



ABH July Committee Meetings

Wednesday, July 12
Outpatient, 10 a.m.

Friday, July 14
**Corporate
Compliance**, 10 a.m.

Tuesday, July 18
OTP, 9:30 a.m. (ABH)

Thursday, July 20
**Recovery Committee
for Residential Ser-
vices**, 10 a.m. (ABH)

Friday, July 21
DAE/SOA, 10 a.m.
(ABH)

Friday, July 28
PDT/PH, 10 a.m. (ABH)

All meetings are held at the Hampton Inn, Natick unless otherwise noted. For more information, call 508-647-8385.

MA Senate Passes FY 2018 Budget

On Thursday, May 25, the Massachusetts Senate passed its FY 2018 budget. The budget includes \$409 million in new tax revenue, including taxes on short-term room rentals such as Airbnb and applying the sales tax to certain online retailers. The \$40.8 billion budget includes the following:

- \$776.5 million in spending for the Department of Mental Health (DMH), an approximate \$9 million increase above FY17 spending (The Senate added \$1 million to the DMH adult community mental health line item (5046-000) during the amendment process);
- \$142.65 million in spending at the Bureau of Substance Abuse Services (BSAS), an approximate \$2.4 million increase above FY17 spending;
- \$39.7 million in funding for the Chapter 257 Rate Reserve;
- \$16.3 billion in funding for MassHealth;
- Legislative language that allows the Commonwealth to implement a time-limited assessment on employers whose employees do not take insurance through their employer. The Senate budget allows the Secretary of Administration and Finance to identify certain types or classes of employers, including those with non-profit status, direct care services provided to Medicaid members or other, similar circumstances that serve the public interest. The Senate envisions raising \$180 million from such assessments versus the \$300 million contained in the governor's budget. The Senate would also limit the life of those assessments to two years.

What's next? The Senate President and House Speaker will appoint a budget conference committee to resolve the differences between the House and Senate budgets and produce a final legislative budget. Once finalized, the conference committee report will be voted either up or down (no amendments are permitted) by each chamber, and, if approved, sent to the Governor who will have ten days to review and return his vetoes and recommendations for amendment.

If you have any questions about the Senate budget or the budget process, please contact Mandy Gilman at AGilman@ABHmass.org.

ABH Annual Meeting

On May 9, ABH members from across the state came together for ABH's Annual Meeting. There, they had the opportunity to hear from Linda Rosenberg, MSW, President & CEO of the National Council for Behavioral Health. Ms. Rosenberg, a preeminent leader in behavioral healthcare, briefed members on the latest developments in Congress relating to behavioral healthcare financing, including Medicaid, Medicare and the Affordable Care Act. She spoke about national trends relating to the delivery of community-based behavioral healthcare.



CBHI Licensure Scholarships

MassHealth is sponsoring a program to improve retention of ICC and IHT staff by providing financial reimbursement to CBHI Intensive Care Coordination (ICC) and In-Home Therapy (IHT) staff who achieve independent licensure (LICSW, LMHC, LMFT, and Psychologists). Funds (a maximum of \$1,500 per individual) can be used for “the cost of licensing prep/study courses, license test fees, and the cost to obtain the actual license.” As there is a limited amount of money available for this program, applicants are encouraged to apply in a timely manner. For more information, contact Amy Horton at AHorton@tacinc.com or at 617-266-5657, x 122.

New Caring Together Leadership Structure

The Department of Children and Families (DCF) and the Department of Mental Health (DMH) have announced a new structure for the leadership of Caring Together that the agencies hope will more aptly represent the collaboration between the two agencies. Andrea Cosgrove from DCF and Carol Murphy from DMH will now be Co-Directors of Caring Together. DMH and DCF feel that this will “signify the collaboration between the two agencies and more closely aligns with the current operations...[and] simplify the reporting structure for the Caring Together teams.



PACT Rates

EOHHS has published its Program of Assertive Community Treatment (PACT) services rate regulation (101 CMR 430) for final adoption.

The rates become effective for dates of service provided on or July 1, 2017

Free DMH-funded Training

Understanding and Preventing Violence - A Community Mental Health Perspective

The workshop will explore the root causes of violence among individuals with mental illness, and will describe current trends in violence risk management.

