Network Notes

United Behavioral Health-Atlanta Care Advocacy Center News for UBH-Contracted Clinicians

Fall 2006

Addressing the Needs of Enrollees Coping with Disasters

In the immediate aftermath of hurricane Katrina last fall, United Behavioral Health (UBH) promptly mobilized its operational and network resources to assist emergency responders and enrollees. Some of these measures included the identification of available clinicians in highly impacted areas, securing appointments in the Houston area where many evacuees fled after the disaster, identification of clinicians for "drop in" clinic services in partnership with area hospitals, and providing on-site EAP services to city employees and their managers. Many enrollees from the Gulf States area, however, continue to struggle with the devastating psychological effects of the hurricane.

The UBH Atlanta and Houston Care Advocacy Centers have developed a collaborative activity designed to improve the identification, referral, and treatment of enrollees diagnosed with Acute Stress Disorder (ASD) and Post-Traumatic Stress Disorder (PTSD). On-site EAP services remain available, and network managers continue to recruit clinicians with expertise in treating ASD and PTSD as needed. In addition, a clinician education teleconference, entitled "Treating Complex Psychological Trauma," was held in April (see the Clinical Learning section of the UBH clinician Web site, www.ubhonline.com, for more information on all UBH clinical learning programs). We also plan to send a targeted mailing to high-volume primary care physicians, providing them with enrollee education materials, behavioral health clinician lists, and an exchange of information form to encourage collaboration with behavioral health clinicians.

For the treatment of ASD and PTSD, UBH has adopted the *Practice* Guideline for the Treatment of Patients with Acute Stress Disorder and Posttraumatic Stress Disorder of the American Psychiatric Association.
The full text of the guideline is available through a link on the Clinical Resources section of www.ubhonline.com.

In addition, enrollees can access additional behavioral health materials through the UBH enrollee Web site, www.liveandworkwell.com. The Mental Health Condition Centers include information on prevention, treatment, self-care tips, and other resources. Specific information on PTSD can be found through the Life Changes section on the left-hand menu of the home page.

The National Center for Post-Traumatic Stress Disorder (www.ncptds.va.gov) has additional materials for clinicians as well as enrollees. For additional information, please contact the Atlanta Quality Improvement Department at 1-800-720-4128.

Improving Enrollee Satisfaction Article Addendum

With reference to the article on page 8 of this newsletter regarding improving enrollee satisfaction, you may offer your suggestions by calling the Atlanta Quality Improvement Department at 1-800-720-4128 and selecting option 1, or by e-mailing us at ATLQI@uhc.com.

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment

As part of UBH's commitment to ensure the highest quality of treatment across the continuum of care, we employ HEDIS® (Health Plan Employer Data and Information Set) measures to gauge the quality of care we deliver. In 2004, two new chemical dependency measures were added to HEDIS®. The measures track improvements in the treatment of the estimated five million people who need treatment for an Alcohol and Other Drug (AOD) Dependence disorder and who are not currently receiving it.

The two HEDIS® measures are:

- Identification of Alcohol and Other Drug Services (IAD) – the number of enrollees who received any AOD-related services during the measurement year.
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET) – the percentage of enrollees diagnosed with AOD dependence (see IAD measure) who initiate treatment and the percentage who engage in treatment.
- Initiation of AOD Treatment is the percentage of enrollees who initiate treatment through inpatient admission, or outpatient service for AOD dependence and an additional AOD service within 14 days.
- Engagement of AOD Treatment is the percentage of enrollees who complete at least two additional AOD services within 30 days of initiation.

Additional Resources

For additional information or to request copies of the materials mentioned above, you may contact us by calling 1-800-720-4128 or by e-mail at ATLQI@uhc.com.