

June  
2013

# VALUED PROVIDER eNEWSLETTER

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## PHASES OF TRAUMATIC STRESS REACTIONS IN A DISASTER

Many posttraumatic stress symptoms are normal responses to an overwhelming stressor which may change our assumptions and create distress, but will recede in intensity with time. Experts agree that the amount of time it takes people to recover depends both on what happened to them and on what meaning they gave to those events.

Terroristic acts, for example, may result in a whole society questioning the fundamental view of the world as a predictable, just and meaningful place to live. This is amplified by the fact that organized violence is intentional, it has a political agenda, and is meant to destroy, hurt and create terror. Studies have shown that deliberate violence creates longer lasting mental health effects than natural disasters or accidents. The consequences both for individuals and the community are long lasting and survivors often feel that injustice has been done to them. This can lead to anger, frustration, helplessness, fear and a desire for revenge. The re-establishment of meaningful patterns of interactions in the community after trauma may facilitate reconstruction of a sense of meaning and purpose. Prior research into terroristic events and disasters has shown that reactions to these events often fall into different phases.

### Impact phase

Most people respond appropriately during the impact of a disaster and react to protect their own lives and the lives of others. This is a natural and basic reaction. A range of such behaviors can occur, and these may also need to be dealt with and understood in the post-disaster period. People may see these as not having fulfilled their own or others' expectations of themselves.

Some people respond in the immediate phase of impact in a way that is disorganized and stunned and may not be able to respond appropriately to protect themselves. Such disorganized or alternatively apathetic behavior may be transient or may extend into the post-disaster period, so that people are found wandering helpless in the devastation afterwards. These reactions may reflect cognitive distortions in responses to the severe disaster stressors and may for some indicate a level of dissociation. Several stressors may occur during impact that may have consequences for the person subsequently:

- **threat to life** and encounter with death
- **feelings of helplessness and powerlessness**
- **loss** (e.g., loved ones, home, possessions)
- **dislocation** (i.e., separation from loved ones' home, familiar settings, neighborhood, community) feeling responsible (e.g., feeling as though you could have "done more")
- **inescapable horror** (e.g., being trapped, being tortured)
- **human malevolence** (particularly difficult to cope with disaster if seen as the result of deliberate human actions)

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**Contact Us:** Please send your comments, ideas and suggestions for upcoming editions of the Valued Provider eNewsletter to [PRelations@ValueOptions.com](mailto:PRelations@ValueOptions.com).

## PHASES OF TRAUMATIC STRESS (continued)

### Immediate post-disaster period: recoil and rescue

This is the phase where there is recoil from the impact and the initial rescue activities commence.

Initial mental health effects may appear, e.g., people show confusion, are stunned or demonstrate high anxiety levels. Emotional reactions will be variable and depend on the individuals' perceptions and experience of the different stressor elements noted earlier. Necessary activities of the rescue phase may mean these reactions are delayed, appearing more as recovery processes get under way.

Reactions may include:

- numbness
- denial or shock
- flashbacks and nightmares
- grief reactions to loss
- anger
- despair
- sadness
- hopelessness

Conversely, relief and survival may lead to feelings of elation, which may be difficult to accept in the face of the destruction the disaster has wrought.

### Recovery phase

The recovery phase is the prolonged period of return to community and individual adjustment or equilibrium. It commences as rescue is completed and individuals and communities face the task of bringing their lives and activities back to normal. Much will depend on the extent of devastation and destruction that has occurred as well as injuries and lives lost.

This period usually begins in the weeks post-impact. It may be associated with a honeymoon phase deriving from the altruistic and 'therapeutic community' response in the period immediately following the disaster. A disillusionment phase may soon follow when a disaster is off the front pages, organized support starts to be withdrawn, and the realities of losses, bureaucratic constraints, and the changes wrought by the disaster must now be faced and resolved.

During the stage of acute danger the priority for all is basic safety and survival. Once this is relatively secured other needs emerge that are both existential and psychological. And once manifest these needs are typically left frustrated and unfulfilled for a prolonged period of time. And many times, through media, retribution or continued violence, the society in question is re-exposed to further traumatic events.

