

It's a New Year! Resolve to keep our focus on quality mental health services for all!



WASHINGTON STATE COALITION OF
MENTAL HEALTH PROFESSIONALS AND CONSUMERS

Advocates for Ethical Mental Health Care

www.wacoalition.org

Winter 2011

From the Chair

Dear Coalition Members:

2011 is here! And it is time to renew your membership in the Coalition!

Thank you for your support and membership in the past. As you may know, dues are the sole source of income for our operating expenses.

We are interested in what the Coalition can do for you. What gets you out of your office or house, out of your normal routine, on a Friday afternoon or a Saturday morning? And feels

important and useful? Last year we surveyed our members and were happy to set up programs to meet the concerns that were expressed in the survey. Please see a review of two of those programs in this newsletter. We need your help in planning programs that matter to you for 2011.

So, similar to last year, look for a survey (on line, short and easy) so that we can know what is

on your mind now. Remember, our only agenda is quality mental health.

Let us know what you would like to hear more about so that you can retain your commitment to the same values that made you join the Coalition. And, shortly, we will have our members on our Web site. Watch for an e-mail with details.

Many of you have

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Legislative Summary

Laura Groshong
MH-PAC Coordinator



Laura Groshong

The primary issue affecting all aspects of Washington government this Legislative Session (which began on January 10) is the looming \$4.2 billion shortfall in the 2011-2013 budget and the \$1.6 shortfall for the first six months of 2011. While there will be terrible cuts to all aspects of state funding, mental health is the one that concerns us most. It appears that the Basic Health Plan, the Lifeline Disability Program (formerly GA-U), and Regional Support Networks (RSNs) may be

eliminated, but the sad details are still to be determined.

Other pending issues are:

1. Autism Mandate - This would require all insurance plans to cover treatment for autism, but would allow only psychologists and psychiatrists to provide mental health treatment, a concern since much treatment is currently provided by the other four

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been concerned about recent insurance changes such as the change from UMP to Regence. Laura Groshong, LICSW, presented "Everything You Want to Know About Mental Health Insurance in Washington" on Friday, February 4. Watch for more information in the next newsletter.

We appreciate you, each of you. Please renew quickly and let us get on to planning this year's events. Do invite like-minded colleagues to join at www.wacoalition.org.

Please feel free to contact me directly at swiedenfeld@me.com

Sue Wiedenfeld, PhD

Malpractice Complaints: How to cope with what mental health clinicians fear

Did you know more than 50 percent of all mental health clinicians will have a complaint filed against them in the course of their career? Last October, David Schoolcraft, JD, a highly experienced Seattle area health-care attorney, gave us a presentation on some of the most common causes of malpractice complaints, what to do, and what *not* to do. He emphasized not only the importance of insurance coverage of at least \$100,000, but also to put the carrier on notice immediately after you receive a complaint. Mr. Schoolcraft reminded us of the importance of keeping records and that cover-up can be worse than the crime itself. David handed out *Twelve Malpractice and Licensing Pitfalls for Therapists*, written by Laura Groshong, LICSW.

This is a valuable resource for therapists.

Follows are some of the points David covered:

• Ask your broker, do you have coverage for disciplinary

matters? If not, it should cost about \$75/year.

• Do not respond to any letter you might get asking for information. Instead, put your carrier on notice that you did receive a letter and tell it that you "need counsel." Do not do anything else in response to any letter as this is where folk make mistakes that undermine their case. This is why you have insurance; get the carrier involved, and do not do anything until you do—in writing, immediately. Inform the carrier of the deadline for your request and that you "need counsel." Follow up with them.

• Common mistakes: Trying to cover up any action, changing information in the chart or dates. In any event, DO NOT IN ANY WAY ADJUST YOUR RECORDS.

• What helps: Writing

clinical decisions (I decided to contact the general medical MD, etc.), keeping notes on any calls, notifying carrier if there is any risk to an officemate.

• Subpoena vs. court orders: Subpoena, can file it for no reason. Ninety-five percent of the time these can be ignored. BUT, talk to a lawyer. Say, "I don't think this subpoena is valid." Psychotherapy notes as defined by HIPAA are session notes (not dx, date, and tx prognosis). Court order: This is signed by a judge, and you must respond. Often, a court order is needed to get session notes.

• HIPAA issues. IF client pays by check, client must know he/she is then associated with you at the bank. Also, if you email, client must know that this is not completely protected.

