exercise rational judgment or give informed consent, release of information will be obtained in writing from the parent or person with legal guardianship or custody.
 - Information is shared internally to avoid duplication of requests for information. Only necessary information is shared internally with those individuals who need access to information to complete case/utilization management, quality improvement, billing, and intake and referral tasks.
 - When requested from an employer, all patient data do not implicitly or explicitly identify the member, unless the member provides specific consent.
 - When information is released, the patient's identity is protected as required.
 - Original records are only released in accordance with Federal or State laws, court orders or subpoenas. Otherwise, copies are released upon request and with consent as outlined above.

B. Privacy Practices

Please refer to the Notice of Privacy Practices found at www.bhpcare.com. This notice explains how personal information and protected health information are collected, used, and disclosed to third parties. BHP has implemented security measures to prevent the unauthorized release or access to personal information.

When a member performs a search on www.bhpcare.com, BHP does not record any information identifying the member and/or link the visitor to the search performed.

VII. MHealth Fairview and Behavioral Healthcare Providers Code of Professional Behavior

MHealth Fairview's Vision

Fairview is driven to heal, discover and educate for longer, healthier lives.

Our vision

Fairview is driving a healthier future.

Our values

Dignity: We value the uniqueness of each person and work to ensure everyone's right to privacy. We respect the cultures, values, beliefs and traditions of others and honor their talents and contributions.

Integrity: We say what we mean and do what we say. We communicate openly and honestly and behave ethically. We demand the best of ourselves and accept shared accountability for our actions.

Service: We work to make a difference in people's lives and in our communities. We strive for excellence by anticipating, meeting and exceeding expectations. We continually improve our programs and skills through learning and innovation. We responsibly manage our resources.

Compassion: We recognize and respond to the emotional, spiritual and physical needs of all the people we serve. We create a caring environment, conducive to healing, growth and well-being for all.

Innovation: We support clinical research that leads to tomorrow's cures. We advance new business models that will change health care. From the bedside to the call center, we are committed to continual improvement. Innovation is part of who we are.

VIII. Professional Behavior by Health Care Practitioners

MHealth Fairview and Behavioral Healthcare Providers System Policy

Policy Statement:

To assure a safe environment for all employees, Medical Staff and Allied Health Staff, patients, families and volunteers at Fairview Health Services (“Fairview”) facilities through a defined Code of Professional Behavior and framework for addressing unprofessional and dangerous/disruptive behavior.

Purpose:

- I. In accordance with Fairview’s values and the Fairview Medical Staff Code of Professional Behavior, it is the policy of Fairview that all individuals: patients, patient family and friends, practitioners and hospital employees be treated with courtesy, respect and dignity. This requires that all medical and allied health professional staff conduct themselves in a professional and cooperative manner.
- II. The medical and allied health professional staff has the responsibility as professionals and acknowledged leaders on health care teams to understand and exhibit these core behaviors while working within the Fairview System and participating in patient care, quality improvement initiatives and other staff interactions.
- III. Fairview is dedicated to honest and effective communication to help achieve optimal patient care. Fairview, the Medical Staff and Allied Health Professional Staff are dedicated toward effectively resolving conflict, dealing honestly and ethically with others and being sensitive to the needs of fellow health care workers.
- IV. This policy identifies professional, unprofessional and dangerous/disruptive behaviors and the process which will be implemented to correct or resolve issues related to unprofessional and dangerous/disruptive behaviors.

Definitions:

- I. Practitioner- Any medical staff or allied health professional staff who holds membership and/or clinical privileges at a Fairview hospital.
- II. Professional Behavior- Professional Behaviors are outlined in the Medical and Allied Health Staff Code of Professional Behavior and include:
 - a. Place the patient at the center by being approachable and respectful to patients and their family and friends as well as all members of the care team
 - b. Apply the best science by attending continuing education and avoiding treatments or procedures that are not in keeping with the latest science.
 - c. Model the highest level of professionalism by communicating effectively and respectfully with colleagues and patients
 - d. Actively engage as a collaborative member of the care team by communicating honestly and forthrightly about concerns.
 - e. Be aware of and comply with the medical staff Bylaws, Rules & Regulations and applicable policies.
- III. Unprofessional Behavior- Unprofessional Behaviors include, but are not limited to the following behaviors:
 - a. Verbal, written or physical contacts with others, whether isolated or frequent, which creates a hostile, offensive or intimidating environment. This may include intentionally condescending,

- degrading or demeaning comments regarding patients and their families, nurses, physicians, hospital personnel and/or the hospital.
 - b. Use of profanity or disrespectful language while in the hospital or while speaking with or in the presence of a patient or other hospital personnel.
 - c. Inappropriate comments written in the medical record
 - d. Blatant failure to respond to patient care needs or staff requests
 - e. Deliberate lack of cooperation with other members of the care team without good cause.
 - f. Deliberate refusal to return phone calls, pages, or their messages concerning patient care or safety.
 - g. Retaliation in response to a filed complaint or concerns brought forward.
- IV. Dangerous/Disruptive Behavior- Dangerous behavior includes, but is not limited to:
- a. Physically threatening language directed at anyone in the hospital including patients, physicians, nurses, other medical staff members or any hospital employee, contractor, administrator, or member of the Board of Directors.
 - b. Intentional physical contact with a patient, a patient family member or other member of the care team that is threatening or intimidating.
 - c. Throwing instruments, charts or other things.
 - d. Threats of violence or retribution against the patient, a patient's family member or member of the care team
 - e. All types of harassment, including sexual, with respect to a patient, a patient's family member or a member of the care team

Procedure:

- I. Fairview encourages effective conflict resolution and intervention at the earliest opportunity between the parties involved. If an employee or practitioner feels that a medical staff or allied health professional staff member is behaving in an unprofessional or dangerous manner, he or she is encouraged to attempt to resolve the problem with the concerned individual. This should be done through direct contact with the practitioner in question if possible. If the employee or practitioner is not comfortable with a direct resolution process, he/she should report the incident to their manager or the Vice President of Medical Affairs (VPMA) or designee.