It is particularly important to remember that emotional needs may be very significant, especially for those who have been severely affected. They may only start to appear at this time. People may also be hesitant to express distress or concern or dissatisfaction, feeling they should be grateful for the aid given, or because they have suffered less than others have. It should be noted that sometimes emotional reactions may present as physical health symptoms, e.g., sleep disturbance, indigestion, fatigue, as well as social effects such as relationship or work difficulties.

©2001 The National Center for PTSD

Source: The National Center for Posttraumatic Stress Disorder

[www.ptsd.va.gov/professional/pages/phases-trauma-reactions.asp](http://www.ptsd.va.gov/professional/pages/phases-trauma-reactions.asp)

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**“The recovery phase is the prolonged period of return to community and individual adjustment or equilibrium.”**

*“The CG SUPRT program supports the U.S. Coast Guard's motto, ‘Semper Paratus — Always Ready,’ by helping to ensure the health and wellness of the Guard’s men and women and their families.”*

## VALUEOPTIONS® CONGRATULATES U.S. COAST GUARD FOR WINNING 2013 EASNA CORPORATE AWARD

ValueOptions® congratulates its Employee Assistance Program (EAP) client, U.S. Coast Guard, for winning the 9th Annual Employee Assistance Society of North America (EASNA) Corporate Award.



Each year EASNA acknowledges one American and one Canadian company that demonstrates excellence in the use of EAP programming and service delivery. An independent panel of judges selected the U.S. Coast Guard's CG SUPRT program and its effective integration of ValueOptions EAP services. Since the inception of the awards program in 2005, EASNA has recognized ValueOptions' customers seven times.

“The CG SUPRT program supports the U.S. Coast Guard's motto, ‘Semper Paratus — Always Ready,’ by helping to ensure the health and wellness of the Guard's men and women and their families,” said Kerry Mooney, President, ValueOptions Federal Services. “We are proud to be part of their team and serve those who serve.”

This comprehensive array of EAP services delivered in partnership with ValueOptions serves approximately 127,000 members, including active duty service members, reservists, civilians and family members. CG SUPRT service offerings include non-medical counseling in a variety of subject areas including situation/problem-solving, supervisory consultation services, substance abuse assessment and treatment monitoring, financial counseling, tax consultation, education/career/employment counseling, deployment-related counseling/consultation, critical incident stress management-related services, legal counseling, and health and wellness coaching.

## UPCOMING BANK ACCOUNT CHANGE – PROVIDER CHECKS WITH WELLS FARGO

Please know that ValueOptions will be closing our Wells Fargo bank accounts during 2013 and opening new accounts at another bank. No change is planned for our Bank of America accounts. To plan for this change, it is important that you regularly deposit any checks issued on our Wells Fargo account and that you deposit any checks you may be holding at this time. We will notify you again prior to closing our Wells Fargo accounts so you have another opportunity to deposit any checks. Once the Wells Fargo accounts are closed, you will need to contact us to have a replacement check issued on the new bank account. Please continue to watch for further updates in this process.

## PROVIDER ALERT – LETTERS TO BE DELIVERED TO PROVIDER’S MAILING ADDRESS

In 2013, ValueOptions will begin sending provider letters, distributed via United States Postal Service (USPS), to the designated mailing address on file. If you have been receiving any letters at your service address and this is not the same as your mailing address, this will be a change in procedure. As we want to assure providers receive this correspondence at the correct address, it is important we have your most current mailing address in our database.

In the coming months, we are asking providers to contact ValueOptions in order to verify the mailing address we have on file. Providers can either contact our Provider Services Line at (800) 397-1630 or log into ProviderConnect to verify their mailing address. Providers can also submit a [Practitioner Change of Address Form](#), if their mailing address has recently changed. We encourage providers to complete the mailing address verification process as soon as possible to ensure mailed authorization letters are received in a timely manner.



## JUNE 28-30: PROVIDERCONNECT® DOWNTIME

As communicated in prior newsletters, ProviderConnect and MOS ProviderConnect will be unavailable the weekend of June 28, 2013 so that ValueOptions can perform scheduled updates to improve functionality of the applications.

