

Results of APPT Membership Survey

Fall Conference Covered Therapeutic "Basics"

The APPT Fall Conference on Nov. 1 set a new attendance record for the association, drawing more than 30 therapists. Office staff members of local private practice groups discussed payment policies and insurance reimbursement issues; Ken Klaasmeyer provided an update on the Richard Young Health Partners program and Dr. Judy Stoewe talked about ADHD and its effects on children.

Klaasmeyer shared the RYHP efforts to improve therapist relationships with insurance payors, including the development of a web site which will allow therapists to search for reimbursement rates by payor and CPT code. The PHO is also working on a central credentialing system for their members to reduce paperwork.

"Not all payors are created equal," Klaasmeyer noted. Consequently, the organization is working to negotiate favorable contracts for providers to assure appropriate fee schedules as well as payment policies, insurance card requirements and other administrative guidelines.

Stoewe, a child psychiatrist, offered therapists basic guidelines for differentiating ADHD from more serious illnesses, including bipolar disorder. She also highlighted current research and medications related to the treatment of bipolar disorder in children. In particular, Stoewe emphasized the need to diagnose and treat children at an early age.

"Early intervention may help change the morphology of the brain to prevent chronic illness," she noted. "We have to be flexible in our treatment regimes."



Establishing Collaborative Relationships With Psychiatrists for Referrals

By Jack Wineman, Ph.D.

About a year ago, comments were heard from a few mental health professionals (MHPs) that they were losing clients who were referred for medication consultations. It appeared that some psychiatrists were telling patients that continued medication management would require them to see an MHP in their office.

The main argument presented was that the psychiatrist could be assured of higher quality psychotherapy since the psychiatrist knew the MHP affiliated with his/her practice. The argument not presented was the fact that the psychiatrist or the psychiatrist's employer likely would gain financially from such an arrangement.

To try to better understand this situation, the APPT Board of Directors in May surveyed its membership. The board wanted to see how widespread the problem might be. At the same time, it wanted to identify those psychiatrists with whom mental health professionals have had the most positive and collaborative relationships.

Of 110 members, fifteen (14 percent) responded to the survey. Of the 15 respondents, five said they have not had a client terminate therapy following a medication referral to a psychiatrist.

Of the remaining respondents, the number of clients lost in 2001 per MHP ranged from one to 10. On average, each of the MHP respondents lost about three (2.9) clients who were referred for medication consultations.

The respondents were asked what explanations their clients gave them for terminating treatment with them. The clients' answers were wide ranging. In one case, a client was only advised to change to another MHP; in another case the patient was told it was preferred. Other clients reportedly

were told they would *have* to see a therapist in the psychiatrist's office for continued psychiatric care.

Some clients were told the psychiatrist will "only work with therapists who are part of the system" or that the psychiatrist works only "with people in my office." One psychiatrist allegedly told a client referred for medication he would provide the therapy.

The survey data do not suggest this is a huge problem. Nonetheless, the practice does affect the care provided to the clients of some MHPs. So what can be constructively done about the situation?

Here are a few ideas:

- Establish an ongoing, professional relationship with several psychiatrists. As they become familiar with your work, collaborative referrals should naturally develop.
- Call the psychiatrist before referring a client. Discuss the purpose of the referral and your clear expectation of continuing as the client's psychotherapist.
- Educate your clients when you are discussing a medication referral. Empower them; give them permission to refuse to change therapists.
- Consider referring some clients to a primary care physician. Family practice physicians, internal medicine spe-

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From the President By Pam Feldman, L.P.C. — President of APPT

It has been a busy time for APPT since the Spring Conference. The stage is being set for a very active year in which your participation as members may be more critical and essential to our goals than ever before. We have some exciting ground to cover on the agenda for the upcoming year.

As the current parity bill expires, we are faced once again with the need to work together to help pass legislation that protects us and those who need our services while fighting for rate structures and contract language that are favorable to our needs. The agenda for the upcoming year affords each and every member of APPT to make an impact and be a participant.

