

HealthProCHOICES

A newsletter for health professionals participating in the Health Professionals' Services Program (HPSP)

February 2011

Answers to Your Questions

The purpose of the HPSP newsletter is to improve communication between the licensee and the HPSP team. This month's newsletter provides answers to some of the most frequently asked questions and comments from licensees. For more answers, please go to: rbhhealthpro.com and click on *Resources*.

What is Consent 1.0, which I was asked to sign?

The Consent to Release, Use and Exchange Information 1.0 went through several versions because we wanted the release to be as transparent to you as possible. This version has been written in a way so that you can clearly see what information is being released and to whom. HPSP is committed to sharing no more information than necessary when speaking to outside entities. The form allows HPSP to share information with the entities on the release for the purpose of monitoring and coordinating compliance with the HPSP program. This release protects you as you need to name the specific individuals to whom we can communicate. Other releases are still needed for HPSP to communicate with treatment providers. This consent must be completed by all licensees and has been approved by the Oregon Department of Justice and the Department of Human Services to ensure the form meets federal guidelines on confidentiality.

What happens if I cannot return documents within the given timeframe?

The required deadlines are not intended to scare or intimidate licensees. In many cases, the deadlines are required by HPSP's agreement with DHS. If you have a problem getting the forms back to HPSP within the set deadline, please call your agreement monitor and share why there is a problem. The goal is to get the documents back within a reasonable given timeframe.

Please fix the echo-sign forms, also known as the electronic signature forms.

Electronically signed documents are a safe, convenient, and expedient way to sign required paperwork. The problems with the electronic forms have been corrected and should work properly. This means the forms will allow signatures where required and allow the licensee to write *NA* for those areas that do not apply. If you are having a problem with the electronic signatures, please contact HPSP, and we can walk you through the process. You can also print, sign, and mail the form to HPSP.

Who can I speak with when my agreement monitor is on vacation?

If you are unable to speak with your agreement monitor, other team members are available to assist you. You may request to speak with another agreement monitor or a HPSP technician for help with administrative issues such as: needing more chain of custody forms; requesting a new collection site; providing a new home address or phone number; or needing compliance forms. You can also email your request or provide updated information to: hpsp@reliantbh.com

What if my collection site is closed on Saturday?

Licensees are responsible for contacting their collection sites to ensure they are open on Saturday. If you discover that a site is no longer providing Saturday hours, please contact HPSP either with a call or an email, and a new Saturday site will be provided to you. HPSP also monitors collection sites, and when we are aware that a collection has stopped providing Saturday hours, the licensee is notified and provided with a new Saturday collection site. Please be sure to show your wallet card to the collector whenever you test. If you do not have a wallet card, please send an email to hpsp@reliantbh.com or call **1-888-802-2843**, and we will send one to you immediately.

How much can HPSP advocate for me with insurance companies and credentialing committees?

HPSP can write compliance letters for licensees to any entity, such as an insurance company or credentialing committee. The agreement monitor can stress the level of ongoing compliance of the licensee as evidence of dedication to recovery activities and stability in the workplace. HPSP can provide proof of the licensee's commitment to compliance to program requirements.

Over the Counter Products that Contain Alcohol

Many over the counter products contain alcohol. Due to the nature of drug testing and the ETG test in particular, licensees should not use these products to avoid any exposure to alcohol. *(For more information regarding the Policy on ETG testing, please refer to the Policies tab on the HPSP website: rbhhealthpro.com)*

To help licensees avoid products that contain alcohol, HPSP, with assistance from Serenity Lane, has put together a list of over the counter products that contain alcohol. This is not a definitive list, and it is the responsibility of the licensee to review the ingredients in the products they use. To view the list, click on the Resources tab on the HPSP website: rbhhealthpro.com

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HPSP Appreciates Your Feedback

We are pleased to provide you with the April HPSP newsletter. The program is now in its tenth month of operation. We have reviewed the results of the second quarter satisfaction surveys, and items of concern have been prioritized for resolution. There are some issues that licensees have brought forward that we cannot do anything about as we are compelled by HB2345 and Oregon Administrative Rules of the Oregon

Health Authority (formerly DHS) and the participating Boards on how the program must operate. However, there are areas where we can impact, such as the collection sites and the time it takes to return calls, and we continually are making improvements. We reviewed staffing ratios and currently are in process of hiring an additional agreement monitor. The purpose of these newsletters is to provide you with up-to-date



Your satisfaction matters to HPSP.

information that will support you in maintaining compliance with HPSP. Program information and updates are also located on our website: www.rbhhealthpro.com

Getting to Know the HPSP Staff



Gary Barnes: Hiking at Royal Lake in Oregon

Beginning with this issue, we would like to highlight key staff from the HPSP team, starting with the program clinical manager, Gary Barnes, MSW, LCSW, CEAP.

Gary is an experienced, licensed social worker knowledgeable in both mental health and substance abuse, having worked in the field for over 25 years.

He is an experienced supervisor and has had extensive hands-on experience in case management and monitoring.

Gary is located in our Portland and Corvallis offices and is the first contact if you have a problem or concern about HPSP. You can reach Gary through email: garyb@reliantbh.com or call HPSP at 888-802-2843.

Satisfaction Surveys and Newsletter Feedback

We are able to make changes in the quarterly satisfaction survey, which will be sent out for the first quarter of year 2 in October 2011. We would like your feedback on the survey questions. Please let us know what questions you would like to see on the survey. You can give this information to your agreement monitor or send an email to HPSP@reliantbh.com with **survey feedback** in the subject field.

We are also are looking for newsletter feedback.

Please let us know what information would be helpful for you to receive. Give the feedback to your agreement monitor during your regularly scheduled call or send an email to: hpsp@reliantbh.com with **newsletter feedback** in the subject field.



HPSP: 888.802.2843
www.RBHHealthPro.com

Frequently Asked Questions

Question: I have failed to call the interactive voice response system four times and received a report of non compliance. What will happen if I fail to call in a fifth time?

Answer: It is important to set up a reminder so you do not fail to call in on a daily basis. If you couple your call in with another task that you do on a daily basis, it is easier to remember to make the call. If you continue to fail to call in daily, you will receive additional reports of non compliance.

Question: is there any option to make an appointment at my collection site when I need to test?

Answer: Many of the collection sites offer the option of scheduling an appointment. Call your assigned collection site and see if the site is currently offering this option. Having a scheduled appointment can shorten the time it takes to give a specimen.

Question: I am running low on my

paper chain of custody of forms, how do I order more?

Answer: There are several ways to order additional paper chain of custody forms. You can send an email to HPSP@reliantbh.com or call 888-802-2843. Be sure to call before you do not have any forms left. It can take up to 10 business days if additional forms need to be ordered from Medtox.

Question: What happens if I fail to "call in" on a daily basis?

Answer: In accordance with the Daily Call In Policy, a licensee will be reported non-compliant to Acumentra, and Acumentra will report the non-compliance to the appropriate board. This includes calling in on Sundays. Remember to write down your confirmation number for proof that you called in. The automated system captures the time of call, messages you listened to, and how long you stayed on the line.

Question: Please clarify what the billing process is?

