

Here's What's Happening...

TEXAS PANHANDLE CENTERS

901 WALLACE BLVD. AMARILLO, TEXAS www.texaspanhandlecenters.org

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OfBR

Mental Health Awareness Event

In observance of Mental Health Awareness Month, TPC hosted a MH Awareness Event on Friday, May 14th. Featured was a virtual event that included the showing of the *Speaking Grief Documentary* followed by a panel discussion aimed at creating a more grief-aware society by validating the experience of grievers and helping guide those who support them.

The event included food trucks, vendors, music and resources on mental health. Thank you to everyone that participated in the event!















Getting Paid as a CCBHC

Submitted by: Donald Newsome, Quality Management & Compliance Director Excerpts from the National Council for Behavioral Health

WHAT IS A PROSPECTIVE PAYMENT SYSTEM (PPS)?

PPS is essentially an average payment based on the actual costs a clinic incurs during the course of a year. In broad terms, here's how it works:



- Through a cost report, clinics collect information on ALL costs incurred by the clinic for providing services to ALL patients. (Note that only allowable costs are included; for example, the cost report for a Medicaid PPS does not include the costs of providing residential treatment in facilities of more than 16 beds because those costs are unallowable in Medicaid.)
- The total costs of providing care (the numerator) are then divided by the total number of designated encounters during a year (the denominator) to arrive at a per-encounter payment rate.
- Each time a designated encounter occurs, the clinic receives a payment. The payment is the same regardless of the intensity of services the patient receives.

How does a PPS work for a CCBHC?

State Option # 1: PPS-1 is administratively less complex than PPS-2. Here's how it works:

- The CCBHC compiles a cost report including all allowable direct and indirect costs of providing CCBHC services to all patients. Note: the cost report may include anticipated costs of providing CCBHC services that the clinic does not already provide.
- The CCBHC calculates the number of daily encounters, including all patients who receive care at the clinic. An encounter could include an in-person visit at a clinic, a meeting with a case manager in a patient's home, a visit that takes place via telehealth, or other types of encounters. CCBHCs should work with their states to understand each state's approach to defining an encounter and its impact on the CCBHC rate.
- The CCBHC divides the total costs of care (the numerator) by the total number of daily encounters (the denominator) to calculate the per-encounter visit.

State Option # 2: PPS-2 is a monthly rate that is paid to clinics only in a given month when a patient actually receives services from the clinic. In this way, it is different from a per-member-per-month capitation rate used in other payment structures. PPS-2 is administratively more complex than PPS-1. Here's how it works:

- The CCBHC calculates the number of "unduplicated monthly encounters" for patients in each special group and the general group. Each patient is counted only once per month, even if they received services on more than one day in the month.
- Each month a patient has one or more encounters with the clinic, the clinic may draw down the

(Continued on page 3)

PPS rate associated with that patient (e.g. his/her particular population rate). The rate is the same within each population regardless of intensity of services. Clinics do not receive a payment in a month when that patient does not receive services.



How can a clinic finance CCBHC Activities for all patients if only Medicaid will pay the PPS Rate?

CCBHCs are a true safety-net provider in that they are required to serve all patients regardless of their ability to pay or place of residence. Potential CCBHCs will have to carefully examine their current and anticipated payer mix to evaluate whether becoming a CCBHC is financially viable for them. CCBHCs should also make every effort possible to enroll eligible uninsured patients into Medicaid.

How does a CCBHC get paid for patients who are insured by private insurance?

CCBHCs are required to offer the full CCBHC service array to all patients, regardless of place of residence or ability to pay. CCBHCs should bill third-party payers for covered services; however, some payers may not cover all CCBHC services. In this case, a CCBHC is still required to provide the non-covered services to privately insured patients. The CCBHC may treat patients as if they were uninsured for any non-covered services; that is, by charging them for those services based on a sliding fee scale.

Only Medicaid will pay the PPS rate. Medicare and other payors will continue to reimburse clinics as they have always done.

Why does a CCBHC have to report cost for all patients if they can only get paid for Medicaid patients?