We plan for these updates specifically on weekends so that there will be minimal impact on our providers' normal operations. For those providers impacted by this outage, we do apologize for any inconvenience you may experience during this time.

## TIPS AND TRICKS WHEN ACCESSING PATIENT INFORMATION THROUGH PROVIDERCONNECT

To further enhance your experience with ProviderConnect, we've provided you the following tips and tricks which will hopefully save you time and assist you in accessing information on your patients:

- Have your patient's member id and date of birth on hand prior to logging into ProviderConnect (this information is mandatory in order to access patient records).
- If a member has an alternate ID, select "Find a Specific Member" first. This provides the opportunity to enter the date of birth resulting in the selection of the specific member.
- For providers with multiple provider numbers, some patient authorizations and claims may not display on ProviderConnect as the application only displays patient information under the one provider number used at registration. To access data filed under a different provider number, please contact (888) 247-9311.
- Member claim information is accessible from the "View Member Claims" button located at the bottom of the "Enrollment History" page, the "COB" page and the "Benefits" page of ProviderConnect.
- To determine if a service is covered as an in-network or out-of-network benefit for a patient, visit the "Benefits" page of ProviderConnect, accessible from the top navigation bar of the application.
- By adding a "Member Reminder," providers can easily determine if patients have specific preference related to their appointment and medication reminders. To do this, select the "Enter Member Reminder" button at the bottom of the Member Screen pages.
- To view an EOB you submitted during a claim, select the "View Member Claims" button located at the bottom of the "Enrollment History" page, the "COB" page and the "Benefits" page of ProviderConnect and locate the claim by inputting the claim number. To review the information submitted on this claim, select the link for the claim number.

For further assistance navigating ProviderConnect, providers can refer to the "[How-To Resources](#)" available on [Valueoptions.com](http://Valueoptions.com) or call our e-Support Help Line at (888) 247-9311 during business hours Monday through Friday 8AM - 6PM ET. You can also email us at [e-SupportServices@valueoptions.com](mailto:e-SupportServices@valueoptions.com).



*"Have your patient's member id and date of birth on hand prior to logging into ProviderConnect (this information is mandatory in order to access patient records)."*

## ICD-10

ValueOptions is working diligently to meet the October 2014 compliance date for the ICD-10 update and are continuing to stay abreast of news on the topic, educational opportunities and progress being made by other companies and providers in the industry. Listed below are a few of the top stories and events we've come across in recent weeks:

- [Hospitals put off or don't plan to conduct ICD-10 dual coding](#)  
EHER Intelligence, 4/26/13
- [ICD-10 implementation efforts continue to drag](#)  
FierceHealthIT, 4/24/13
- [ICD-10 Forum](#)  
June 17-18, 2013  
Gaylord National Resort and Convention Center, Washington D.C.

If you find an interesting article you'd like to share with other ValueOptions providers, we encourage you to send them to us at [prelations@valueoptions.com](mailto:prelations@valueoptions.com). We'll do our best to feature them in our next newsletter.

For further information about the ICD-10 transition, providers should read the latest [Frequently Asked Questions \(FAQs\)](#).

## DSM-5

In May, the American Psychiatric Association (APA) held their annual meeting and released the new DSM-5. This is the first update in almost 20 years since DSM-IV was released. The APA is recommending all insurance companies have DSM-5 implemented by January 1, 2014. ValueOptions will be adopting the DSM-5 coding for clinical purposes and will be working towards the APA deadline. We will share additional detail around the migration to DSM-5 with the provider community as it becomes available.

## 2013 CPT® CODE UPDATE

Annually in October, the American Medical Association defines and releases a new set of Current Procedural Terminology (CPT®) codes. **This new code set took effect on January 1, 2013.** Treatment providers use these CPT codes when submitting claims for services provided to their patients. The 2013 code set included many changes that impact provider billing. Many codes were either deleted or modified.

To assist providers in complying with the new set of Current Procedural Terminology (CPT®) codes which **took effect on January 1, 2013**, ValueOptions is continuing outreach efforts to assist providers with 2013 date of service claims denied due to incorrect code usage. In addition, resources and training materials are available on the [ValueOptions Provider Website](#).

