

DBHR Weekly COVID-19 Call – 4/21/20

How to tune into the call:

Tuesdays from 10:00-1:30pm PST

Email hcadbhrbhcovid19@hca.wa.gov with subject: "Add me to DBHR COVID19 Provider Calls"

430 participants on today's call.

Keri Waterland – DBHR – moving from fear into learning, What expectations of "normal" am I letting go of? Example – telemedicine and telehealth. Before we thought difficult to strike a rapport if not in person. What we are finding is some unexpected freedom with telemedicine and that people are very resilient.

Trevor Covington DOH Mental Health response coordinator. Looking forward, planning for potential impact (not for public distribution) - Graphics capture information on how people respond and phases communities go through. Developed by trained psychologists and psychiatrists with strong experience in disaster. Next three months increase in feelings of hopelessness and withdrawal, increased substance use and frustration. Sept/Oct increased rates of depression and anxiety, peaking December-ish. Don't anticipate high rates of PTSD. Expect to revise forecast multiple times.

Second graph, going from Honeymoon to Disillusionment phase (hits low in Nov/Dec) which is when expect to see most behavioral health symptoms and increased needs. Anxiety, depression, SUD in Nov/Dec timeline.

Michael Langer – HCA is seeking success stories, how continuing treatment activities, how continuing to reach out to people in recovery or do prevention. Also planning a HCA blog re telehealth. Would love to hear those telehealth stories as well. HCADBHRBHCVID19@HCA.WA.GOV subject line: success stories

Provider SUD and Prevention and MH promotion webinars coming up **Slide 14**

SAMHSA grant for DOH – emergency COVID grant is approved, 1.4 million dollars to BH-ASOs to increase tx capacity for both (lost sound for a minute)

Loaner laptops, now available for medical or behavioral health providers and prevention & recovery based organizations which do not have access to laptop or resources to obtain one.

Behavioral Health institute – [resource website](#) offering:

- Training 4 week, 8 session training starts tomorrow, register on website.
- Request for providers to take a [survey](#) on future topics
- Webinar on staying connected – ways to build and maintain meaning connections during isolation. [Registration is open.](#)

FCS providers call – recovery support services- new guidance for FCS service providers now on HCA webpage. New "We're Peer for you" for people in recovery currently missing regular meetings. Certified peer counselors, recovery coaches, etc. avail M-F 5am – 10pm and weekends 8-8pm. And Community forums every day.

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Dr. Fontinos PPE – some more masks available and can be requested via local health jurisdictions (LHJ).

Testing guidance will be relaxed to include more people with symptoms. Still testing supply limitations. Expect different guidance by county as supplies increase. For concerns re residential settings contact LHJ. Still unclear if antibodies will provide immunity (or for how long). Also don't know if people who had Coronavirus with no symptoms will/won't show antibodies.

Q&A

1. **News this week – financial stability with providers and coordinating through MCOs.** Plan with MCOs to identify and assist BH providers with urgent fiscal need to ramp up for telehealth and continued viability. First payments have been made, MCOs have outreached to every provider in their network who had been identified as “at risk”. This is week 1 of actual payments made. Need to stay on top of this and work with the plans. Other aspect is ensuring that plans are paying in timely manner for accounts receivable and HCAa has process underway with MCOs to pay claims quickly. Where there is a problem, HCA will institute correction action to get those claims paid. Two emergency rules issued: 1) eligibility changes – assigning new enrollees to plans throughout the state and 2) policy for when plans allowed to exit/enter regions based upon their performance. BH performance is a major part of this piece. Issued RFP for existing plans in the state who may be interested in entering new regions. Those contracts would start Jan 2021.
2. **SAMHSA Grant & crisis counseling – Is there a crisis grant counselor who might be able to assist with counseling for folks in isolation/quarantine?**
Answer: treatment expansion grant and money will go to BHO-ASOs. 10% focused on health care workers. King County will start this as a model. And Peer Support \$ for isolated individuals. Best to talk to BHO-ASO and f/u with HCA so they understand need.
3. **Cleaning supplies and sanitizers for 24/7 facilities and difficult to find sufficient supplies.**
Answer: no coordinated strategy for cleaning supplies. HCA will reach out to Labor & Industry for information
4. **Testing – not FDA approved and 40% error rate?**
Answer: that was antibody testing not being FDA approved. If your provider is sending to a certified lab, those results will be accurate. Other tests don't have to demonstrate same level of accuracy and quality control with false negatives and false positives
5. **Certified Peer Counselor training** – first virtual cohort anticipated in May for what used to be Part 2 of in-person training.
6. **Billing – 120 denials from MCOs how get corrected?**
Answer: significant work underway. Be sure to let folks at HCA know your issues to assist with facilitating payment or corrective action. This is a top issue for plans to get right with IMC and HCA is very serious about resolving payment issues.
7. **Assisted living – 100 mentally ill adults, not a locked down facility.** Need ideas to keep residents on campus and occupied. A- HCA will track down ideas for this organization and f/u. Also look at weekly DBHR email blasts, we include suggestions in there too.

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8. **Zoom license – applied over a week ago**

Answer: typical turn-around is 2-4 days, if no response check junk email box. If still nothing, send questions to HCADBHRBHCVID19@hca.wa.gov with subject Zoom License Question. Include name, date of application, email address, organization.

9. **Insurers and billing – opioid detox not being paid for?**

Answer: HCA did have meeting with withdrawal management providers and MCOs, what heard is that there is not a blanket denial or a blanket acceptance. Individually looking at patient and making case-by-case determination.

10. **Temporary suspension of UAs is commonplace right now.** Need to think about in a clinical patient centered way. Looking into alternate methods that maintain social distancing.

11. **Addressing outreach health promotion resources for African American communities** – at policy level of response coordination are addressing this concern. Put out small funding opportunity over the weekend to fund organizations that can help with messaging to different communities.

12. **ROI consent over phone – mental health**

Answer: guidance from SAMSHA that says if provider deems there is an emergency than that helps with facilitation of information where do not need signed consent form. HCA is encouraging providers to do what they feel is necessary to facilitate care for their patients. HCA will not be offering legal voice on that. Links to the language and various releases will be shared.

DBHR Calls continuing through May 5th at this point. Conducted poll if interest in weekly or bi-weekly starting in May.

1:30 call concluded