The PPS rate is intended to be reflective of the sum total of a clinic's costs, many of which are not easily segregated by patients' coverage sources.

Advantages of a PPS system

Each PPS system is based on clinics' anticipated cost of providing CCBHC services and has the potential to more accurately reflect the real costs of care—but only if implemented and calculated correctly. Through a PPS, clinics have the opportunity to make new investments and establish new capacity where none existed before—for example, by purchasing an electronic health record, by raising staff salaries, by hiring new staff, or by assigning staff to care coordination activities that had not previously been reimbursable.

Importance of getting the rate right during the planning year

Under a PPS, you'll have access to a payment rate that reflects your anticipated costs and is inclusive of many activities that have not been reimbursable in the past, such as care coordination or services delivered outside the four walls of your clinic. But the new reimbursement rates are based on estimated costs—meaning that CCBHCs that do a good job of calculating their costs during the planning year will thrive.

SPIRITUAL WELLNESS

Submitted by: Janice Stoner, Director ASCI Amarillo

As part of the eight dimensions of wellness, this month the Wellness Committee is highlighting spiritual wellness.

One of the "8 Dimensions of Wellness" is Spiritual Wellness. When one thinks of the word spiritual they may typically think of religion. However, spiritual means more than that. A definition of spiritual is, "relating to or affecting the human spirit or soul as opposed to material or physical things." Ones beliefs, values and goals have an impact on their physical and mental health. This includes both negative and positive thoughts and actions. Spiritual Wellness is a very personal and important part of wellness.

Have you ever felt that you are running on empty and just getting by? After you go on a walk, speak with an uplifting friend, exercise or listen to something positive you suddenly find yourself feeling more at peace and more fulfilled than you did previously? How about feeling down then talking to someone that is negative or allows you to focus on the negatives around instead of finding the positives? After these conversations do you find yourself feeling more fatigued or emptier than you started off? That is because both negatives and positives affect your spiritual wellness.

A study conducted at the University of Missouri included nearly 200 participants to find out how their spiritual beliefs affected their health outcomes. "The researchers divided the individuals into two groups: a negative spirituality group that consisted of those who reported feeling abandoned or punished by a higher power, and a no negative spirituality group that consisted of people who didn't feel abandoned or punished by a higher power. Participants answered questions about their emotional and physical health, including physical pain. Those in the negative spirituality group reported significantly worse pain as well as worse physical and mental health while those with positive spirituality reported

better mental health. However, even if individuals reported positive spiritual beliefs, having any degree of negative spiritual belief contributed to poorer health outcomes, the researchers found". (ScienceDaily.com)

The following article from Kansas University gives good information on improving spiritual wellness.

https://wellness.ku.edu/seven-ways-improveyour-spiritual-health

SEVEN WAYS TO IMPROVE YOUR SPIRITUAL HEALTH

The spiritual element of wellness can be the most personal piece of the puzzle when trying to place all eight dimensions of wellness together. Generally, people like to live a life with meaning and purpose. When these goals are met, it puts harmony in one's life, and the others they surround themselves with.

So, what can you do to improve your spiritual wellness? It's best to figure out what techniques work for you. Since spiritual wellness involves one's values, beliefs, and purpose, it can be achieved in several ways—both physically and mentally.

1. Explore your spiritual core. By exploring your spiritual core, you are simply asking yourself questions about the person you are and your meaning. Ask yourself: Who am I? What is my purpose? What do I value most? These questions will lead you down a road where you will think more in-depth about yourself and allow you to notice things about yourself that will help you achieve fulfillment.

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2. Look for deeper meanings. Looking for deeper meanings in your life and analyzing occurring patterns will help you see that you have control over your destiny. Being aware of this can help you achieve a happy and healthy life.

3. Get it out. Expressing what is on your mind will help you to maintain a focused mind. After a long day or a significant event, you may feel confused and not be able to make sense of your feelings. By writing down your thoughts, you may be able to think clearer and move forward.