Answer: Licensees will be billed for toxicology testing within 2 weeks of taking the test. If the test is cancelled due to collection site or laboratory error, you are not charged for the cancelled test but must take another test. If you have a question about your statement, email HPSP or call HPSP and inform the customer relations representative that you have question regarding your statement. Please have the date of the charge you are questioning. You can also see your statement on www.rbhhealthpro.com. To login, click on the My Account tab. User login is your email address that you have given HPSP to communicate with you and your password is your 8 digit account number plus your 4 digit pin number. Once you log in, you will be able to see your financial account and print your statement. You are also able to view your testing facilities on line.

Shy Bladder Policy

The HPSP toxicology program is required to follow the Department of Transportation rules as closely as possible. If a licensee goes to a collection site, the specimen submitted must be at least 45 ml. If the licensee cannot provide an adequate specimen, the licensee must stay at the collection site for up to 3 hours and may drink up to 40 ounces of fluid, such as juice or water, and has to provide a 45 ml specimen within the 3-hour period.

If the licensee is not able to provide 45 ml, the licensee must provide a letter from a physician stating a physiological reason for the licensee's inability to provide an adequate specimen. If the licensee is unable to obtain a physician's letter that states a physiological reason for the licensee's inability to provide an adequate specimen, the licensee will be

reported non-compliant for failure to test. If the licensee leaves the collection site for any reason without providing an adequate specimen prior to the 3 hour time limit, the licensee will be reported non compliant for failure to test. There are no exceptions to this requirement.

Website Update of the Month
If you are interested in learning more about substance abuse or need to obtain CME credits for licensure, click on the new, Educational Resources tab at www.rbhhealthpro.com to see what is currently available in the community.

Health Professionals' Services Program
818 SW 3rd Ave #239
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Workplace Monitoring Reports

HPSP has received a good deal of feedback from licensees and workplace monitors regarding the monthly workplace monitoring form and how the questions were more of a performance evaluation than related to evaluating the ability of the licensee to practice safely in the workplace.

In response to the feedback, this monthly report has been totally revised and now is entitled Health Professionals' Services Program Workplace Monitor Safe Practice Report.

The updated form is available on the homepage of the HPSP website at rbhhealthpro.com. The form is due monthly and needs to be completed by your workplace supervisor. Please print the form and take it to your workplace monitor. HPSP will also email the form to supervisors, but since this is a monthly requirement in your monitoring agreement, we thought you would want control of getting the new form to your supervisor.

If you cannot access the website, please notify us at 888-802-2843, and we can mail you a copy.

The following questions make up the content of the revised form:

- **Is physical performance within the acceptable limits for workplace?** (Physical performance includes balance, manual coordination/tremor, speech patterns, and gait/stance.)
- **Is cognitive performance within the acceptable limits for workplace?** (Cognitive performance includes mental alertness/concentration, memory, and accuracy of documentation.)
- **Does communication performance meet workplace standards?** (Communication performance includes emotional tone with co-workers and patients, response to feedback on performance, and maintenance of clear professional boundaries.)
- **Does attendance performance meet workplace standards?** (Attendance standards include change in pattern and unexplained absences.)
- **Does management of worksite medications, if applicable, meet worksite standards?** (Worksite medication management standards include medication administration/documentation consistency, adherence to narcotic disposal policy, and authorized access to controlled medication.)

The Role of HPSP in Your Life

HPSP receives comments, questions, and complaints from licensees about the rules and processes of the program. We want to take a moment to address these concerns directly and clarify the role of HPSP for licensees.

First, HPSP doesn't make the rules. Instead, just like you, we are required to follow the administrative rules of the Oregon Health Authority (OHA) and the administrative boards, HB 2345 codified as ORS676.190, and the policies determined by the Advisory Committee which is made up of the OHA and the Dental, Medical, Nursing, and Pharmacy Boards. In other words, HPSP and the licensees must both follow very specific mandates.

While HPSP doesn't write the basic

requirements of the program, we do oversee, or monitor, your path back to your profession. HPSP helps to guide you through this monitoring process to maintain or regain your professional license.

Importantly, HPSP understands that this is not an easy process for any of the licensees. However, we also know that this is the process that is required for you to continue to practice in your profession. That's why we are so dedicated to making sure you do stay on track. The more carefully we monitor the adherence and progress of all of the licensees enrolled in HPSP, the more likely it is that licensees will successfully return to or maintain their chosen profession.

HPSP encourages licensees to continue asking questions and making suggestions to improve the program. RBH takes your feedback very seriously and will work to make improvements to the program whenever possible, including passing along suggestions to the various licensing boards and relevant government agencies. We just wanted you to understand that not all of your ideas or complaints can be resolved by HPSP. Be sure to read next month's newsletter when we report on the satisfaction surveys submitted for the third quarter of the program.

Additional Monitoring Requirements

You all are aware that HPSP had a hectic start, enrolling over 365 licensees representing four different licensing boards. At that time, the emphasis was on establishing the toxicology testing, setting up the workplace contracts, reviewing licensees' current health conditions, and other key tasks of starting a new program.

Now that the program is up and running, two requirements in the statute must be addressed and implemented, and HPSP wants licensees to be aware of these additional statute requirements. These requirements are part of RBH's contract with the Oregon Health Authority, and we are required to institute them at this time.

Please read the following descriptions of both requirements carefully. These are typical requirements in a monitoring program.

Weekly Call-in Requirement

You will be receiving a letter from HPSP explaining the change in the call-in requirement as not all of you are calling in weekly at this time.

Effective mid-June, all licensees are required to call HPSP on a weekly basis. House Bill 2345 requires that licensees report at least weekly to

HPSP regarding compliance with the monitoring agreement.

We have worked on how to make the call-in process quick and easy for you while still meeting the requirements of the statute. The call should take no more than 10 minutes. During the weekly call, you and your weekly call-in facilitator will review your monitoring requirements.

If you are having a problem meeting requirements or any other difficulties, your agreement monitor will be immediately informed and will get in contact with you.

Please note that voice mail will not count toward your weekly call unless accepted by your call-in facilitator due to a special circumstance. You will be reported non-compliant at the time of your fourth missed call per year. Unlike toxicology testing, there is no exemption policy. At the time of your fourth missed call within a 12-month period, you will be reported as non-compliant.

Please note: physicians who attend a weekly monitoring group do not have to call in weekly as they are attending a monitoring group, which is considered a weekly check regarding compliance to monitoring requirements.

We hope that you will work with us and not permit this additional requirement to become an issue since we have no alternative but to follow the statute's requirements.

Monitoring Compliance to Addendum Requirements

This is a reminder. Licensees need to send in documentation of attendance to their monitoring agreement addendum requirements. The change is that licensees who do not submit documentation to their requirements when there is a pattern of missed documentation and/or missed meetings will be reported non-compliant.

Remember the definition of a week for self-help meetings is Monday through Sunday. Documentation for self help needs to be received by the Wednesday of the following week. The expectation for counseling sessions, physical examinations, medication management and other requirements is that documentation will be sent within 3 days of the appointment. We will be instituting a warning letter system prior to reporting a licensee non-compliant unless there are extenuating circumstances that necessitate immediate report of non-compliance. We will provide more details in the June newsletter.

Getting to Know the HPSP Staff

Rebecca Sinclair, MS, CEAP, has a masters in counseling psychology and national certification as an employee assistant professional. Rebecca (pictured below) has been a mental health and substance abuse counselor for 24 years.



