Dear MHN Practitioner,

The MHN Quality Improvement (QI) Department is pleased to present to you the next issue of the MHN Practitioner Update Newsletter.

This edition contains important information for our Medi-Cal providers in California as well as information you should know about our ongoing behavioral health quality improvement projects.

We also launched our new Provider Portal interface in January! There, you can always find electronic versions of our newsletters, even if you don’t have an account. Please visit [https://www.mhn.com/providers.html](https://www.mhn.com/providers.html) > ‘Provider Newsroom’ (left side) > ‘Practitioner Newsletters’.

Thank you for taking the time to read this newsletter.

Regards,
The MHN QI Department

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- 2018 MEMBER SATISFACTION SURVEY RESULTS
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- **Planning Ahead:** MAY 12-18 is NATIONAL PREVENTION WEEK
- **SAVE THE DATE!** Continuing Education Opportunity

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**NEXT ISSUE:**

May 2019

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**TO REACH MHN CUSTOMER SERVICE:**

CALL THE 800# ON THE BACK OF THE MEMBER’S ID CARD

**PROFESSIONAL RELATIONS:**

PROFESSIONAL.RELATIONS@HEALTHNET.COM

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MHNs Treatment Record Documentation Standards can be found on our new MHN Provider Portal. For more information, please go to: [www.mhn.com/providers.html](https://www.mhn.com/providers.html) > ‘Working with MHN’ (left side) > ‘Clinical Operations Practices’ > ‘Treatment Record Documentation Standards’
Each year, the MHN QI Department administers a Practitioner Satisfaction Survey that is sent to contracted practitioners with an email address on file. In 2018, a total of 3188 practitioner email addresses were included in the sample. There were 1,334 respondents, giving the survey a response rate of 41.8%, which is 4% higher than the 2017 response rate. Satisfaction levels among items varied between a low of 74% and a high of 97%. The five highest rated items were all related to accessibility/availability, Professional Relations and the authorization/referral process (Table 1). Among the 5 lowest rated items, four were related to claims and one was related to coordination of care (Table 2).

<table>
<thead>
<tr>
<th>Table 1: Highest Rated Performance Indicators:</th>
<th>% Positive Response:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability of interpreter services for members inquiring about behavioral health services with you</td>
<td>97.1%</td>
</tr>
<tr>
<td>Availability of interpreter services for patients during treatment / evaluation with you</td>
<td>96.1%</td>
</tr>
<tr>
<td>Ease of access to MHN's 24-hour clinical call center to support your patients</td>
<td>95.8%</td>
</tr>
<tr>
<td>Distribution of clinical guidelines and/or protocols endorsed by MHN</td>
<td>95.3%</td>
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<tr>
<td>Ease of obtaining immediate services for a patient with a life threatening, emergency situation</td>
<td>95.2%</td>
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</tbody>
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<table>
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<tr>
<th>Table 2: Lowest Rated Performance Indicators:</th>
<th>% Positive Response:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timeliness of payment when MHN issues the check</td>
<td>83.2%</td>
</tr>
<tr>
<td>Timeliness of payment when someone other than MHN issues the check</td>
<td>82.5%</td>
</tr>
<tr>
<td>Care coordination with Primary Care Providers (PCPs) on patients' behalf</td>
<td>80.2%</td>
</tr>
<tr>
<td>Ease of resolution of claims problems</td>
<td>79.0%</td>
</tr>
<tr>
<td>Amount of time to resolve claims problems</td>
<td>75.6%</td>
</tr>
</tbody>
</table>

The results from the practitioner survey are reviewed each year by the QI Department and other appropriate MHN departments. When warranted, workgroups are formed and corrective action plans or quality improvement initiatives are implemented to improve practitioner satisfaction. Specifically, we are working with our Claims department on very targeted projects to address payment timeliness and problem resolution, as a result of this survey. You can review this year’s results on our new Provider Portal at https://www.mhn.com/providers.html > Working with MHN > Quality Management > Practitioner Satisfaction.