- **4. Try yoga.** Yoga is a physical technique that can help improve your spiritual wellness by reducing emotional and physical strains on your mind and body. Yoga is taught at all different levels and can help lower stress, boost the immune system, and lower blood pressure as well as reduce anxiety, depression, fatigue, and insomnia.
- **5. Travel.** It's true! Taking time for yourself to travel to a comforting place or somewhere new can do wonders for your mind. When you are at a place where your mind can keep out distractions and help you reflect and rest, you will have

a better connection with yourself. This allows you to weed out stressors and set your mind on the right path for overall wellness. Some activities to take part in when on a trip can be exercis-

> ing, speaking with a counselor or advisor, meditation, or taking a temporary vow of silence.

6. Think positively. Once you start viewing things in your life in a positive manner, you will find yourself thinking differently and refocusing your mind to a happy, healthy place. When

you eliminate negativity and re-frame how you think of certain things and situations, you'll notice yourself being more relaxed.

7. Take time to meditate. While managing your time and daily tasks can be hard, it is crucial to devote time to connecting with yourself. Whether in the morning when you wake up, during your lunch break, or before you go to sleep, take five to 10 minutes to meditate each day. Fitting mediation and relaxation into your lifestyle will free your mind and foster a stronger relationship with your spiritual wellness.

Source:

https://wellness.ku.edu/seven-ways-improveyour-spiritual-health



The following employee was recognized through the Performance Enhancement Program for one or more of the following: Core Competencies, Safety, Critical Thinking, Communication, Client Rights, Continuous Quality Improvement, Professional Behavior, Customer Service:

Celia Herrera, Autism Program

Reminder to supervisors: If you would like employees recognized through PEP in the newsletter, submit the PEP (or a copy) to the respective executive manager for approval.

White Hat Award

The IDD Service Coordination department would like to award, **Cindy Pulse**, **Benefits Coordinator**, with this month's White Hat Award. Cindy helps individuals maintain a good standing with Medicaid and Social Security Benefits. She is always willing to help individuals, families, and Service Coordinators with any questions or concerns they may have with navigating Medicaid and Social Security. This helps to ensure that the individuals we serve have continuous benefits and services. Thank you Cindy for all that you do!

Cecilia Gallegos for IDD Service Coordination

Meet Katrisa Britton, RN, PMHNP-BC



Katrisa is a board certified, psychiatric mental health nurse practitioner, that has been providing services at the Polk Street Behavioral Health Clinic in Amarillo on Friday mornings for the past year.

Starting July 1, 2021, Katrisa will add additional mornings in the clinic. We are very excited that she will be extending her hours to provide additional prescriber services.

Katrisa is a great team member and we are appreciative of her knowledge, dedication and experience.



Welcome back to Compliance Corner. In Compliance Corner we will address a question that was received internally for the purpose of education. (All personal identifying information has been removed to protect the identity of the employee and client).

IF YOU SEE SOMETHING, SAY SOMETHING...

Employees are the "eyes and ears" of the organization to detect any violation of our Compliance Program. You are required to immediately report anything that you encounter at TPC which you believe may be unethical, illegal, or fraudulent to:

Your supervisor or

Donald Newsome, Director, Quality Management & Compliance, (Privacy Officer)

Phone: (806) 351-3284

Email: donald.newsome@txpan.org

The phone line has a confidential voicemail for reporting possible compliance issues.

Here is the compliance question of the month:

Question:

I was told that I had to put "verbal consent due to COVID-19" on the signature line of the Recovery Plans, so I did that, then I was told, I still had to put the client's name. Is this correct?

Answer:

Yes, that is correct. Writing/typing "verbal consent due to COVID-19" doesn't preclude putting the client's name on the signature line. The individual's name should appear on the signature line of any and all documents requiring an individual's signature.

If you have a question or scenario that you would like to be considered for inclusion in Compliance Corner, email the information to Compliance.Corner@txpan.org or send your question via interoffice mail to the attention of Donald Newsome.





Quality Management would like to recognize those case managers/ service coordinators who score 95 or higher on the bi-monthly compliance reviews. All staff who score 95 or higher will have their name put in a drawing. After the two monthly reviews are completed a name will be drawn and the winner will receive a \$25 gift card. A special thank you to the **TICTOC Committee** who made it possible for us to offer this recognition.