Rebecca has extensive experience in monitoring and case management. She has been involved with the HPSP program since its beginning in July 2010. She is primarily responsible for monitoring Board of Nursing licensees.

Rebecca can be reached at 888-802-2843 or emailed at: hpsp@reliantbh.com

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What's New at HPSP?

As a result of the comments we received on the third-quarter satisfaction survey regarding the need for quicker responses to licensees' calls and emails, we have recently hired a new agreement monitor, Ms. Karen Veteran, MA, LMFT who joined the staff on June 6.

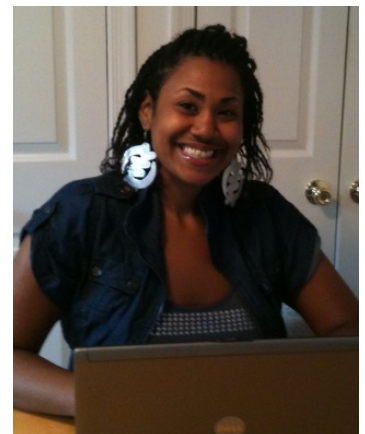
The purpose of increasing the number of monitors is to be more responsive to emails and calls from licensees. Our goal is to return emails and calls within one business day. Please remember if you need immediate service and are unable to reach your agreement monitor, call 888-802-2843 and state that you need to speak with an agreement monitor. You can also ask to speak with Gary Barnes or Dale Kaplan if you are not able to reach your agreement monitor.

Getting to Know HPSP Staff:

Christa Lee, MSW, LGSW (Maryland) is the Team Lead for the HPSP program. Ms. Lee is a graduate from the University of Maryland Graduate School of Social Work, where she concentrated in both Employee Assistance Programs and Substance Abuse. Christa has extensive experience in working with employees in both employee assistance and monitoring programs. She worked several years monitoring employees of a large pharmacy chain prior to joining RBH. Christa has worked in a variety of capacities with individuals diagnosed with both mental health and substance abuse disorders in assisting them to become re-integrated into society by re-gaining their independence.

Christa currently volunteers in a transitional living program for women who have been abused, suffer from chemical addictions, and/or are being reintegrated into society after being discharged from prison and/or rehabilitation programs.

The photo (right) shows Christa Lee on the job.



Satisfaction Survey Results: 3rd Quarter

The third quarter satisfaction survey covering the period from January 1 through March 31, 2011, was sent to 357 licensees, offering the choice of responding to the survey through the Internet or completing the paper survey that was enclosed with a pre-stamped return envelope. Eighty surveys were received which gave a 22% response rate.

Professional breakdown of respondents includes: 32 licensed by the Medical Board, 41 licensed by the Nursing Board, one licensed by the Dental Board, and six licensed by the Pharmacy Board. This third quarter showed an overall improvement in licensee ratings.

The two areas that were not rated highly last quarter showed improvement this quarter. The response to "Questions and/or Concerns were responded to Promptly" showed a 15% increase over last quarter's

responses, and most importantly the response to "Overall ranking of Services" showed an increase in the rating of Excellent, Above Average, and Average for a total of 59% or 47 respondents out of a total of 80. This is compared to the 2nd quarter's positive response rate of 46% or 39 respondents out of a total of 86.

There was a slight decrease in satisfaction regarding the website and the ease of the phone call-in system. It is believed that the problem with the call in system has to do with the difficulty that Sprint has not been recognizing the 888 exchange.

Of the 36 comments this quarter:

14% were compliments or positive comments, and the remainder were complaints or were negative.

The negative comments for this quarter still showed concern around the need for increased ease of communication. The next largest category of negative responses concerned the program requirements. There were several positive comments about HPSP staff.

There is one more quarterly satisfaction survey for this year which will be sent out in July, 2011. We do have the opportunity to change the questions on the survey as we enter year 2 of the program. Please let us know what you feel we should be asking. You can send us an email at hpssp@reliantbh.com or call 888-802-2843 or tell your agreement monitor.

Balancing Your Two Lives: Home and Work

Among the essential ingredients of a balanced life are meaningful activity, physical and mental health, satisfying relationships, and peace of mind. To achieve balance, you must successfully juggle the demands of your work, personal life, family and relationships.

"If you're spending too much time working, and your personal time disappears, it's likely you'll become exhausted, stressed and irritable," says Bee Epstein-Shepherd, Ph.D., a psychologist in Carmel, Calif. "Each of us has an average of 112 waking hours a week in which to satisfy all of our responsibilities. The more successful we are at completing our work and taking time for ourselves on a regular basis, the more often we'll feel satisfied and in control of our lives."

Professional Balance

Dr. Epstein-Shepherd says you should do three things every morning to start your workday with a sense of balance and purpose:

- Eat breakfast.
- List your daily goals.
- Determine your top priorities to plan your day.

"When setting your goals for the day, ask yourself, 'If only one thing could be done today, which activity would it be?' The answer should be your top priority," she says. "To build your list, ask yourself, 'If only one more thing could be done today, what should it be?' It's best to prioritize your list according to importance, not how easily a task can be completed."

You may find you feel out of balance when your workspace is disorganized. The following system can make it easier for you to find things you

need when you need them:

- Arrange a specific place for files and tools and put them back after you use them.
- Don't use your desktop for storage. It should hold only those items you use every day.
- Create a workable filing system to avoid paperwork pileup.
- Use color coding. It makes any item easier to find.
- Don't save everything you think you might need someday. Clutter makes it more difficult to find what you really need.

During the last 10 minutes of every workday, make a list of what you have accomplished. "Give yourself credit for what you get done each day, and you'll go home with a sense of completion instead of frustration about what you didn't get done," Dr. Epstein-Shepherd says. Then, outline what you need to tackle tomorrow.

Finally, make a list of work issues that you might be taking home. "Then tear up the list and throw it away to rid your mind of unfinished business and worries," she says. "Doing so will help you make a clean transition to your personal and home life."

Personal Balance

The greatest challenge for many of us is to make time for ourselves despite the demands of work, family, and relationships. "But it's imperative you make time for rest and relaxation," Dr. Epstein-Shepherd says.

Begin by setting aside the equivalent of an hour a day in which you do things you want to do. You can schedule that hour before or after



work. Treat these appointments with yourself with as much respect as you would a meeting with a client or supervisor. Studies have found that people who take time for physical and mental rejuvenation accomplish more and are generally happier.

Creative people often get their best ideas while walking, gardening, or taking part in activities not related to work. "People who use their evenings, weekends, and vacations for personal rejuvenation are more energetic and productive at work and play because they're living a life that is in balance," Dr. Epstein-Shepherd says.

Source: Wellness Library Health Ink and Vitality Communications © 2011

Update: Weekly Call In

You will be receiving a letter from HPSP around June 26 explaining changes to the weekly call-in process. All licensees will be required to call in weekly to their facilitator starting the week of July 11, 2011. If you already call your agreement monitor weekly, please continue to do so.

Reminder

If you are part of the toxicology program, please remember to avoid alcohol based hand sanitizers, poppy seed bagels, medications that may contain alcohol. Please check out the website for a more complete list of medications to avoid in order to prevent a non-negative drug test.

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The Weekly Call In

The weekly call between you and your facilitator is presently a mandated requirement of the statute. We encourage licensees to view the weekly call as a positive part of the HPSP experience, offering ongoing communication between you and your weekly call-in facilitator. The call affords you an opportunity to ask questions about HPSP and to provide updated address, phone, credit card, and employment data.