*IMPORTANT NOTICE FOR CALIFORNIA PROVIDERS*

Effective January 1, 2018, the Department of Health Care Services (DHCS) has issued mandatory enrollment requirements for Medi-Cal managed care plans (MCPs). MHN existing network providers in the following counties (Fresno, Kern, Kings, Los Angeles, Madera, Riverside, Sacramento, San Bernardino, San Diego, San Joaquin, Stanislaus and Tulare) have two choices for Medi-Cal enrollment- either one needs to be started ASAP if you haven’t already done so. The consequence of not enrolling in the Medi-Cal program will result in termination from the MHN network.

Providers can go to the DHCS website and complete the Medi-Cal enrollment forms that pertain to your license type OR use MHN’s internal enrollment process, whose goal is to make this process as pain free as possible. MHN has begun outreach to our network to provide information on the process. **If you have already started the DHCS Medi-Cal enrollment process, please make sure you notify MHN so that we can have you sign and return our Enrollment Attestation Form.** Please contact us at Medi.Cal.Contracting@healthnet.com if you have questions regarding MHN’s internal Medi-Cal enrollment process, to request an Attestation Form or to send us proof of your DHCS enrollment. Thank you in advance.
Each year MHN surveys members who received behavioral health services during the previous year for the Commercial, Medicare, Medi-Cal, Cal Medi-Connect and some of MHN’s stand-alone lines of business. You can review all of this year’s results on our new Provider Portal at https://www.mhn.com/providers.html > Working with MHN > Quality Management > Member Satisfaction.

The annual member satisfaction survey started in July 2018 with a total survey response period of 13 weeks. The sample included Health Net members who used MHN services between April 1, 2017 and March 31, 2018. Response rates for all affiliated lines of business ranged from a low of 3.5% for the Health Net Life Commercial EPO line of business up to a high of 31.5% for Health Net California Medicare members. There were changes to this year’s survey tool. Several questions were reworded for clarity and conciseness and three new questions were added to start measuring additional national accreditation standards.

Among the highest rated items for most lines of business:
- Choice of behavioral health practitioners (BHP)
- Travel distance to appointments
- When rescheduling an appointment, the appointment was rescheduled to the member’s satisfaction

Among the lowest rated items for most lines of business:
- BHP discussing the importance of having members share treatment plan information with their primary care physicians
- BHP discussing with the member the importance of coordinating care with other BHPs

Please consider helping us improve member satisfaction by:

☑ Emphasizing the importance of care coordination with other behavioral health team members
☑ Emphasizing the importance of coordinating care with the member’s primary care physician
☑ Discussing and addressing any side effects for newly prescribed medications

For helpful information on coordinating care and sharing patient information between and amongst providers, you can always refer to our “Treating Behavioral Health Conditions in PCP Settings” Provider Toolkit at https://www.mhn.com/providers.html > Provider Newsroom > Quality Improvement Documents.
Each year MHN develops initiatives as part of an ongoing commitment to quality improvement. This commitment is reflected in our annual work plan and includes the following ongoing Quality Improvement Projects (QIP) for 3 behavioral health HEDIS® performance metrics (for more information about each measure, click below):

1. Follow-Up* After Hospitalization for Mental Illness (FUH)
2. Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)
3. Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)

**FOLLOW UP AFTER HOSPITALIZATION FOR MENTAL ILLNESS (FUH)**

*A behavioral health provider can be a social worker, psychologist, counselor, nurse-specialist or psychiatrist

Two Sub-Measures:
- Members seen within 7 days after discharge
- Members seen within 30 days after discharge

Goal:
Increase the percentage of members who attend a 7-day and 30-day follow-up appointment

Member Resources:

- **Tele-health appointments** through various providers *(available to all members)*
- **In-home follow up treatment visits** with CARE Bridge Behavioral Health Services *(available only to members of all ages in LA, Orange, Riverside and San Bernardino Counties)*
- **Mobile phone texting program** for appointment reminders and other important behavioral health and wellness information *(available only to members of all ages in California)*

*Click here for more information on these member resources*

Members having difficulty scheduling a follow up visit after their psychiatric hospitalization can call MHNs Customer Call Center at 1-888-327-0010 for immediate assistance!