Where: Holyoke Community College
The Kittredge Center, 303 Homestead Avenue
Holyoke, MA 01040

When: June 22, 2017
9:00 a.m. – 4:00 p.m.
Registration begins at 8:45 a.m.; one-hour lunch *on your own* from 12:00-1:00 p.m.
You must attend the entire training to be eligible for CEs

Target Audience: This presentation is geared toward providers at all levels in community settings who work with individuals who are receiving DMH services and have histories of violence.

Registration: Contact Dianne.Williams@umassmed.edu

Continuing Education Information: Applications for MaMHCA/MMCEP and NASW continuing education credits have been submitted. Please contact the meeting organizers at University of Massachusetts Medical School (508-856-8709) for the status of LMHC and Social Worker CE certification.

Maximize your MIPS Performance

MACRA 201: How to Maximize your MIPS Performance in 2017

Wednesday, June 21st from 1:30-3pm ET

[Register Here](#)

Join Elizabeth Arend, QI Advisor at the National Council for Behavioral Health, who will share updates and answer your questions about CMS's Quality Payment Program, which went into effect on January 1, 2017.

This webinar is exclusive to ABH Members.

The vast majority of behavioral health programs will be required to participate in Merit-based Incentive Payment System (MIPS) in 2017 and providers will have their payments adjusted upward or downward based on their participation and performance.

This one and a half hour webinar will review MIPS reporting options and walk through each performance category, so you can determine how to maximize your performance and Medicare Part B reimbursement.

Questions? Contact Mandy Gilman at the Association for Behavioral Healthcare at agilman@abhmass.org.

ABH STAFF

Vicker V. DiGravio III
President/CEO
508.647.8385, x11
vdigravio@abhmass.org

Constance Peters
Vice President for
Addiction Services
508.647.8385, x13
cpeters@abhmass.org

Lydia Conley
Vice President for
Mental Health
508.647.8385, x15
lconley@abhmass.org

Mandy Gilman
Senior Director of Public
Policy & Research
508.647.8385, x16
agilman@abhmass.org

Megan Thompson
Director of Children's
Behavioral Health and
Member Services
508.647.8385, x14
mthompson@abhmass.org

Rosemary Santini
Administrative Assistant
508.647.8385, x10
rsantini@abhmass.org

Ellen Caliendo
Business Manager
508.380.9887
ecaliendo@abhmass.org

Testifying

The ABH policy team has been hard at work providing testimony before the Massachusetts legislature on bills that would impact our members. ABH recently testified in support of [House Bill 2193](#) and [Senate Bill 582](#) which would limit both MassHealth and commercial health insurers to a six-month period for recovering payments to a provider for completed mental health and addiction services. Currently, insurers have unlimited time to retract payment from a provider when they discover the patient was not covered, even though they authorized the services and paid the claim.

ABH also testified in support of [House Bill 2947](#) and [Senate Bill 528](#), *An Act to Increase Consumer Transparency about Insurance Provider Networks*. This legislation would improve the accuracy of insurance directories by requiring weekly updates, proactive communication with providers, and improved access to provider directories. Currently, families and individuals seeking care in Massachusetts are often unable to find accurate, reliable information through their insurance carrier because insurers do not regularly update provider directories. Insurance carriers appear to have adequate networks as required by law, but many listed providers have moved, closed their practice, or no longer participate in a given plan. Even for providers who are still practicing and in-network, the provider directory often contains inaccurate information. The changes required in this legislation would enable patients and their families to better access services. Read our testimony [here](#).

[Senate Bill 2960](#) and [House Bill 591](#), *An Act to Protect Access to Confidential Healthcare* would establish mechanisms to ensure that when multiple people are on the same insurance plan, confidential health care information is only shared with the patient. By requiring an insurer to send a "member-level" EOB to an address of the patient's choosing, rather than to a family member, this bill would ensure greater privacy and remove barriers to accessing care, in turn promoting timely treatment and reduced health care costs. ABH testified in favor of this bill and you can read our complete testimony [here](#).

If you have any questions, please contact Mandy Gilman at AGilman@abhmass.org.

Keeper's Korner

Keeper loves to run, but on her recovery days, she loves to read. Here's what she has this month:

- [AG Warns of Addiction Treatment Scams](#). *WBJournal*.
- [Did This 100-Word Letter Help Spark The Opioid Epidemic?](#) *Forbes*.
- [More than a Third of Teenage Girls Experience Depression, New Study Says](#). *Washington Post*.
- [The Addict Brokers: Middlemen Profit as Desperate Patients are Treated like Paychecks](#). *The Boston Globe*.



A little speed work.