At HPSP, we look forward to speaking with you weekly to support your efforts in meeting your monitoring agreement requirements.

Getting to Know HPSP Staff

Ken Cosey is a Technician I for the Health Professionals' Services Program. He is responsible for setting up new accounts for toxicology testing and is also a weekly call in facilitator. Ken has had extensive customer service experience. He has held positions as varied as hotel management, sales, trainer, and quality call monitoring.

Ken has always had a passion for helping others, as his past employment demonstrates. However, Ken states "my position with HPSP at RBH goes far beyond that. HPSP is poised to positively impact lives, and I believe that if we can do just that, then we should not only feel pleased for the licensee's success, but gratitude for the chance to play a role in that success." Those of you who have spoken with Ken know that he believes in the program.



Ken Cosey on the job.

Management of a Dilute Specimen

As a licensee, you need to understand the HPSP policy on the management of dilute specimens. HPSP strongly recommends avoiding over-hydration before giving a specimen. Below is a summary of the Dilute Specimen Policy. The entire policy can be found on the HPSP website: rbhhealthpro.com. If you do not have access to a computer, please let your weekly call-in facilitator know, and we can send you a copy.

A specimen is defined as dilute if it has a creatinine of less than 20 g/dl and a specific gravity less than 1.003. This definition is based on clinical and forensic toxicology literature and recommendations by the Substance Abuse and Mental Health Services Administration's Drug Testing Advisory Board.

First Dilute Test:

The licensee will be subject to another test within 24 hours of receipt of the test result or the next business day. The licensee is notified of the dilute test result and advised to contact their physician to

discuss how to avoid a dilute test result.

Second Dilute Test:

The specimen is tested at the laboratory to the lowest level of detection to determine if there are addicting substances in the specimen. The cost of this test is \$114. If there is detection of a substance of abuse, the licensee will be reported substantially non-compliant and may be required to have an evaluation by a third party evaluator.

Third Dilute Test:

Within any one year time period, the specimen will be tested to the lowest level of detection, and licensee will be referred for medical evaluation to determine why he or she is producing dilute specimens.

If there is a medical issue causing the dilute results, and if that medical issue cannot reasonably be resolved, this will be noted, and further dilute specimens will be randomly tested to lowest level of

detection. If there is a medical problem that can be addressed, the specimen results will be reviewed according to the general policy for all specimens once the medical issue has resolved.

If no medical problem is found, and the dilute tests are negative when tested to the lowest level of detection, the decision to increase the testing schedule will be based on other concomitant behaviors. After a medical evaluation which indicates no medical reason for the dilute tests, further negative dilute test results will be tested to the lowest level of detection.

If you have questions about dilute tests, please use your weekly call to discuss this topic further.

Making the Most of Family Moments

The time you spend with your children each day doesn't have to be scripted or scheduled. In fact, if you set aside only specific times as "family time," it puts a lot of pressure on both you and your kids.

Instead, family time can take place spontaneously in many different ways during ordinary interactions between parents and children, whether it's rocking a baby to sleep or driving a teenager to the mall.

You can take steps to make the most of these moments. One place to start is at the dinner table. "Even if it's for only 10 or 15 minutes, it's the sacrosanct time that everyone agrees is important," says Eve Orlow, Ed.D., a clinical psychologist in the Philadelphia area.

"Turn off the TV and radio and don't read the newspaper. Ask questions that create the foundation for relationships -- not only 'Did you have a good day at school?' but also 'What was good about school today?'" Dr. Orlow says. "It's also a good time for children to learn that they should ask, 'And how was your day?'"

Here are some other ways you can become involved with your children:

- Listen up. Listen not just for what happened, but for what they are telling you about their day through their actions and tone.
- Read together. This teaches kids that books are not only a source of education but also of pleasure.

Reminder

If you want to confirm that HPSP received your documentation that you faxed to 503-961-7142, please call 888-802-2843, 24 hours after you faxed the documentation. It's helpful if you know the date and approximate time that you sent the fax. We receive a great deal of documentation, and it takes approximately 24 hours to data enter the forms from time of receipt. You can also ask your weekly call-in facilitator.



Take the time to unplug with your family.

- Play board games together. You'll interact with your children while having fun.
- Limit and monitor TV viewing. The American Academy of Pediatrics (AAP) recommends no more than one to two hours of quality television or videos for children older than 2. Children younger than 2 should not watch TV or videos, the AAP says.
- Focus on their unique interests. For some kids, it might be going to a ball game; for others shopping at the mall or baking cookies.
- Relax more. "With so many things to be done, there's something magical about spending two hours -- or all day -- on a Monopoly game," Dr. Orlow says. "It says: 'We value hard work, we also value relaxation time and we value being together.'"

Krames Staywell

Source: Wellness Library Health Ink and Vitality Communications © 2011

Thoughts from a Licensee

The HPSP program is now entering year 2. We continue our commitment to provide licensees with support through the monitoring process. Recently an agreement monitor had a licensee share his thoughts on the program, and he was willing to allow us to share the following with you.

"Yes, five years of monitoring is hard, but this isn't about the program, it's about life and doing what we need to do. It is part of the wreckage we created, and I would like others who are in recovery to understand that even though it's hard, and there are a lot of requirements...they (*including himself*) need to get themselves together. It's not HPSP doing something to you, it's what you need to do for yourself." The licensee went on to talk about recovery being about surrendering, "...which means no resistance and not throwing your anger around. We all make mistakes."

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HealthProCHOICES

A newsletter for participants in the Health Professionals' Services Program (HPSP)

August 2011

Self-Help Documentation

Since the program has been up and running for more than a year, the Advisory Committee recognized the many points of monitoring that are currently required. There had been concern voiced by licensees regarding the sending of the self-help documentation on a weekly basis to HPSP, so at the July meeting, the decision was made to change the requirement. Starting in August, licensees no longer have to send in documentation of self-help meetings. At the time of your weekly call-in licensees with self-help requirements can report how many meetings they attended and what the value of the weekly meetings was for them in their recovery program.

Getting to Know HPSP Staff

Perla Sloane, MSW, LMSW is an agreement monitor working primarily with Board of Nursing licensees. Perla is a graduate from the University of Maryland Graduate School of Social Work, where she concentrated in both Mental Health and Employee Assistance Programs. Prior to attending graduate school, Perla worked with Veterans in the Substance Abuse Rehabilitation Program of the Washington DC VA Medical Center. Perla is also a Veteran, having served in the United States Navy as a Hospital Corpsman for five years of active military service.



Perla Sloane, RBH Agreement Monitor

Success in HPSP

Over the past year, we have heard from many licensees about their fears and anxiety that a licensee will be incorrectly reported non-compliant. We understand this concern and want you to know about the checks that are in place before a licensee is reported non-compliant.

Missed Daily Call-In

The most frequent reason a licensee is reported non-compliant is due to missing a daily call in four or more times. You as the licensee can always call and ask how many calls you have missed to date and the weekly contact with your agreement monitor is a good opportunity to do this. Also, if you did try to call in and our system failed to record it, we have the ability to run a report that shows all the phone numbers that were called into the IVR by date and time. If this call log shows that you called, then it is not recorded as a missed call. You will be contacted prior to submission of the non-compliance report.

