

## Overcomers Counseling LLC and Our Experience with Behavioral Health

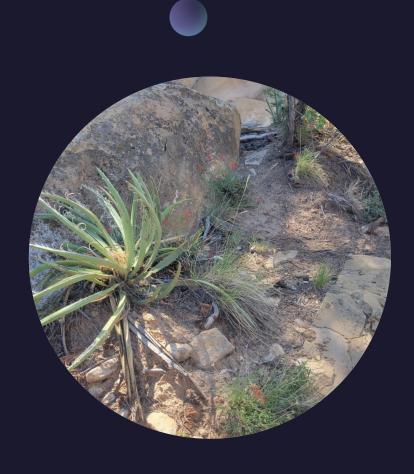
Tony Velarde LSAA

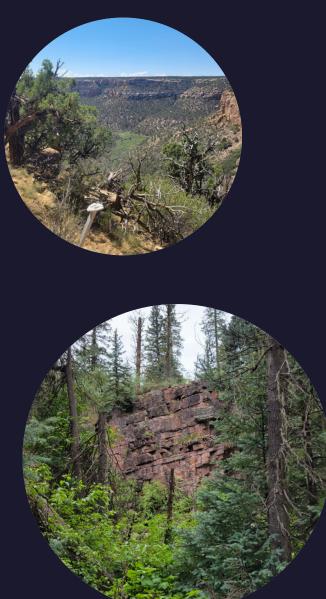
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#### A little about Overcomers Counseling LLC

We are a BHA provider type 432 located in Farmington NM. We provide a plethora of different services to include Intensive Outpatient Program, Level I SA intervention, Mental Health Therapy, CCSS, and much more. We have about 16 different providers on staff with a plethora of different specialties. Our agency has been on the front line of providing behavioral healthcare for 20 years now.





#### Our experience in Behavioral Health, Relative to the Four Corners.

Like most places in the US, we are facing a significant crisis in the form of Substance Abuse and Mental Health issues. This problem manifests in the following. They are not listed with severity in mind.

- Domestic Violence, Emotional and Physical Abuse. Almost half of our clientele have been involved in some form of either DV, EA, IPV, or abuse in someway. Either as a perpetrator or as a victim/survivor.
- Lack of education, almost a quarter of our population at any given time has less then a high school education.
- Very high recidivism rates. Whether it be trafficking, burglary or alcohol/drug related driving offenses, many of those in our judicial system re-offend.
- Significant lack of resources for those who are homeless or suffer from functionality issues, particularly in the form of housing. This is also the case for those escaping abusive situations.



### Continued,

- Significant Substance Abuse issues across all demographics and economic backgrounds. We find that not only are people struggling more frequently with moderate to severe SA related disorders, but the collateral damage incurred by these individuals on their families, friends collogues and much more, leads to more significant issues and costs for the healthcare system. Clients also frequently deal with a lot of barriers to care. Transportation, lack of economic capacity, lack of social and familial support and lack of education on the topic.
- A large number of the population still hold something of a negative mindset toward the idea of getting help, either in the form of therapy or in the form of psychiatric services. We frequently run into this issue and its repercussion is a significant sense of apathy from even the population who are seeking services on their own, toward their therapeutic commitments.
- Lack of Mental Health Awareness. This is an issue that we believe is born out of our modern popular culture idea of what exactly is a mental health issue. While some diagnosis are more prevalent then others and more significant much of the population understands what their potential diagnosis means and how it may impact their quality of life.



### Benefits with the current system

-Enhanced Coverage over commercial private insurance. -Improved client retention due to this coverage. -Improved provider retention and relatively good reimbursement as compared to other states. - Relative ease of use for members. - Ease of enrollment for current providers into the current system. - Excellent Support from the Behavioral Health Service Dept. - Fast response from said organization. - Medicaid Fee scheduled for Behavioral Health is relatively easily available. - Payments are generally fast. - Provider portal is relatively easy to get into and utilize. - Specialty Programs such as CCSS and IOP allow for more effective patient care.