**Fee schedules are being distributed.** Most providers should have received their updated fee schedules recently via United States Postal Service (USPS) or fax. As stated in the mailing, fee schedules are effective 1/1/2013 and reflect the new CPT® codes or HCPCS® codes and rates for those services. Providers who participate in more than one provider network through ValueOptions, may have received additional communications with network specific fee schedules. If you have additional questions about the 2013 CPT code changes, please email us at [2013cptcoding@valueoptions.com](mailto:2013cptcoding@valueoptions.com).



*“ValueOptions will be adopting the DSM-5 coding for clinical purposes and will be working towards the APA deadline.”*

## GIVING VALUE BACK TO THE PROVIDER WEBINAR SERIES

We welcome our provider community to this interactive forum where ValueOptions will introduce and discuss new and exciting initiatives for providers. These webinar presentations will familiarize you with administrative and procedural information to simplify doing business with ValueOptions.

- ⇒ [Thursday, June 6, 2013 2 PM to 4 PM Eastern Time](#)
- ⇒ [Friday, June 7, 2013 11 AM to 1 PM Eastern Time](#)
- ⇒ [Thursday, September 12, 2013 2 PM to 4 PM Eastern Time](#)
- ⇒ [Friday, September 13, 2013 11 AM to 1 PM Eastern Time](#)
- ⇒ [Thursday, December 5, 2013 2 PM to 4 PM Eastern Time](#)
- ⇒ [Friday, December 6, 2013 11 PM to 1 PM Eastern Time](#)

## ON TRACK OUTCOMES PROGRAM—WEBINARS

The ValueOptions On Track Outcomes Program is designed to help clinicians incorporate client-reported feedback into their counseling and psychotherapy practices. A growing body of research demonstrates the power of this type of routine feedback to improve patient outcomes. The On Track program gives clinicians valuable tools to track client progress relative to benchmarks, to identify clients at risk for poor outcomes, and to demonstrate the impact of their services. It is intended for use by clinicians providing psychotherapy and EAP counseling services to our commercial membership.

- **Thursday, June 13, 2013 2:00 to 3:00 PM ET**  
Webinar ID: 664-822-186  
Dial 1 (877) 785-0477 and enter the Passcode 6417542 to join the call. Go to [www.joinwebinar.com](http://www.joinwebinar.com) and enter the webinar ID or visit [www2.gotomeeting.com/register/664822186](http://www2.gotomeeting.com/register/664822186) to view the webinar presentation during the call.

## PROVIDERCONNECT® WEBINAR SCHEDULE

- [An Overview of Claim Submission with ProviderConnect](#)  
Wednesday, June 12, 2013 2 PM to 3 PM Eastern Time
- [An Overview of Role-based Security with ProviderConnect](#)  
Wednesday, July 10, 2013 2 PM to 3 PM Eastern Time
- [An Overview of ProviderConnect](#)  
Wednesday, August 14, 2013 2 PM to 3PM Eastern Time

*“These webinar presentations will familiarize you with administrative and procedural information to simplify doing business with ValueOptions.”*



## VALUEOPTIONS NORTH CAROLINA SERVICE CENTER RELEASES 2013 KEY UPDATES PROVIDER NEWSLETTER

The ValueOptions North Carolina Service Center is committed to maintaining excellence in care and service in behavioral health treatment. To access the **North Carolina Service Center Key Updates Newsletter**, log into [www.valueoptions.com](http://www.valueoptions.com), click on "Providers," "Network-Specific," "NCSC State Government and HealthPlans," then click "North Carolina Service Center Key Updates Newsletter for Providers & Practitioners."

In this spring issue, providers can access information on the following topics:

- Quality improvement program structure and operations
- Access, availability, and cultural needs
- Satisfaction programs
- Treatment records/criteria and practice guidelines
- Coordination of care, quality improvement activity/initiatives
- Utilization information and guidelines
- Members' rights and HIPAA
- Preventive health programs
- Other quality improvement activities

If you do not have web access, please call Carrie Turner, ValueOptions, at 1 (866) 719-6032, to request a hard copy.

*"The ValueOptions North Carolina Service Center is committed to maintaining excellence in care and service in behavioral health treatment."*