Non-Negative Test Result

Please be sure to return the call of the Medical Review Officer. If you provide appropriate documentation to the MRO,

the test result will not be reported as a positive test. *Reminder:* ETG results over 500ng/ml are reported as a non-negative positive test result.

Failure to Follow Recommendations

Most often, licensees who fail to follow recommendations, fail to follow the treatment recommendations of the third party evaluator or their treatment provider. Before a licensee is reported non-compliant for failure to participate in the recommended treatment, when possible, the agreement monitor speaks with the licensee, all providers involved with the licensee and the entire record is reviewed by the Medical Director.

The best way for licensees to deal with concerns about a potential incorrect report of non-compliance is to talk to your agreement monitor and get your questions answered and concerns addressed. Our goal is the same as yours: to protect you, your families and the public by helping you stay clean, sober, and stable; and to solidify a strong recovery plan.

Meeting Requirements

Licensees must follow all of the recommendations of their third party evaluators and/or treatment providers once the recommendations have been approved by the HPSP Medical Director. This means that a licensee could be referred for substance abuse and gambling treatment.

Treatment recommendations are typically determined by the licensee's diagnoses at the time of evaluation. The HPSP medical director Dr. Gregg reviews and must approve all third party evaluations and changes in treatment plans. If you have any questions, please speak with your agreement monitor.

Fall Spiritual Retreat

THE 2011 FALL SPIRITUAL RETREAT where legal, healthcare, and treatment professionals share the gift of recovery will be held at the Hallmark Resort in Newport, Oregon September 16 -18, 2011. (The retreat is sponsored by *The Other Bar Oregon*.)

The fifth annual Fall Spiritual Retreat will be a gathering of recovering professionals, their spouses and significant others to perpetuate and improve the fellowship of recovering professionals and to promote their effective outreach to members of all their professions who still suffer. Over the years many types of healthcare professionals, including dentists, nurses and pharmacists, together with drug and alcohol counselors have joined the lawyers and physicians who attended the first Retreat.

One health care professional shares his experience of the retreat:

"As a new to recovery healthcare professional, I felt alone and isolated. I was ashamed of what I had become and felt guilt for what I had done to myself and others. I was afraid that no one would understand my situation and what I was feeling that I could trust anyone with my shameful secrets. At the urging of a my Board Monitor, I attended the retreat and found fellow professionals who were facing the same challenges as me. I heard stories that were similar to mine and I met men and women with years of sobriety who had survived the same situations I was



facing and had regained their lives, families, and practices. I exchanged phone numbers with many of those persons and I have enjoyed their support and company along my way in recovery. For me, this retreat was more clinically and spiritually significant than academically interesting. I return every year just to recharge my spiritual principles and introduce new friends to this fellowship. Thank you for helping discover that I am not alone."

For registration information please contact:

Phil Bennett - prb@jfolaw.com

James O'Rourke, Jr.: jfo@jfolaw.com

Note: Physicians can meet 10 of their 20 hour CME HPSP requirement by attending this retreat. These hours are not able to count toward the CMEs needed for re-licensing.

Hosted by THE OTHER BAR OREGON – "Lawyers Helping Lawyers"

MRO Role

When a licensee has a non-negative test result as the result of a prescription, the medical review officer (MRO) contacts the licensee and discusses the result. The MRO asks if the licensee is on any medication and will request a copy of the prescription. Your pharmacist may need to fax a copy of the prescription to the MRO if you do not have a copy. HPSP cannot do this for you even if we have a copy of your prescription. You must provide the documentation directly to the MRO.

It is important that you return the MRO's call when a message is left. The MRO will make 3 attempts to reach you but then will report your test result to HPSP as a non-contact positive test result. The message from the MRO will be: *John Doe please call Nationwide Medical Review regarding your drug test at: 888-265-6362.* You can reach the MRO from 6am-3pm (PST). HPSP will call you, and if we are not able to reach you, **we will leave a message requesting that you immediately contact the MRO.** If you do not contact the MRO, the positive test will have to be reported as a positive test result.

If you provide the MRO with a prescription, and the medication has addictive potential, the MRO sends HPSP a report stating negative with a warning. This triggers a case review by the HPSP Medical Director, Dr. Jessica Gregg. Dr. Gregg will review your medication management form and may speak with your prescribing physician. It is important that every prescriber completes a medical management form, and that HPSP has a release of information on file to speak with your prescriber. You can find the release form on the website: rbhhealthpro.com. If you need a release form, download the form entitled: Addendum to the Consent, release and Exchange of Information form.

Upcoming Educational Programs

- **Trauma and Addictive Disorders Conference**
11/3-11/5, 2011; Delray Beach, FL;
www.usjt.com (US Journal Training)
- **National Conference on Addiction Disorders**
9/17-9/21, 2011; San Diego, CA
www.NCAD11.com

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HealthProCHOICES

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September 2011

Having Trouble with the IVR?

We are hearing from licensees that they are experiencing difficulties with the Inter Active Voice Response (IVR) call in system. We are aware that this is causing stress as you need to then get back to HPSP and let us know that you were not able to complete your daily call in. When you inform us that you are having problems with the IVR, we need the following information from you: date, time, number that you called from and exactly what occurred. This information is then shared with our IVR service provider so they are able to track your call and determine the problem.

You can email us this information hpsp@reliantbh.com, or call 888-802-2843. Customer service representatives are available to take your call and can let you know if you are required to test. The phone is not answered until 7:00am. If you leave a message, an HPSP representative will call you back with your testing information.

Getting to Know HPSP Staff

Skip Wheeler, MS, CEAP, CADC I and DOT qualified SAP; is an Agreement Monitor with the HPSP program. Skip has worked in the mental health, substance abuse and employee assistance fields for over thirty years. Prior to joining RBH, Skip was the director of an EAP in the Olympia, WA area. Skip works primarily with the Boards of Dentistry and Pharmacy.



Skip Wheeler, RBH Agreement Monitor

Tips to Assist You with Remembering to Call In

A licensee recently asked his agreement monitor for suggestions on how to remember to call in every day. Below is a list of tricks to help you remember to call in. If we have missed something that has worked for you, please let your agreement monitor or weekly call in facilitator know. We will publish additional ideas, in the October issue of the newsletter. Here are some ideas that licensees are using (the first one is the best):

- Work with your agreement monitor to determine how you remember other important issues in your life. This is really helpful.
- Tie the call to another routine that you do every day, e.g. take medication or vitamins, or brush your teeth.
- Keep a phone next to your bed and call the first thing in the morning before you get out of bed.
- Set multiple alarms on your phone as reminders—one early on, one mid-day and one later in the day.
- Keep a written log of calls, including day, time and confirmation code. (This will also help in case there is a discrepancy between HPSP records and your own).
- When in doubt call anyway. If you don't remember whether or not you already called once, call again just to be sure. It will not cause any problems with the system.
- Put post it notes on the mirror in the bathroom.
- If you journal what you eat, add an extra column to the journal and write down when you made the call.
- If you use Gmail, send yourself a text reminder with the IVR number.