• DO keep separate records. ◇

Join the Coalition	
Dues	
Member	\$65
Student	\$15
Consumer	Free
Organization	\$124

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Who Ya Gonna Call !?!?!?!?
Coalition Helpline: 206-444-4304
Who's My Legislator: 1-800-448-4881
(State and Federal)
Legislative Hotline: 1-100-562-6000

The Frugal Practitioner

We'd like to thank all those who participated in our Frugal Practitioner event in September. Not only did our panelists (Robert Odell, MSW, LICSW; Robin Shapiro, MSW; Jay Gelzer, MSW; and Heidi Wasch, PhD) share a wealth of ideas, suggestions, as well as products and services they use to grow and manage their practice, but many of those attending also contributed with suggestions of their own. Follows is a condensed version for those who could not attend.

The morning started with a presentation on Office Ally from no less than the president of the company, Brian O'Neal.

Office Ally is a free Web-based, HIPAA-compliant service to submit insurance billing. Mr. O'Neal walked us through the process of submitting claims via their software. He also emphasized that they have built privacy and security features and said the company treats all information like credit card processing—it is all encrypted. He also provided an overview of additional services (also free!), including training and a practice management system. Many providers (67% in WA) are already on board with this system and have seen a reduction in submission errors and improvements in their cash flow. Check them out at www.officeally.com and tell them the Coalition sent you! In addition, it was noted by Brian that, in given the federal mandate to comply with federal medical records sharing, all mental health providers will eventually have to submit claims electronically; in fact, in some states it is already required by state law. Therefore, we may, by switching to electronic billing, be in compliance with mandates that are coming in the next few years. Also, Brian shared that MAC users are now going to be able to better utilize Office Ally's billing and software programs.

Robin Shapiro reviewed some of the basics of having a practice. If you haven't already done so, apply for a business license.

You can sublet, share offices by the day or even the hour. When considering location, think about parking and other amenities. Consider your commute. Can you walk or bike to work? She also shared the value of joining a consult group to get referrals and pay for individual supervision with a seasoned busy

supervisor who may refer cases to your practice. Robin also shared that writing a book has given her many referrals to her waiting list practice.

A major component of starting a practice is applying for and being accepted to insurance panels. Advantages are clear. You can work with more clients. Some people will screen you out if you don't take insurance. It was emphasized that you can still submit a claim even if you are not on a panel or a preferred provider. Robert and Christopher suggested a good entry point is through a carrier's EAP, which may be accepting applications. Once a client

sees you through EAP, you may be able to continue seeing him or her. Robert suggested that if you want to learn more about EAPs, consider joining Employee Assistance Professionals Association-Northwest (EAPA-NW), <http://www.eapa.info/ChaptBranch/WA01/>

[PacificNorthwest.htm](http://www.eapa.info/PacificNorthwest.htm). Someone from the audience reported having success with letters from a psychiatrist to the insurance company petitioning them to panel an applicant for continuity of care. By the way, the Coalition has been engaged in an on-going dialogue with insurance companies regarding paneling.

Follows are some of Robin's "gems" to consider:

1. Become an expert in something and give talks!
2. Start a blog (but be professional about it—don't blog about your vacation or favorite meatloaf recipe.
3. Start your own Web site; "if you don't have one, no one under 35 can find you!" Don't market on Facebook.
4. Go to groups such as the Coalition and introduce yourself.
5. Write a book — "People really think you know stuff!"
6. Go to trainings and learn everything. Your degree is just the beginning.
7. Get consultation from a good consultant. Groups are cheaper, peers are free. Forms. You might want to link some forms to your Web site, and ask clients to complete before their session. Saves time.

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IF YOU ARE NOT GETTING E-MAILS ABOUT OUR EVENTS, please E-mail us with your CURRENT E-mail address: wacoalition@frontier.com. This is the best way to get Coalition news.

The Frugal Practitioner, CONTINUED

Electronic Member Directory

Beginning soon, members will be able to access the member directory via the Web site. Because we have listed members only by name and contact information, you will need to fill out more information on your renewal form than you have before. See the renewal form on page 7.

Members who do not want to be listed in this manner should call us at 206-444-4304 or designate it on the renewal form. ◇

Additional suggestions from Robert

1. You want to be included/listed in as many directories as you can. Consider LinkedIn and MANTA. Many sites change, but some are free, at least for basic posting. Google Mental Health Directories. I found one, www.athealth.com Basic listing is free for one year—which is just your name and phone. Premier is \$100 but can add a bunch of stuff. Sue suggested Psychology Today. They have a posting service. It is something like \$29 month. In the past they offered a free six-month trial membership. You should ask for that offer!
2. More blogging sites: www.blogspot.com and www.wordpress.com.
3. Consider Skype, www.skype.com, for your consultation groups. It is a free Internet communication service. Use of your computer's webcam is a big bonus when communicating. It's tricky which more than one user thought.
4. Consider getting a credit card merchant account. "Merchant Warehouse" is one source.

