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Optum on Defensive After Volley of Provider Complaints

TWIN FALLS -- Mental health care providers who say Optum Idaho is slashing services to line its pockets “don’t have all the facts,” a top state official says.

“They are just seeing their book of business change,” said Lisa Hettinger, Medicaid administrator for the Idaho Department of Health and Welfare. Hettinger joined Optum Idaho Executive Director Becky diVittorio and others to defend the company in a meeting with the Times-News after a volley of complaints lodged by Magic Valley mental and behavioral health care providers.

Optum also met with state Sen. Lee Heider, R-Twin Falls, who had sharply criticized the company and sided with providers. “They came down hard on me,” said Heider, chairman of the Senate Health and Welfare Committee. “I was sitting in a room, and it was 9-to-1. Because I was browbeating Optum for not doing a better job, paying clients and helping the people we’ve always helped, loved and cared for, they said, ‘Sen. Heider, that’s no longer the best practices.’

“We are going to have to accept the situation for what it is regardless of how we feel about it,” Heider said.

Providers have said Optum is cutting services to mentally ill patients who then wind up in jail or the emergency room, is violating ethics by having out-of-state representatives dictate care in Idaho and is creating burdensome red tape that makes it harder for providers to do their jobs.

Hettinger said Optum isn’t approving less care; it’s simply shifting what care it allows. Optum actually has exceeded the amount of care the state requires, she said.

DiVittorio said evidence-based services for children have increased, individual therapy is up 30 percent, and the number children getting family therapy has tripled. That’s in addition to many new trainings and other services Optum is providing, she said.

“I’d really like to see those numbers,” said a skeptical Jennie Fullmer, co-owner of Crosspointe Family Services in Twin Falls. While some Crosspointe clients have benefited greatly from Optum’s practices, “nothing is ever snapshot perfect, and we feel we are trying to jam a square peg into this round hole.”

Optum said complaints are only being filed by one sector of providers who rely on a treatment not proven to be effective. Community-based rehabilitation services (CBRS) is a form of counseling that requires less education and licensure and has therapists go into the community with clients to build situational coping skills, Hettinger said. A focus group examined the state’s rising cost of mental health care and recommended the state steer its low-income mental health care services to a managed care model focused on “evidence-based” care, she said.

In most cases, evidence does not exist to support CBRS, which was being used excessively as a one-size-fits-all treatment, Hettinger said. DiVittorio agreed, saying it is now “absolutely the provider’s responsibility to demonstrate medical necessity and appropriateness of services.”
Countered Fullmer, “How are we supposed to prove it works when they won’t approve the service?“

In fiscal year 2013, before Optum took over, the state provided $113 million in total care, $78 million of which was billed under psychosocial rehab, including CBRS. Providers say Optum has cut more than 30 percent of its CBRS clients, but Hettinger wouldn’t say how much of that therapy has been provided.

Fullmer said it’s “ridiculous” for Optum to cast such a stone at CBRS providers. If money were the reason for their outrage, “none of us would be in this field,” she said.

“If I was going to complain about loss in revenue, I would have complained this time last year when they cut reimbursement rates by 20 percent,” she said. “…What we are complaining about is that the people in this community with major mental health issues cannot get the care they need. For them to defend themselves because they feel like we are whining because our bottom line has been hit is irresponsible.”

Those unwilling to change with Optum will face the consequences “just like any other business,” said state Rep. Fred Wood, R-Burley.

“What you are doing is actually providing the same dollar service, only they are different services and your standard licensed social worker is not going to provide those services,” said Wood, chairman of the House Health and Welfare Committee. “… I think the people who will succeed are the people who are willing to change their business model, understand what is coming and get the necessary certification, which is going back to school.”

DiVittorio downplayed the allegation that using out-of-state people to dictate care is unethical. Asked how she felt about providers recording phone calls with out-of-state clinicians for ethical reasons, she said she appreciated the “feedback” they get from clients.

All involved in Optum’s processes are independently licensed in the states where they reside, and care can only be denied by someone with a doctorate, she said. If Optum denies services, providers can appeal that decision to the state, she said. “Anyone that is outside of Idaho is oriented to the state and the needs here,” she said.

How Optum operates, she said, is now a standard practice in health care. “If you were to go for surgery, your doctor would talk with your health plan and say, ’This is why (my client) needs surgery,’ and your health plan would make a decision on why it is medically necessary,’” diVittorio said.

Fullmer said she understands how the industry is shifting but has not seen such “disregard” for individual-based care and respect for the opinions of mental health professionals.

Wood, a retired physician and emergency medicine doctor, said “somebody else should be looking at everybody’s individual practice” to determine if that provider is keeping up with the latest treatments and best practices. “The fact is that we are all being reviewed, and I think that’s a good thing and not a bad thing,” he said. Would he be comfortable if he were told how to treat his patients and had to defend his judgments to a private company?

“You bet,” Wood said. “But you should never have to put yourself in a position where you’d have to defend it. What you want to be is making sure you are keeping up on all of your education.”

When Heider heard that sentiment from Wood earlier, he called it “shocking.” But now, Heider said, Wood has helped him understand that “things the way we’d like it and things the way they were in the past aren’t necessarily going to be so in the future.“

“It makes me sick, but I don’t know what to do about it,” he said. “I’ve been told this is the way things are going to be and to quit kicking against the pricks.”