The winner for last month was **DOUGLAS ZETOONEY, IDD SERVICE GOORDINATION**. Congratulations, Douglas! Thank you for your hard work! Please reach out to Gaynelle Williams for your gift card.





In observance of Independence Day, TPC offices will be closed Monday, July 5th (observed).

Wishing everyone a safe and happy 4th of July!

Time to celebrate Dad!

Father's Day is coming soon—on the third Sunday in June, Americans (as well as 84 other countries) celebrate dads and all they do for their children and their family.

According to the University of Texas, children with engaged fathers are dramatically more likely to do better in school, attend college and live healthier, more productive lives. Research consistently shows that good dads make a big difference. On fathers day this year, recognize the fathers and father figures in your life to let them know what they mean to you.

Happy Father's Day!

Points to Ponder

Yvonne Mercer, Rights Protection Officer

Abuse: Part I: Verbal

Typically, when we talk about abuse, the first two types of abuse that usually come to mind are physical and sexual abuse. We know that if we are made aware of an incident of this type, we are to report it. Did you know that there are five different types of abuse?



The first two are physical and sexual abuse. The other types of abuse often go unnoticed and under-reported. Sometimes we are not sure if it is abuse, and other different types of abuse can be just as devastating. One other type is verbal abuse. Verbal abuse is defined as "any act to verbally degrade, vilify, or threaten a person." To tell one of our individuals that they are stupid, fat, or ugly would be considered verbal abuse.

To say such things would be degrading to an individual. To make a statement to one person such as, "Lisa is so mean, and you know it's her fault that Nicole moved out of this group home. I liked Nicole, and now I really hate Lisa." This type of statement would also be considered verbal abuse. This form of abuse is to vilify one individual to other.

Another scenario to consider, for example, if Chris is being rude and yelling at you and you tell him, "shut up before I come over there and pull your hair." You didn't go and pull Chris's hair, but you said you would. This would be considered a threat. We have probably heard the saying, "sticks and stones can break my bones, but words will never hurt me." Although we would like to believe that statement, the truth is, words do hurt. Words can leave lasting effects that are not visible and cannot be measured. As a reminder, if you witness this or any abuse, it is your duty to:

1) remove the individual from the situation and 2) call and report immediately. Don't doubt yourself and what you have witnessed.

If you have any questions or concerns I can be reached at 351-3400 or email me at Yvonne.mercer@txpan.org

Articles or suggestions for this publication may be submitted by the 1st of each month to:

Joyce Lopez-Enevoldsen ● 901 Wallace Blvd., ● Amarillo, Texas 79106 Phone: (806) 351-3308 Fax: (806) 351-3345 Email: joyce.lopez@txpan.org

PROJECTS AROUND THE CENTER

Terry G. Zimmerman, Director of Support Services

s many of you are aware, we are working on several major projects throughout our facilities. Currently, we are in the process of renovating the parking lot at the Wallace Campus. This project will be completed in 7 – 8 different phases. As of now, we have completed phase 4, so we are about half way finished. We also installed new electrical panel and ran new wiring in the west wing of Building 501 of the Wallace Campus. The other panel and wiring was the original from when this building was constructed and continued to fail. A new floor was also put down in the lobby of 501.

Other projects that we are in the works or planning phase include:

The remodel of the Human Resources Office Suite in Building 501 to make it a more open environment.

We are in the process of modernizing the elevator in the Polk Street building. We are also replacing the roof top chiller and remodeling the Polk Street down stairs conference room along with the Taylor Street foyer and reception area.

In Building 504 of the Wallace Campus, we are in the process of replacing 9 of their 11 HVAC systems and will be replacing a 20-ton air conditioning unit at ASCI.

Due to the snowstorm we had last fall, the new gutters were damaged from snow sliding off of ASCI's new roof. We are going to be replacing the gutters and also fabricating a snow fence on the rooftop to help prevent the snow from sliding off in large chunks. This is for safety as well



as to prevent damage to the gutters again.