Additional Information

re: substantial non compliance
Non-negative toxicology result
while in treatment

At the August meeting of the Advisory Committee which is composed of representatives from the Dental Board, Medical Board, Nursing Board, Pharmacy Board, Oregon Health Authority, and Reliant Behavioral Health, the decision was made that if a licensee has a non-negative test result reported to the HPSP program by a treatment center or treatment provider, the HPSP agreement monitor must complete a non-compliance report. House Bill 2345 stated that a positive test result while in the program constitutes significant non-compliance.



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Results of the Licensee Satisfaction Survey



The results are in for the 4th quarter Licensee Satisfaction Survey. There were 363 surveys sent out and 77 licensees returned responses. We heard from 28 physicians, 42 nurses, 3 dentists and 4 pharmacists. The results showed that licensees who responded believed that the program has improved, as indicated by their answers to the survey questions.

The following areas showed improvement: questions and concerns were responded to promptly, agreement monitors responded timely to calls, quality of agreement monitors response to questions; email communication is timely and the overall ranking of services.

Improvement is needed in the ease of navigating the website and the call in service. It is interesting that the ratings regarding the call in services were polarized with the 4th quarter having the highest number of licensees strongly agreeing that the system is easy to use and the highest number of licensees strongly disagreeing that the system is easy to use. It is our goal that by the time you are reading the newsletter, the problem with the call in system be resolved.

Lastly, although the response was positive to the rating for Information was communicated clearly and professionally for the customer services group, the positive response rate dropped by 6%.

If you have a concern or complaint about the program's management, not about the statute's requirements which we cannot directly impact since that has to be done by the legislature, please contact your agreement monitor, or one of the following HPSP staff:

- **Gary Barnes, Clinical Manager**
garyb@reliantbh.com

- **Dale Kaplan, Program Manager**
Dkaplan@reliantbh.com

- **Christa Lee, HPSP Team Lead**
clee@reliantbh.com

We want to thank all the licensees who are willing to take the time to complete the survey. Feedback is important to us. We added some new questions to the year 2 satisfaction survey. So please in October, take the time to complete the survey.

Upcoming Educational Programs and Resources

- **Trauma and Addictive Disorders Conference**
11/3-11/5, 2011; Delray Beach, FL;
www.usjt.com (US Journal Training)
- **Addition Medicine: State of the Art 2011**
10/12/11-10/15/11; Hyatt Regency Long Beach, CA;
www.csam-asam.org (23 CME's)
- **Physicians Litigation Stress Resource Center**
<http://physicianlitigationstress.org/>

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Managing Change

Your HPSP team recognizes that the continual change in the HPSP program has not been easy for licensees. This is a new program which is constantly refined and reviewed on a monthly basis by the Oregon Health Authority, the participating boards, and Reliant Behavioral Health. As this group gains more experience in implementing the requirements of HB2345, changes are made to improve the existing program.

Outlined below is a program change recently approved by the HPSP Advisory Committee. There are no other changes planned for the next few months. Also listed are clarifications of existing program requirements and consequences for missed deadlines. To help you adapt to the changes, we strongly encourage you to discuss your concerns and questions with your agreement monitor. Please ask your Agreement Monitor if you need clarification of any of the changes in regard to what is expected of you. Having the facts and planning how you will meet the requirements will help you make a successful adjustment. Your agreement monitor is there to assist you with gaining understanding on what is expected and how you can best meet the requirements. Coping with change and making adjustments are important to a solid recovery. The below program requirement summaries represent all remaining components of the monitoring program.

Program Updates

1. Modification of the Daily Interactive Call In Requirement: see entire policy on website <http://www.rbhhealthpro.com/Policies>. Beginning November 1, 2011, licensees who miss four or more calls to the IVR will no longer be reported as substantially non-compliant. Instead, at the time of the fourth missed call, a licensee will be scheduled to test within the next 2-3 business days. Licensees will be scheduled to test following each missed daily call to IVR after the fourth missed call. Toxicology tests scheduled due to a missed daily call to the IVR are not considered part of or counted as part of the required annual testing schedule.

continued >>

Getting to Know HPSP Staff

Karen Veteran MA LMFT (Washington) joined the HPSP team in May of this year as an Agreement Monitor for physicians and nurses. She is a graduate of UCLA and Boston College with 20 years of post licensure experience in chemical dependency treatment, employee assistance programs, mental health private practice, and critical



incident training and trauma. When she is not at work, Karen and her daughters enjoy caring for their small farm of alpacas, llamas, mini-goats, chickens and a horse.

Picture: Karen with two baby alpacas who did not want to cooperate with the photographer

Managing Change (continued)

Program Updates

Beginning January 1 2012, all licensees will have 0 missed calls to the IVR. Any missed calls prior to 1/1/12 will not be counted toward the missed calls count for 2012. Licensees are permitted 3 missed calls per 12 month period. This means that the initial missed call is erased at the anniversary date of that call and subsequent missed calls are erased on their anniversary dates. E.g. A licensee misses calls on 5/29/11, 6/4/11, 7/1/11 and 8/4/11 at which time the licensee is scheduled for an additional test and will be scheduled for an additional test following any subsequent missed calls

through 5/28/12. On 5/29/12, the 5/29/11 call is eliminated and on 6/4/12, the 6/4/11 call is eliminated. In the above example, the licensee will have two missed calls on record as of 6/5/12.

2. Reminder: Weekly HPSP

Contact Requirement: Licensees must contact HPSP at least weekly. This is a requirement of the statute. The consequence of missing more than 4 weekly contacts per 12 month period will be determined at the next Advisory Committee meeting. Establishing a weekly schedule to contact your agreement monitor now will help you remember to make that contact.

3. To be initiated: Documentation to Requirements: Starting January 1, 2012, there will be a consequence to missing requirements regarding attendance to requirements in licensees' monitoring agreement addendums. The expectation is that licensees will attend all required appointments. There is no consequence if a licensee cancels an appointment and reschedules at the time of the cancellation. The consequences of missing scheduled appointments or missing attendance documentation will be determined at the next Advisory Committee meeting.

Start Some Healthful Holiday Traditions

The holiday season can produce extra stress, a breakdown in healthy eating habits, even depression. But you and your family can adopt some new traditions that may help relieve the season's stress and make your holidays healthy and happy. It's easy to become overwrought this time of year, especially if you believe something is lacking in your holiday celebration.

Here are some ways to create new holiday traditions that will help level your emotions:

- Ask yourself if you really enjoy all the rituals or whether they have merely become habits. Try adopting less elaborate traditions of holidays past.
- Don't be afraid to scale down gift giving. You'll probably receive a lot of support.
- If your annual party is too much to handle, postpone it until after the holidays when you have more time to prepare. This also will help alleviate post-holiday letdown by giving you something to look forward to.
- If you are unable to be with your family, get out around people. Plan to be with friends or volunteer to help others who also may be separated from their families.



Upcoming Educational Programs and Resources

- **Trauma and Addictive Disorders Conference**
11/3-11/5, 2011; Delray Beach, FL;
www.usjt.com (US Journal Training)
- **Physicians Litigation Stress Resource Center**
<http://physicianlitigationstress.org/>

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HealthProCHOICES

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November 2011

Policy On Over the Counter and Prescription Medications

Beginning December 1, 2011, licensees in the toxicology program will be tested for the over the counter medications in addition to the current testing for illegal drugs and prescription medications that are mood altering. The policy, which has been approved by the Oregon Health Authority and the participating boards, is below. A list of over the counter medications and prescription medications that are mood altering is on the website rbhhealthpro.com, under the "Resources" tab. If you want a hard copy just request it from your agreement monitor.