To see if your clients qualify for in-home treatment or telehealth services, please contact the MHN Customer Contact Center at 1-888-327-0010 and ask to speak with a care manager!
Two Sub-Measures:

- **Initiation into Treatment:** Percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication assisted treatment (MAT) **within 14 days of the diagnosis**
- **Engagement into Treatment:** Percentage of members who initiated treatment and who had two or more additional AOD services or MAT **within 34 days of the initiation visit**.

**Goal:**
Increase the percentage of members attending a follow-up appointment or begin treatment within 14 days of a substance use disorder diagnosis.

**Provider & Member Resources:**
- Provider referral incentives (for participating PPGs only)
- Tele-health appointments through Genoa Tele-Psychiatry (available to members 18 or older)
- Mobile phone texting program for appointment reminders and other important behavioral health and wellness information (available only to members of all ages in California)

One Measure:
Percentage of members, ages 6-17, who are prescribed antipsychotic medications that have completed annual metabolic testing.

**Goal:**
Increase the percentage of members, ages 6-17, who are prescribed antipsychotic medications that have completed annual metabolic testing.

**Metabolic testing is defined as completing the 2 tests below in a calendar year:**
1. **At least one test for blood glucose**
   *Glucose Tests Value Set or HbA1c Tests Value Set*
   **AND**
2. **At least one test for LDL-C**
   *LDL-C Tests Value Set or Cholesterol Tests Other Than LDL Value Set*
National Prevention Week is an annual health observance dedicated to increasing public awareness of, and action around, mental and/or substance use disorders.

Mark your calendars! The next Substance Abuse and Mental Health Services Administration (SAMHSA) National Prevention Week will take place May 12 through 18, 2019. Each year around this observance, communities and organizations across the country come together to raise awareness about the importance of substance use prevention and positive mental health.

**Purpose of National Prevention Week**
The three primary goals of *National Prevention Week* are to:

1. Involve *communities* in raising awareness about behavioral health issues and implementing prevention strategies, and showcasing effectiveness of evidence-based prevention programs;
2. Foster *partnerships and collaboration* with federal agencies and national organizations dedicated to behavioral and public health; and
3. Promote and disseminate quality *behavioral health resources and publications.*

Each year, *National Prevention Week* includes daily themes to focus on major substance use and mental health topics. The 2019 daily themes are:

- **Monday, May 13:** Preventing Prescription and Opioid Drug Misuse
- **Tuesday, May 14:** Preventing Underage Drinking and Alcohol Misuse
- **Wednesday, May 15:** Preventing Illicit Drug Use and Youth Marijuana Use
- **Thursday, May 16:** Preventing Youth Tobacco Use
- **Friday, May 17:** Preventing Suicide

To learn more about how you can participate in *National Prevention Week* activities, click here.

**SAVE THE DATE!**
Continuing Education Opportunity: Wednesday, May 15th

As part of Health Net of California, Inc., Arizona Complete Health, Health Net Health Plan of Oregon, Inc., Health Net Community Solutions, Inc. and Health Net Life Insurance Company, Inc.’s commitment to supporting our physicians and their staff in delivering quality care to our members, we are joining with Envolve PeopleCare to present a behavioral health webinar on ‘**Motivational Interviewing**’ on Wednesday, May 15, 2019 from Noon-1:00pm PT/3pm-4pm ET.
The purpose of this training is to introduce the fundamentals of Motivational Interviewing (MI). Attendees will be exposed to and begin to learn key MI concepts and skills. This training is considered a Level 1 MI training.

Upon completion of this webinar, attendees should be able to:

- Describe 2 main points of the Motivational Interviewing definition
- Name and briefly describe the 4 elements of the MI Spirit
- Identify the core skills that are represented by OARS
- Utilize common provider screening tools

TO REGISTER FOR THIS WEBINAR or to be added to our webinar email list to receive more information about future CME/CE activities, please email cqi_medicare@healthnet.com.

Please keep your practice contact information current!

One way to update your contact information is by going directly to our new Provider Portal: [https://www.mhn.com/providers.html](https://www.mhn.com/providers.html), then select ‘Provider Login’ (left side) and log into your account as usual to update your information.

You can also contact Professional Relations directly at any time for contract and Provider Portal questions or to update your contact information by emailing Professional.Relations@Healthnet.com.

The next Practitioner Update is scheduled for May 2019

Thank you for your time and attention!

The MHN Quality Improvement Department