Additionally, we plan to demolish a house that is beyond repair on property owned by TPC in Pampa by our West Day Hab. On the same piece of property, we plan to renovate the tennis court to include a basketball court and a handicapped accessible playground. It is also in the works to renovate the West Day Hab program to add an additional room so the individuals who attend will have more room for activities.

Lastly, we plan to renovate the kitchen nook at Building 503 and to create a new breakroom for employees.

HHSC Launches Online Behavioral Health Awareness Training

Free eLearning Empowers Public, Tackles Stigma

The Texas Health and Human Services Commission is launching a new behavioral health awareness eLearning series to empower families with more knowledge and understanding of behavioral health conditions that impact more than 3 million Texans each year.

"Understanding is powerful, and Texas HHSC saw a need for people who want to understand their own condition or a loved one's condition to learn more about behavioral health and share what they learn with others," said Sonja Gaines, HHS deputy executive commissioner for Intellectual and Developmental Disability and Behavioral Health Services. "When people learn more about behavioral health, they can overcome challenges and the stigma associated with mental illness to seek treatment and take that first step toward creating a better life for themselves and others."

HHSC contracted with UT Health Science Center at San Antonio to develop and create an eLearning series, which is free to the public at https://mentalhealthtx.org/resources/.

The series' intended audience is not only those dealing directly with behavioral health conditions, but also their friends, family members, and advocates. There are 10 interactive learning modules and each module takes no more than

30 minutes to complete and is completely anonymous. The series empowers and prepares communities to better understand signs and symptoms of mental illness, decreases stigma, and promotes emotional, psychological, and social well-being for Texans.

"Many behavioral health conditions are common but still misunderstood. This eLearning series sheds light on these conditions," said Dr. Natalie Maples, assistant professor at The University of Texas Health Science Center at San Antonio. "We hope that these modules help to give someone in need of direction a way forward, either as the recipient of help and support or as the supporter."

Topics covered in the series include anxiety disorders, depression, substance use disorders, mood disorders, trauma and post-traumatic stress disorder, aging and behavioral health, psychosis and schizophrenia, serious emotional disturbances in children, and suicide prevention.

The project was funded by the Mental Health Block administered by Texas HHSC.

For more information on accessing local mental health and substance use disorder services and resources, visit mentalhealthtx.org.



Welcome these New Employees...

Kimberly Grooms Financial Services

Connor Worrell Maintenance

Raul Aguilar Jr. IDD Service Coordination

Kathy Carpenter-

Whitfield BH Med Clinic Adult

Tosha Foster IDD Nursing
Antonina Jordt BH Diversion

Yvanna Uy BH Intake, Screening & Crisis

Erica Williams ASCI Amarillo
Erin "Paige" Clements Crisis Redesign

Kammie Guest Children's BH Dumas

Cody Key ACT Team

Staci Pennartz PESC Continuity of Care

Jourdan Riley ASCI Amarillo



"Thousands of craft beers and I still can't find one with a smooth, kibble finish."



"Grandpa, what was it like living off the grid for most of your life?"

Jessica Thomas, Clerk, ASCI, answered last month's questions correctly and was randomly selected to win a \$25 gift card.

To claim your card, contact Joyce Lopez-Enevoldsen at 806.351.3308 or email: joyce.lopez@txpan.org.



Scenes from walk out on work June 1st





















Ten teams signed up to participate!





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800.873.7138

www.MINESandAssociates.com

Answer's to last months questions:

1) Emotional Wellness 2) Friday, May 14 3) 70,630

Answer the questions correctly and your name will be entered in a random drawing to be eligible to win a \$25 gift card.



ı.	A PPS is	

2. Spiritual wellness involves one's _______, and ______.

3. ______ is defined as "any act to verbally degrade, vilify, or threaten a person.

Submit your answers to joyce.lopez@txpan.org. Deadline for responses is the 5th of the following month. You must type "Monthly Drawing" in the email subject line to be eligible. For those that do not have a computer, entries may be submitted via interoffice mail. The same requirements apply for hard copy submissions.