- There is currently parity legislation on the state and national level. Our goal is to keep members informed about what is happening and our strategy to make the maximum impact.
- 2. In June 2002, APPT joined with NABHO (the Nebraska Association of Behavioral Health Organizations). This affiliation will give us a shared and more powerful role in *shaping new legislation*, getting the most upto-date information to our members in the most timely fashion and joining with other behavioral health providers to lobby for parity and other legislation.
- 3. In order to keep all of you informed and to get group participation in *lob-bying our congressional leaders*, we would like to have a complete and up-

Free Legal Consultation

Remember, each APPT member is entitled to a free legal consultation with an attorney from Erickson & Sederstrom, P.C. (up to one hour) per year. Call Chuck Sederstrom, attorney at law at (402) 397-2200.

If you access this service, please give us feedback! Call Bridget at the APPT Office at (402) 393-4600 and let us know!

to-date e-mail address for all members. At various points throughout the year, you will be asked to take a few minutes to contact your representatives to give your input on bills before them. We will work to time this for maximum impact.

- 4. Another goal is to continue to *find ways to network* with other organizations for a stronger impact on insurance rates and contract language and other issues affecting therapists. See the article on page 5 for an example of this work.
- 5. Though most of our activities are centered in the Omaha area, the board of APPT is well aware of the importance of this organization's need to *represent therapists statewide*. Membership in APPT for those outside of the Omaha area will be enhanced by better communication through e-mail. Currently, you have the ability to connect with all APPT members with e-mail through a group E-List (*see article on page 3*).
- 6. We will continue our commitment to *providing CEUs* through our Tuesday Mini-Practice Series Workshops. Our focus for these meetings ranges from practice management issues to skill development. We hope to tap into the expertise of our members in 2003 to provide some of these minilectures. If you are interested in volunteering your talents, call me at (402) 445-9175.
- 7. *Mentoring* is another goal of APPT that allows us to give back to others. Hopefully, we can continue to build a mentoring program.

I ask that each of you take the time to read *The Compass*, read your e-mails from APPT, attend at least two or three scheduled events and contact your legislative representatives. Consider getting more involved by taking a board position. APPT is **your** association. Let us know what your needs

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Submissions may be edited for content, clarity and/or length. Subscriber comments are welcome.

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Billing Solutions for Solo Providers

The process of filing insurance claims can be both time-consuming and energy draining, particularly for solo private practice therapists, says mental health billing specialist Susie Romanik.

"Some insurance companies have made it as difficult as possible to get paid, because they have a vested interest in paying out as little money as they possibly can," she notes. "They've created an extremely difficult set of hoops to jump through to file and collect your insurance claims."

Romanik says that 32 percent of claims are rejected and another five to 15 percent are lost in the shuffle and *never* collected. The average time it takes providers to collect their money is 60-120 days and can be even longer for Medicaid claims.

It takes a tremendous amount of time and money to play this frustrating claims filing game. Here are a few advantages to using a medical billing service:

#1 You'll get paid faster. Electronic filing drastically reduces the amount of time it takes to collect from insurance companies. Electronically-filed claims are handled by computers and bypass all human contact. That means there are no people involved to bog down the process.

- #2 The rejection rate for claims is minimal. Your claims don't get "mysteriously lost" by the insurance companies. They cannot be lost when filing electronically because you will receive an "acceptance report" with details of the claims filed.
- #3 Because you will have to. It will be *mandatory* to file Medicare claims electronically by October 2003. Plus, the electronic software we use is HIPAA compliant.
- #4 Medical billing companies are committed to providing therapists with the highest quality and confidentiality in a timely manner. A billing specialist "relieves you of the tedious and technical billing and follow-up functions," Romanik says.
- **#5** It frees up the therapist's time so you can concentrate on what you do best. If you want to spend more time seeing clients, and less time dealing with the insurance "game," a medical billing specialist can make it work for you!

For more information about outsourcing your mental health billing, call Romanik at (402) 496-9966.

E-Mail List Continues to Grow As Therapists Share Information, Ideas

If you have e-mail access from home, work or both, but aren't on the APPT E-List, you're missing out!

Recent topics on the E-List have included: HIPAA, insurance company payment policies (and denials) and legislation affecting mental health providers. Plus, you'll receive first notification of upcoming APPT events — as well as reminders about conferences, workshops and seminars. And it's a great way to stay connected with other private practice therapists!