POLICY:

Licensees are monitored for the presence of both prescription medications and over the counter medication that may have sedating or stimulating effects. For additional information on the management of prescription medication with mood altering effects, please see the Policy on Medication Management. Sudafed is now a prescription medication and falls under the Policy on Medication Management and should be pre-approved by the Health Professionals' Services Program (HPSP) medical director.

Several over the counter medications may have sedating or stimulating effects. This includes, centrally acting antihistamines and decongestants such as diphenhydramine (Benadryl), and hydroxyzine (Vistaril or Atarax). Licensees who have a non-negative test result due to the presence of one of these over the counter medications will be required to provide a letter from their treating physician indicating that the physician is aware that the licensee is participating in the Health Professionals' Services Program, and is also aware that the licensee is taking an over the counter medication that has potentially sedating or stimulating effects, and agrees with the Licensee's use of the medication.

Licensees do not need to provide a new letter each time they use the medication but will need to update the letter each year. Alternatively, the Licensee may request that their prescribing physician list approved medications, including over the counter medications on the medication management form. If the medication is prescribed, the licensee will be required to provide a medication management form signed by the prescriber.

The medical director of the Health Professionals' Services Program will review the licensee's physician's letter and/or medication management form. In some cases, the medical director may choose to discuss the licensee's use of over the counter medication with the physician.

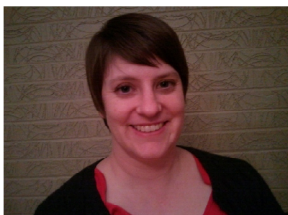
A list of medications that are mood altering, including over the counter medications is provided on the HPSP website rbhhealthpro.com, under the "Resources" tab. Licensees may also request that a hard copy of the list be mailed to them.

How to Understand Your Financial Statement

All information regarding your financial status with HPSP is on the website. To access your account information, follow the steps below:

1. To login, click on the "My Account" tab.
2. User login is your email address (that you have given HPSP to communicate with you) and your password. Your password is your 8 digit account number plus your 4 digit pin number.
3. Once you login, you will be able to see your financial account.
4. Click on "Statement" and you will see a summary of all financial transactions. You can also print your statement.
5. If you want more detailed information of what you were billed for and how much, go into the individual invoice by clicking on either the date or invoice number.
6. All licensees must maintain a balance of \$120. This will be returned to you once you have successfully completed the program and there is no outstanding balance.

Employee of the Month



Kate Manelis, LMSW
HPSP Agreement Monitor

Kate Manelis, LMSW, joined RBH in 2008, initially working with the EAP team. She was excited to transition to the HPSP team in June, 2010. She earned her MSW at California State University – Fresno and worked for several years with mentally disordered offenders, facilitating both mental health and chemical dependency services, at a CA State Hospital before moving to Portland. In her spare time, she enjoys reading, sewing, cooking, and playing with her son and daughter. Kate can be reached at 503-802-9843 or kmanelis@reliantbh.com.



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Message to OMB Licensees Regarding the Renewal Application

There have been questions from physicians regarding how to respond to the questions on the application for licensure renewal. Please review the information below. If you still have questions, please call your agreement monitor for clarification or call the Medical Board without identifying yourself. The information below has been reviewed and approved by the OMB.

1. Category I questions must be answered truthfully and fully. For example, If you have had a DUI for which you were arrested, you must respond **yes** to question #4, even if you are in the HPSP program. Licensees need to report an arrest, conviction, guilty plea,

no contest plea, pardons or diversions, etc. If you have a pending court case, you need to answer **yes** to questions #5, 6, and 7 even if you are in the HPSP program. These questions all need direct answers. For Physician Assistants, the numbering differs on the renewal application. Question 4 for the physicians is question 7 for the PAs. Questions 5, 6, and 7 for the physicians are questions 8, 9 and 10 for the PAs.

2. Category II questions may be answered **no**, if you are in the HPSP program. Please note the following paragraph which is on the application renewal form under Category II which reads: *If applicable, these questions should*

be read to include the clause "other than what is already known and in compliance with the recommendations of the Oregon Health Professionals (HPSP)."

Please do not lie on the renewal application form. Lying on the form would be a violation of the medical practice act and the licensee could be subject to discipline as a result. If the Oregon Medical Board were to discover it, the OMB would open an investigation and would look at the falsification of information (lying) issue as well as any other issues that were presented.

Exercise Away Your Stress This Holiday Season

"Exercise is a physical outlet for emotional stress," says Richard Cotton, an exercise physiologist and former spokesman for the American Council on Exercise. "It's a form of release."

Although there isn't one type of exercise that's right for everyone, Mr. Cotton says that keeping your body in shape or keeping some level of conditioning can be beneficial when it comes to managing stress. "It's physical movement to help resolve the distresses that are building within," he says. "When we keep ourselves in shape, we're more tuned up and we feel better, and when we feel better, we're more able to cope with the stresses of the holidays."

As with other aspects of the holidays, planning is important with exercise, too. "Preparing the mind can help enormously," says Mr. Cotton. He warns, however, against making stress-relieving exercises a stress in themselves. "Figure out what's realistic, when you can and can't exercise, and do your best to stick with that," he says. "Avoid making the guilt of not exercising an additional stress. Plan and make realistic expectations of yourself. It can certainly make a huge difference."



Reminders

- If you are forgetting to call in on Monday since Sunday is now a "no call in needed day", go ahead and just call in on Sunday. Sometimes it is easier to remember to do repetitive actions if you do them every day at the same time.
- All licensees need to have some type of weekly contact with their agreement monitor. Your agree-

ment monitor will tell you if you need to have telephonic contact weekly or monthly. If you call in on a monthly basis, you still need to send an email or leave a voice mail on a weekly basis. By Statute, you need to have weekly contact with your agreement monitor.

Upcoming Educational Programs and Resources

- **New Training: 33rd Annual Behavioral Health & Addictive Disorders.** Clearwater Beach, Florida 2/13-2/16 2012 www.usjt.com
- **Physicians Litigation Stress Resource Center** <http://physicianlitigationstress.org/>

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HealthProCHOICES

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December 2011

One goal of the monthly newsletter is to keep licensees updated regarding policies and procedures. Although the policies and procedures related to the Health Professionals' Services Program are on the website rbhhealthpro.com, we hope that highlighting different policies in the newsletter is helpful. In the October newsletter, it was reported that the Advisory Committee consisting of the participating boards and the Oregon Health Authority were to approve the policy on Submission of Attendance Documentation to Requirement. Below is the entire policy for your review and this includes the consequences if attendance documentation is not received within the designated time frame. The hope is that by providing you with the policies prior to their start date, we can help you be responsible for your recovery program and maintain compliance in the HPSP program.

Policy on Submission of Attendance Documentation to Requirements-Start Date 1/1/12

Policy:

All licensees are required to submit documentation of attendance and compliance to treatment and other requirements to the HPSP program on the schedule specified in the licensee's individual addendum to the monitoring agreement.