Although you will pay about four percent, you will add to your cash flow. Besides, some clients like the idea of earning miles for their therapy!

5. Look into user-friendly financial management software such as QuickBooks.

Heidi Wasch shared her money-saving ideas with faxing. Faxaway, www.faxaway.com, allows you to fax from your computer and pay per fax, five to ten cents each. It is a local company so you can keep your 206 area code. For as little faxing as many of us do, it is far cheaper than to pay a monthly fee such as that charged by MyFax.com.

She was able to drop her business land line and add an additional cell phone with a family plan.

Other suggestions from Heidi included a couple of Web design yourself and hosting sites: www.weebly.com and www.webstarts.com. From her bookshelf, she recommends *Building your ideal practice: A guide for therapists and other healing professionals* by Lynn Grodzki.

Jay Gelzer gave us more real-life frugality

changes she had personally implemented in an effort to cut costs and raise income. She also converted her business land line to cell phone and now engages in office sharing. She raised her practice fee. Along with also cutting costs at home, Jay figures the net changes amount to \$1380. She led us through the specifics of changing your land line to cell phone. Thanks to legislation some years back, phone numbers are "portable."

Jay encouraged us to think strategically about our practice. We should consider both money and meaning. Analyze true revenues and expenses calmly and correctly. Where is the money coming from to fund your life and work?

For many of us, The Frugal Practitioner is not a one-time event, but a way of life. We look forward to adding to our list of suggestions in the months and years ahead. Perhaps a regular feature of our newsletter? What do you think? ◇



Hey, Members, have you checked out our Web site lately?

www.wacoalition.org

It's a great place to learn about upcoming events, legislative news, and back issues of our newsletter.

Member Profile

Meet Claire Foote, ARNP

Having been a member of the Coalition for many years, I was asked to tell you a bit about myself. This is my 35th year of mental health practice in the Seattle area. For the first ten years, I practiced in several community settings. Since 1985, I've been in solo private practice of psychoanalytic psychotherapy. Additionally, a small portion of my practice is psychopharmacology.

My involvement in the Coalition dates back to before it was the Coalition. Around 1990 or 1991, managed care became a phenomenon in other parts of the US, but it was not until about 1992 when managed mental health care came to Seattle. Those of you practicing back then will likely recall the ten-month transition of Boeing's mental health coverage to managed care. At the time, I was deepening my study of psychoanalysis and psychoanalytic psychotherapy. During

that transition year for Boeing, I was concerned as I experienced, week after week, the continuous intrusion into the treatment frame that managed care wrought. I saw disruption of therapy relationships and the effects on the therapy of ruptures of confidentiality. During those transitional months, patients never knew from week to week whether their insurance provider would continue to cover some of the cost of their treatment. Through that year, as these challenges to the treatment frame continued, I witnessed the erosion of my patients' sense of a safe, holding environment. I remember thinking that attempting to provide good mental health treatment in that new insurance system felt like the childhood game of "Mother, may I?"

It was clear to me that I was not willing to provide services within a managed-care system. But I wanted to do more than "just say no" to the managed mental health contracts that came across my desk. It seemed

to me that the *raison d'être* of managed-care organizations overseeing mental health care was to deny services to patients. Almost immediately, I could see backward movement in terms of the stigma against seeking care for psychological problems—instead of the public increasingly understanding that mental health treatment is as necessary and important as medical treatment, people were increasingly seeing mental health treatment as something that they "should" be able to do without. So I became a founding member of the Mental Health Consortium, predecessor of the Coalition, lobbied in Olympia, and have since supported the Coalition and the Mental Health PAC.

For nearly twenty years, the work by members of the Coalition has had and continues to have a powerful impact on the quality of mental health treatment provided in Washington State. It has

been a privilege to be a Coalition member these many years. At the end of April, I'll be closing my practice and relocating to northern New Mexico. With much gratitude to those in our mental health community, I wish each of you the very best. ◇



Legislative Summary, continued from page 1

licensed mental health groups, LICSWs, LMFTs, LMHCs, and ARNPs. The Coalition supports allowing all licensed mental health professionals to be accepted as providers for autism.