If you are a current APPT member, you are eligible to join the E-List. We just need your e-mail address to sign you up!

Call Bridget at (402) 393-4600 with your e-mail address, or send an e-mail to *APPT2000@aol.com* (subject: APPT Member E-List). You will receive an e-mail confirming your addition to the E-List.

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Interested in Reviewing A Book for APPT?

We have several books at the APPT office that are available for therapists to review for an upcoming issue of *The Compass*.

Reviewers may keep the book when they are finished. Reviews of between 350 and 750 words must be submitted to the APPT office for publication in the newsletter.

Requests for books will be honored on a first-come, first-served basis. APPT will send you the book and assign you a deadline for an upcoming issue (you will usually have 90 to 120 days to read the book and complete the review).

Call Bridget at (402) 393-4600 to request one of the following books:

 Traumatic Relationships and Serious Mental Disorders by Jon G. Allen. \$50.00. June '01 (hardcover).

- 2. *Introduction to Group Therapy* by Virginia Brabender. \$80.95. May '02 (hardcover).
- DSM-V-TR In Action by Sophia F. Dziegielewski. \$39.95. July '02 (paperback).
- 4. Feminist Perspectives in Therapy by Judith Worell and Pamela Remer. \$45. September '02 (hardcover).
- Play Therapy with Adults by Charles E. Schaefer. \$55. November '02 (hardcover).

In addition, if you have read a book not on our list but would like to review it for an upcoming issue of *The Compass*, please contact Pam Feldman or Bridget Weide.

Calendar of Events

Tuesday, January 7, 2003 Mini-Practice Series Workshop Olive Garden (76 & Dodge – Omaha) Lisa Blunt "Understanding and Treating the

"Understanding and Treating the Attachment-Impaired Child"

This workshop will provide an overview of attachment therapy and the manifestations of attachment-related problems with a focus on treatment techniques to utilize with children along with parenting interventions. Questions and discussion are encouraged.

Watch for further details in your mailbox and in future issues of The Compass!

APPT Offers Scholarship for Continuing Education

Ever want to attend a particular workshop or seminar but find yourself saying, "It sure would be nice to attend that workshop — but boy, that's an awful lot of money"?

Well, APPT has an answer for your dilemma! It's the APPT Scholarship for Continuing Education and it's designed to help APPT members defray the cost of a workshop they attend (up to 75% of the cost of the workshop, up to \$100).

Simply complete the scholarship application form (found on this page) and submit it, along with a copy of the workshop brochure (if available).

Your scholarship request will be reviewed by the APPT Scholarship Committee and you will be notified of their decision within 7 days of your application.

Questions? Call Pam Feldman at (402) 445-9175.

Application for APPT Scholarship For Continuing Education

Name
Practice Location
City/State/Zip
Phone
Conference Title and Location (please attach a copy of brochure, if available)
Date: Cost:
<i>I am willing to:</i> ☐ Present a brief summary of the workshop at a mini-practice workshop ☐ Write an article for <i>The Compass</i> summarizing the content of the workshop. <i>Please note:</i> The maximum amount awarded is 75 percent of the cost of the workshop, up to \$100. If selected, you will be reimbursed the awarded amount after attending the workshop and sharing the information with APPT members through a presentation or article.

Submit completed application to: Pam Feldman, LPC, 702 North 129th Street,

Suite 104, Omaha, NE 68164 or fax to (402) 431-1535. Applications will be

considered and a decision reached within 7 days of receiving your application.

Private Practice Opportunity

Therapy office available Friday and Saturday now; additional hours May 1. Excellent work environment in Old Mill area of Omaha. Call Peg O'Dea Lippert, MSW, LCSW at (402) 330-6060.



APPT Researching CADAC Issue

In response to requests from several APPT members, the Association is researching an issue related to Certified Alcohol and Drug Abuse Counselor (CADAC) certification and its impact on licensed mental health therapists.

Specifically, current regulations specify that individuals can receive a CADAC credential without being licensed as a mental health counselor. New regulations would propose that only CADAC-certified individuals be allowed to conduct substance abuse evaluations of offenders in the criminal justice system. It would also require an exclusive training curriculum in order to receive the CADAC certification, regardless of experience or previous training in substance abuse diagnosis and treatment.

