

CBHA Provider Newsletter

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PRACTICING MINDFULNESS

Mindfulness:

- a state of active, open attention on the present (*Psychology Today*)
- psychological process of bringing one's attention to experiences occurring in the present moment (*Wikipedia*)
- maintaining moment by moment awareness of our thoughts, feelings, bodily sensations, and surrounding environment (*Greatergood. Berkeley.edu*)
- accepting our thoughts and feelings without judging them

(*Greatergood.Berkeley.edu*)



As behavioral health professionals, we guide clients to identify and embrace their thoughts and feelings. Supporting them in letting go and moving beyond things from the past. Teaching the value of being mindful of one's self with an absence of judgment.



As behavioral health care providers it is imperative to maintain a homeostatic balance of our professional and personal lives, of our emotions and feelings both on and off the job. Simply said, we should be compelled “practice what we preach”. We can only attend to others’ needs as well as we attend to our own. Being mindful of our OWN thoughts and feelings should be our first priority. Ask yourself, “Am I actively practicing mindfulness in my life?”

DIRECTOR'S BLOG

As the newest member of the CBHA clinical team, it is my privilege to fill the role Jay Hale held previously. As director of clinical and quality operations, my objective is to ensure CBHA has a continual focus on improving quality. We will do this by developing new initiatives focused on the strategic objectives of the health plans we partner with while also aligning with providers to rally around planned, focused

initiatives.

QUALITY. It is a simple word. A simple definition. A wide variety of applications. How do we know there is quality in what we do? How do we know there are acceptable results from the treatment our members receive? Can we describe, qualify and quantify the impacts of consumer focused clinical interventions? How will you/we know when a goal(s) has been achieved?

Quality requires progress and/or outcomes to be addressed in clear, measurable terms. That which is measured is what will change. Throughout the first quarter of 2018, CBHA will be identifying, prioritizing and developing clinical/quality initiatives.

Once defined, we will be looking for provider partners interested in being part of our quality journey's beta testing. Special communications via email will be sent once we can clearly define the objective(s) and described the action plan to deliver on the initiative's intent.

In closing I'd like to say, I hear many success stories from our clinical team who speak with many of you on case specific matters. Those successes are why we ALL do what we do. I am sure there are many more successes happening than I hear about. To each and every one of you I say "Keep up the great work".

I hope to get out to many provider offices in the coming year to put faces with names and say hello. It may be necessary to also offer a come-and-go provider network meet-and-greet as I know you are all very busy and it may be difficult to coordinate our schedules.

Best Regards,

Lanette Allendorf LPC, CCM
Director Clinical & Quality Operations



**CBHA NETWORK
EATING DISORDERS TREATMENT PROGRAMS**

Facility	Location	Levels of Care	Ages	Gender
Bright Heart Health	San Ramon, CA	IOP	13+	M/F
Carolina House	Durham, NC	RTC, PHP	17+	F
Carolina House	Raleigh, NC	PHP, IOP	17+	M/F
The Ranch	Multiple, TN	RTC, PHP	18+	M/F
Renfrew Center	Charlotte, NC	PHP, IOP	all ages	M/F
Renfrew Center	Coconut Creek, FL	RTC, PHP, IOP	all ages	M/F
Tapestry	Brevard, NC	RTC, PHP	18+	F
Transcend	Matthews, NC	PHP, IOP	10+	M/F

Note: All facility-based services require prior authorization by CBHA

FACTS ABOUT EATING DISORDERS

National surveys estimate that 20 million women and 10 million men in America will have an eating disorder at some point in their lives.

- 0.9% of women and 0.3% of men had anorexia during their life
- 1.5% of women and 0.5% of men had bulimia during their life

- 3.5% of women and 2.0% of men had binge eating disorder during their life

When another group of researchers followed a group of adolescent girls for eight years, beginning at age 12, they found even higher rates of eating disorders:

- 5.2% of the girls met criteria for DSM-5 anorexia, bulimia, or binge eating disorder.
- 13.2% of the girls had suffered from a DSM-5 eating disorder by age 20.

(Nationaleatingdisorders.org)

CBHA NETWORK SUBSTANCE DEPENDENCE RESIDENTIAL TREATMENT PROGRAMS			
Facility	Location	Age Groups	Gender
ARCA	Winston-Salem, NC	Adult	M/F
Cumberland Heights	Multiple, Tennessee	Ages 13+	M/F
Fellowship Hall	Greensboro, NC	Adult	M/F
Life Center of Galax	Galax, NC	Adult	M/F
Lucinda Treatment Center	Lantana, FL	Adult	M/F
The Ranch	Multiple, Tennessee	Adult	M/F
The Ranch - Mississippi	Brandon, MS	Adult	M/F
The Ranch - Pennsylvania	Wrightsville, PA	Adult	M/F

Note: All facility-based services require prior authorization by CBHA



SUBSTANCE DEPENDENCE: The Opioid Crisis

KNOW THE FACTS

- Heroin-related deaths increased 439% from 1999 to 2014
- As of 2014, heroin-related deaths had more than tripled in five years and quintupled in 10 years.
- Opioids were reported as involved in 28,647 deaths in 2014
- 61% of all US drug overdose deaths involve non-medical use of prescription Opioids



CBHA: 2017 By The Numbers

Just what has the CBHA team been up to? Here are a few numbers that tell our story for 2017:

- Management of behavioral health benefits and utilization for more than 81,000 employees of self-insured employers located predominantly in North Carolina
- Managed over 1,700 inpatient days of treatment for 300+ members
- Authorized over 1,400 days of partial hospitalization and nearly 1800 days of intensive outpatient treatment
- Processed 45,000+ claims with a consistent processing turnaround time average of 7.1 calendar days. Keep in mind many claims that come to CBHA are repriced

then forwarded to the health plan for payment. Our 7.1 day turnaround is from date we receive claim to date we forward to health plan.

- Fielded nearly 10,000 incoming calls from members, providers, employers, health plan medical management, employee assistance programs, treatment facilities, and many others
- Expanded the provider network to 1,900 outpatient network providers and 45 network facilities

CBHA is a provider-owned managed behavioral health organization dedicated to quality behavioral health care. CBHA strives to ensure enrollees receive quality care, that providers have the resources to provide this care and that the benefit is used effectively and efficiently. Being owned by three not-for-profit medical schools (East Carolina University, University of North Carolina at Chapel Hill, and Wake Forest University) enables CBHA to provide quality services at competitive rates. Our relationship to the academic medical centers is aimed at improving delivery of behavioral health services to the citizens of North Carolina and parts of South Carolina and Virginia through research and education. Ultimately, our motto is “do the right thing for the right reason”.

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