## Concerns

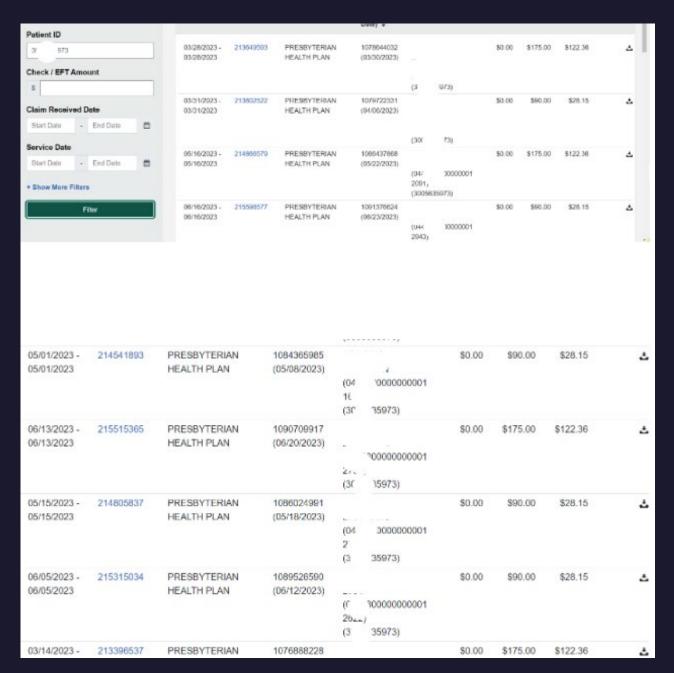
- Recently MCOs such as Presbyterian have outsourced certain key functions for their providers, such as remittance viewer, to an application/website called Availity. While I am certain this was a cost cutting measure, it has caused significant problems for our billing department. The website appears to be incomplete, frequently, "buggy," As an example on the next couple of pages.
- Clients frequently loose Medicaid coverage in the midst of treatment. While this is something that can be difficult to address and we realize this, we feel that unless we try to implement a solution, clients will continue to encounter barriers to care created by their own health insurance coverage.
- Inadequate commercial coverage for behavior health. Insurance companies are significantly behind the times in providing coverage for behavioral health. While some plans do address BH needs (i.e. Presbyterian, BCBS) most do not provide adequate coverage for outpatient services, which must be considered preventative care.

# Concerns Continued,

- Transportation issues, this is an issue that speaks to further problems with the MCOs in general. Clients frequently are unable to quickly and effectively obtain Medicaid paid transport services due to the constraints imposed by the MCOs. For example, clients enrolled with presbyterian may not utilize the same company that is contracted with BCBS. This creates a barrier to care. Not all Medicaid transport companies are created equal and those with whom we have spoken to express it is difficult to get enrolled with an MCO to provide transport services.
- The same issue is expounded to other areas of BH services. Credentialing is not the same for all the MCOs'. Some have specific requirements while others do not. We frequently found that the MCOs did not employee anyone who was familiar with BH services.

It may be difficult to see but this is an example of how we as a providers have to go to difficult lengths in order to obtain the information we need to conduct business.

- Just to rehash, the MCOs have outsourced much of the major functions previously carried out by their website to the website Availity,
- Once a patient has been billed out, we have to use Availity to search incoming ERAs to find out what we have and have not been paid for. Just as an example the DOS for this patient are not listed in chronological order.

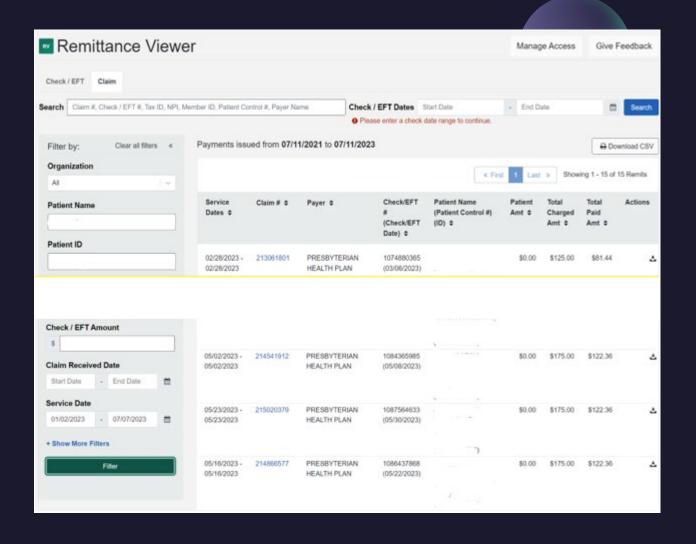


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### Problems with Availity Continued,

- Much of the websites functions appear to be incomplete,
- As an example to the right, we have a, "check claims" function built into Availities system however the website doesn't even recognize its own search parameters and instead gives us an error stating incorrect EFT when the search parameter is for the client name.





# In summary

- While our current experience in working with Intensive Outpatient Program has been frustrating at times, we have found the work to be extremely rewarding. Over three quarters of our population graduate from some kind of SA related intervention program successfully.
- At completion of service/graduation, almost all of our clients report some kind of substantial benefit to their quality of life.
- Our team of professionals have, over the last twenty years, formed an excellent relationship with our community.
- We have tools now that we didn't have previously, these tools allow us to treat clientele in a global fashion and not just address their addictive or mental health challenges.