1. If a licensee misses a counseling session:

- a. These sessions need to be made up within a specific time period as determined by the agreement monitor to avoid a report of non-compliance.
- b. A non-compliance report will be submitted if the licensee fails to attend a second scheduled appointment within a 6 month period or if the licensee fails to make up the missed sessions within the specified time frame.
- c. Failure to attend a scheduled appointment includes cancelling the appointment without an immediate rescheduling of that appointment or failing to notify the provider and not attending the scheduled appointment.

2. If a licensee submits documentation past the due date or fails to submit documentation of attendance but attended event:

- a. HPSP will send a warning letter to the licensee with a copy to the licensee's Board if the licensee is board referred.
- b. If licensee fails to send in documentation within given timeframe following receipt of the warning letter, the licensee will be reported non-compliant.

3. Documentation may be:

- Mailed to HPSP at 1220 SW Morrison Street, Suite 600, Portland OR 97204-2405
- Scanned and emailed to hpsp@reliantbh.com
- Faxed to HPSP at: 503-961-7142

4. Due dates:

- a. Documentation for appointments or meetings that are sent in on a **weekly basis** should be received by the program within 3 business days of the date of the session attended. A week is considered from Monday-Sunday. If mailed, the postmarks of the envelopes of the documents must show that the document was mailed within 3 business days from the date the appointment or meeting was attended.
- b. Documentation for appointments or meetings that are sent in on a **monthly, quarterly, annually or other time frame** should be received by HPSP within 3 business days of the attended appointment. If mailed the postmark of the envelopes of the documents received need to be within 3 business days from the date of the scheduled session.

Updates

1. If you have specific requests for billing, please put your request in writing to your agreement monitor. We will try to meet your request but cannot guarantee that we can meet all requests because the billing is an automated process. We will try to work with you to come up with a reasonable solution to your billing problems.
2. Please note that HPSP will not pay for overdraft charges. You need to be aware that you will be billed approximately 10-14 days following the time you completed a toxicology test.
3. You can now call the IVR starting at 3:00amPT. This time was changed to accommodate licensees who are traveling in other time zones.

Employee of the Month

Lesley Burke, LPC, CADC I began working at Reliant Behavioral Health in October of this year, as an agreement monitor for the HPSP program. She has 5 years experience as an addiction counselor and therapist, working in community mental health,

intensive outpatient and residential addiction treatment settings. She graduated from Marylhurst University with an MA degree in art therapy/ counseling, and received her undergraduate degree at Loyola University in New Orleans. When she is not working at Reliant, Lesley works part time as an art therapist and counselor at a private eating disorders clinic in Portland, and is also enrolled in a training program to become a registered yoga teacher. In her limited free time she enjoys attending music and art shows, painting, traveling, and spending time with her family, friends, and pets.



Leslie Burke, LPC, CADC I
HPSP Agreement Monitor



HPSP: 888.802.2843
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Results of Satisfaction Survey First Quarter Year Two

You will be receiving the second quarter satisfaction survey at the end of December. Please be sure to give us your feedback. Below is a summary of the highlights of the results from the first quarter survey. Thanks to all that participated and gave us feedback.

Highlights: There was an excellent response to the survey by the licensees this quarter. Although there are still some very negative comments by licensees, overall the licensees rated the program positively. Improved scores were given to the customer service group regarding promptness of their response and clarity of responses. The licensees also rated the agreement monitors highly. 72.8% of the licensees agreed or strongly agreed that the agreement monitors were knowledgeable about their case and 73.9% of the licensees agreed or strongly agreed that their needs and concerns were understood. In terms of what was helpful in being successful in the program, the licensees rated the agreement monitors, toxicology testing and the newsletter as being the most helpful. 40.3% of the licensees rated the overall quality of the services as above average or excellent compared to last year's average across quarters, which was 26%. This quarter another 29% rated the service as average which means 69% of the licensees responding to the service believe the services provided are average or above.

It is notable that there were 10 positive comments specifically praising an agreement monitor. This is a significant improvement over past quarters. The areas for improvement include making the website more user friendly. There will be a request in the December newsletter for specific recommendations regarding improvements. Licensees are consistent over the quarters in expressing dislike of particular aspects of the program's structure, such as observed toxicology tests.

Changes in Fees to Toxicology Testing

Effective December 1, 2011, all the participating boards in the HPSP program agreed to test licenses using the same toxicology panels. Some licensees will see a decrease in the cost of some of their tests and other licensees will see a slight increase. The panels now include testing for over the counter medications.

Error in Over-the-Counter Medication List

Please Note: there was an error in the list of the over-the-counter medications. This has been corrected and the list on the website is accurate. The medications that are not approved for use without a physician's statement are Delsym, Clor-Trimetron, Coricidin HBP, and Tylenol Allergy Multi-Symptom and they have been removed from the able to use list. These medications need physician approval.

Resolutions for the New Year

Resolving to lead a healthier lifestyle is a good way to begin the New Year. But don't despair if you still haven't confirmed your New Year's Resolutions; there's still plenty of time to choose a better path for the year ahead. "Millions of Americans make resolutions that go unresolved largely because they fail to utilize proven behavior modification techniques to support their new goals," says Don R. Powell, Ph.D., president of the American Institute for Preventive Medicine in Southfield, Mich., and author of "365 Health Hints." "For starters, it's important to set realistic goals for yourself," he says. "It takes some time to develop a bad habit, so don't expect to change things overnight. In addition, try to work on only one habit at a time. It's not easy to change your behavior, and it can become overwhelming if you try to change too much, too soon." Here are 5 major changes, pick 1 or 2 that are important to you ; work on them and move on to others when you have met your goals.

5 Quick-Start Resolutions:

- 1. I resolve to get physical.** Sticking to a regular exercise routine is one of the most important steps you can take to improve your health and longevity. Starting this year, devote 30 minutes, three to four times a week to an aerobic activity you enjoy. Good choices include walking, running, swimming, biking, skating and aerobic dancing.
- 2. I resolve to maintain an ideal body weight.** This year, eat high-fat foods in moderation. Approximately one in two Americans is overweight, and these extra pounds contribute to heart disease, diabetes, stroke and an increased risk of certain cancers.
- 3. I resolve to stop smoking and try avoiding those people who still light up.** Cigarette smoking is the single-most preventable cause of illness in America today. Each year, six times more Americans die from cigarettes than were killed in the Vietnam War. Side stream smoke is just as bad; it can be deadly to nonsmokers who inhale it on a regular basis.
- 4. I resolve to control my blood pressure.** If you haven't had your blood pressure checked recently, do so. Follow your doctor's instructions if it's high, and faithfully take any prescribed medication. If left untreated, high blood pressure is the primary cause of stroke.
- 5. I resolve to develop a strong social support network.** Studies have shown that people who have supportive relatives, friends and co-workers are sick less often than those who don't. Be a friend to others and keep your family close and caring.

"By keeping all 5 resolutions you can add years to your life and life to your years," Dr. Powell says.



Cigarette smoking is the single-most preventable cause of illness in America today.

Upcoming Educational Programs and Resources

- Native American Rehabilitation Association New Year's Eve Sobriety Powwow - Saturday 12/31/11 from 1:00pm-midnight Oregon Convention Center Hall A and B - 777 NE Martin Luther King Blvd., Portland, OR
- New Training: 33rd Annual Behavioral Health & Addictive Disorders. Clearwater Beach, Florida 2/13-2/16 2012 www.usjt.com
- Physicians Litigation Stress Resource Center <http://physicianlitigationstress.org/>