2. Elimination of Mental Health Advisory Committee - The Governor has submitted a bill that would eliminate any direct contact with the

Department of Health with Licensed Master's clinicians, i.e., LICSWs, LMFTs, and LMHCs, groups that currently have close to 12,000 licensees. Since this is a barrier to good communication with the Department, and the fees are paid entirely by licensees, the Coalition is in favor of continuing this

committee. The Governor's plan to streamline government in this case would result in preventing this group of professionals from having a say in the way that their professions are overseen by the Department of Health.

3. Social Work Title Protection - This would require that all state

departments using the title "social worker" require some social work education for any new staff.

Hopefully, there will be some bright spots down the road, but this is a difficult time in our state for many reasons. ◇

BOARD MEMBERS NEEDED



The Coalition represents a multidisciplinary group of professionals and consumers addressing a broad range of mental health needs in children, adolescents, and adults.

Our board is equally diverse. Board members have included psychiatrists, psychologists, MFTs, LCSW, LMHC, and other professionals. They also bring a wide range of experience and special interests that serve to broaden the knowledge base of our members, such as skills with special populations, use of

the Internet, and understanding of legal and ethical issues associated with mental health.

From time to time, we have a need to replace a board member. Are you interested in:

- Preserving choice, confidentiality, integrity, and quality in our mental health services?
- Lobbying to educate legislators about quality mental health care?
- Educating and supporting mental health professionals and

consumers?

- Influencing political and insurance industry policy to include mental health as a vital component of health care?
- Empowering mental health consumers to influence health care reform?

If so, please consider becoming a member of the Coalition Board! No pay, but great rewards! Please contact Sue Wiedenfeld, Coalition Chair, 206-323-6909 or swiedenfeld@me.com. ◇

Coalition members and friends!

Renew your membership today! Keep yourself up to date regarding changes in mental health related to health care reform, and state issues like the changes in the Uniform Medical Plan. Read the several articles in this newsletter about these topics. Don't miss a future Newsletter! This is a time when you will want to track what the Coalition is doing to preserve and protect quality psychotherapy.

Invite a friend to join the Coalition. Forward the on-line newsletter that describes what we do. Remember, The Coalition represents all disciplines. **More members strengthen our message.** ◇

RENEW TODAY!!

Be sure to give us all your information so we can update our membership for the new directory. Renewal form, page 7

Update your E-mail and postal addresses by using this form or E-mailing changes to www.wacoalition@frontier.com

Name _____

Address _____

Phone _____ Fax _____

E-mail _____

OK to publish information in the Directory and on Web site? Yes _____ No _____

Willing to help with specific tasks? Yes _____

It's Time to Renew Your Membership

The Coalition

of Mental Health Professionals and Consumers
P. O. Box 30087 • Seattle, Washington 98103
206-444-4304 • <http://www.wacoalition.org>

Your dues support the Coalition's efforts to preserve ethical mental health treatment. Your dues also provide funding that supports legislative efforts, continuing education programs, our Web site, a Helpline, the newsletter, brochures, and our on-line member directory.

Thank you for your continued support! It makes possible what we do. Please renew promptly. With this year's renewal, you will be included in our on-line directory.

Send this form to:
THE COALITION, ATTN: MEMBERSHIP
P. O. Box 30087
Seattle, WA 98103

NAME _____ Degree _____ Type of License _____

ADDRESS (if different from last renewal) _____

City _____ State _____ ZIP _____

PHONE Work (_____) _____ - _____ Home (_____) _____ - _____

Fax (_____) _____ - _____ Email _____

LOCATION OF PRACTICE _____ Eastside _____ Seattle Other (please name) _____

TREATMENT AGE GROUPS _____ Geriatric _____ Adults _____ Adolescents _____ Children _____ Families

CLINICAL SPECIALTIES (no more than 5 one-word descriptors, please) 1 _____

2 _____ 3 _____ 4 _____ 5 _____

_____ Please check if you **do not want** to be included in the directory

_____ Please check if you are willing to volunteer for the Coalition

_____ occasional time-limited tasks _____ I will help with political efforts

_____ ask me about other needs you have _____ I will help with newsletter or membership (circle)

Legislative District: WA: _____ National: _____ Don't know? Call 1-800-448-4881

I/WE can support the Coalition at the following level:

Organizational Membership:

_____ \$125 _____ \$175 _____ \$225 _____ \$65 _____ \$115 _____ \$250

Professional Membership:

Student Membership:

_____ \$15 _____ \$25 _____ \$65

Consumer Membership:

FREE!

Winter 2011

THANK YOU for supporting **THE COALITION**

The Coalition of Mental Health
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