The concern is that the state policy is inconsistent with the Nebraska licensing statute, which explicitly includes substance abuse evaluation and treatment within the scope of practice of several disciplines.

If you are interested in learning more about this issue — or want to contribute your input, please contact Pam Feldman at (402) 445-9173.

Survey Identifies Problems with Med Referrals

Continued From Page 1

cialists and other primary care physicians will often provide initial medication, giving the patient earlier relief and allowing the time necessary to establish a collaborative psychiatric referral.

- Avoid referring to psychiatrists with a reputation for keeping your clients. If these or other positive approaches don't work, there are several avenues for you to consider:
- As an APPT member, you are entitled to a free consultation with an attorney at the law offices of Erickson & Sederstrom (call the APPT office at 393-4600 for details).
- If you feel there has been an ethical violation, you may file a complaint with the Nebraska Psychiatric Society (402-559-5089).
- You may also file a complaint with the Board of Medical Examiners, Nebraska Department of Health.

It is important not to forget that the survey had a second goal — to identify psychiatrists with whom APPT members

have had positive, collaborative relationships. In alphabetical order, our respondents listed the following psychiatrists: *Dr. W. Bruns, Dr. J. Coffman, Dr. M. Coy, Dr. E. Dahl, Dr. J. Dahlke,*

Dr. M. Diercks, Dr. J. Donaldson, Dr. P. Fine, Dr. M. Goodman, Dr. S. Hammer, Dr. W. Henderson, Dr. S. Jones, Dr. M. Meyer, Dr. W. Marcil, Dr. M. Marsh, Dr. J. McGivern, Dr. R. Nitcher, Dr. E. Oliveto, Dr. S. Paden, Dr. S. Starr, Dr. M. Sedlacek, and Dr. M. Wetzel.

As a cautionary note, several of the above psychiatrists were also listed by survey respondents as having required clients to see therapists in their office. If you have not established a working relationship with a psychiatrist to whom you wish to refer, be sure to consider the above constructive suggestions.

Do you have an opinion about this article? Your feedback is welcomed. Call Dr. Wineman at (402) 592-0328.



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Join the Fight for Mental Health Parity

Nebraska Advocacy Services has revived the Nebraska Parity Coalition that helped to pass a law in 1999 to provide partial parity for mental health care in Nebraska.

The Association of Private Practice Therapists was a part of the 1999 initiative, and it has rejoined the effort this year to improve that law and to help pass similar legislation at the national level. Please help us in this worthwhile cause!

The purpose of parity legislation is to insure that mental health treatment receives equal treatment with physical health treatment for insurance purposes.

Until the passage of the 1999 law, insurers regulated by the State of Nebraska were allowed to use lower service limits and annual and lifetime payment limits for the treatment of mental health were different than for physical health.

Current law allows them to use different deductibles, copayments and coinsur-

ance levels for mental health. There is also anecdotal evidence that some consumers are being required to meet separate deductibles for mental and physical health treatment rather than having all costs count toward one combined deductible.

These practices can all result in higher out-of-pocket costs for consumers of mental health treatment than is the case for treating physical illnesses.

If one or more of your clients — or you or a member of your family — has had difficulties with the equal treatment of mental health under your insurance coverage, we encourage you to contact Brad Meurrens at Nebraska Advocacy Services by phone at 800-422-6691 or you can reach him by email at *brad@nas-pa.org*.

After the November elections, the composition of the Unicameral changed. Long-

time mental health supporter Sen. Jennie Robak was also defeated.

However, the following supporters of the original 1999 parity bill remain: Sen. Kermit Brashear, Sen. Pam Brown, Sen. Dennis Byars, Sen. Ernie Chambers, Sen. Jim Cudaback, Sen.

Paul Hartnett, Sen. Ray Janssen, Sen. Dwite Pedersen, Sen. Don Preister, Sen. Marion Price, Sen. DiAnna Schimek and Sen. Nancy Thompson.

The parity coalition will look to these veteran legislators — as well as to the newly-elected state senators in the Unicameral — to sponsor revised parity legislation in the 2003 session.

Stay tuned as we bring you more information about this developing topic!



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