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ALACRITY CENTER *for* HEALTH & LONGEVITY *in* MENTAL ILLNESS

Mental Health and Heart Disease: *The connection and prevention*

Joseph V. Gennusa III PhD, RDN, LDN

Community Engagement Core Co-Director
Johns Hopkins NIMH ALACRITY Center

Let’s talk about:

- Cardiovascular disease (CVD)
- CVD connection with mental health
- Prevention

Heart disease: Group of disorders

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- Coronary heart disease – disease of the blood vessels supplying the heart muscle
- Cerebrovascular disease – disease of the blood vessels supplying the brain
- Peripheral arterial disease – disease of blood vessels supplying the arms and legs
- Deep vein thrombosis and pulmonary embolism – blood clots in the leg veins, which can dislodge and move to the heart and lungs.
- Rheumatic heart disease – damage to the heart muscle and heart valves from rheumatic fever, caused by streptococcal bacteria
- Congenital heart disease – birth defects that affect the normal development and functioning of the heart caused by malformations of the heart structure from birth

https://www.who.int/news-room/fact-sheets/detail/cardiovascular-diseases-(cvds)

Acute heart disease events

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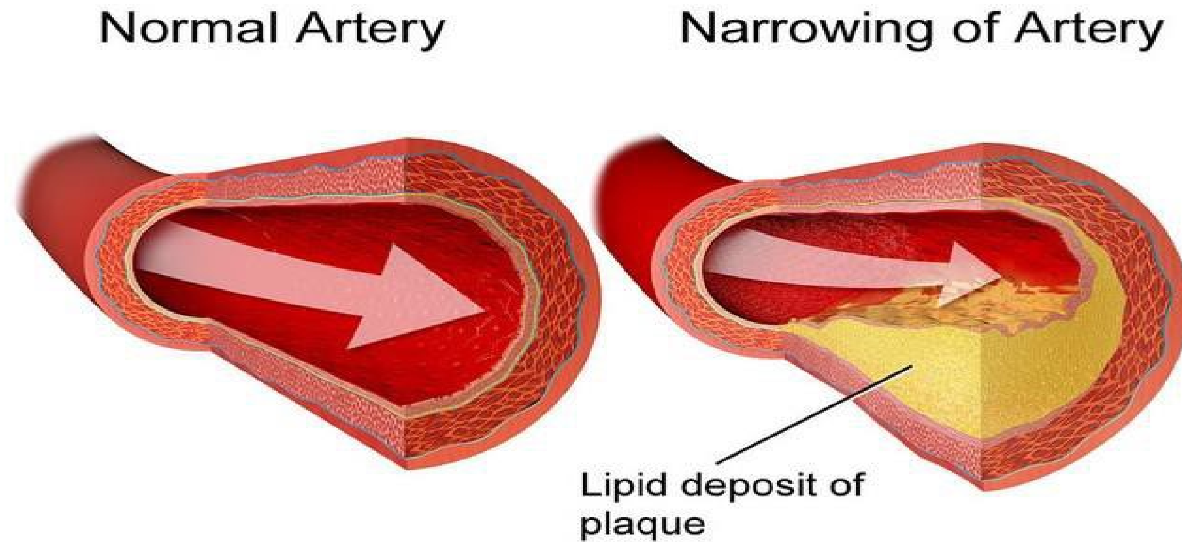

Risk factors for heart disease

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- Overweight/obesity
- Diabetes
- Hypertension
- Dyslipidemia
- Tobacco smoking

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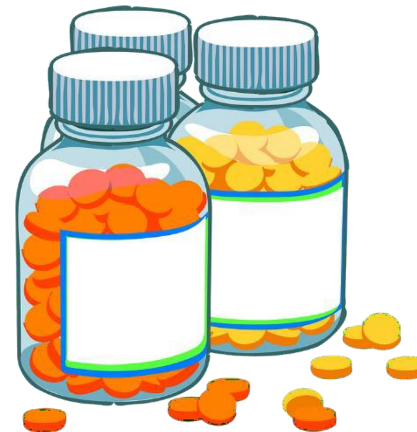
Treatment for Heart Disease

- Medications
  - reduce low density lipoprotein cholesterol, improve blood flow, or regulate heart rhythm.
- Surgery/Procedures
  - coronary artery bypass grafting, valve repair or replacement surgery.
- Cardiac rehabilitation
  - including exercise prescriptions and lifestyle counseling.



Heart disease statistics

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- Heart Disease is the **No. 1** cause of death in the US
- Approximately every **40** seconds, someone in the United States will have a heart attack
- Someone dies of a stroke **every 3 minutes 30 seconds** in the US
- People living with mental illness have significantly increased risk of CVD and CVD-related mortality

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Heart disease and mental health

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- Trauma, depression, anxiety and stress can lead to changes that can affect your health

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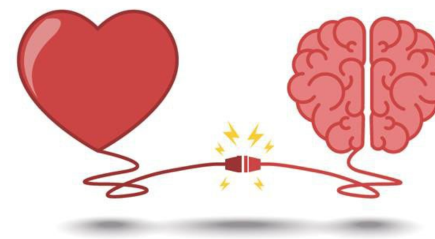
- Research shows that mental health als physiologic effects on the body:
  - Increased heart rate
  - Increase blood pressure



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Depression

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- Depression is a mood disorder that causes a persistent feeling of sadness and loss of interest

- Symptoms can vary:
  - Sadness
  - Emptiness
  - Irritability
  - Loss of interest
  - Sleep disturbances
  - Tiredness
  - Reduced appetite

https://www.mayoclinic.org/diseases-conditions/depression/symptoms-causes/syc-20356007

Heart disease and depression

- Depression is reported in over 7% of Americans ages 18 and older
- This can be as high as 20% for post-heart attack patients.
- People with depression or who are recovering from a heart attack have a lower chance of recovery and a higher risk of death than people without depression.

https://www.hopkinsmedicine.org/health/conditions-and-diseases/depression-and-heart-disease

Heart disease and stress and anxiety

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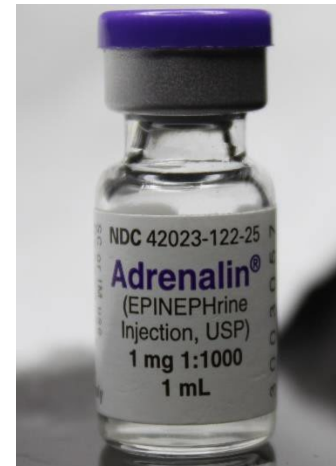
- Stressful situations
- Body releases adrenaline
- Chronic stress



What can I do to help my depression, stress or anxiety?

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- Identify the cause of your depression, stress or anxiety and address it
- Engage in healthy lifestyle behaviors
  - Eating healthy
  - Being physically active
  - Getting adequate sleep

- Incorporate healthy lifestyle changes one at a time

https://www.heart.org/en/healthy-living/healthy-lifestyle/mental-health-and-wellbeing/how-does-depression-affect-the-heart

Improve mental health to improve heart health

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- Exercise regularly (aerobic)
- Make time for friends and family
- Get enough sleep
- Maintain a positive attitude
- Practice relaxation/meditation
- Find a stimulating hobby

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Prevention - Life's Essential 8

- Key measures for improving and maintaining cardiovascular health, as defined by the American Heart Association.
- Better cardiovascular health helps lower the risk for heart disease, stroke and other major health problems.

https://www.heart.org/en/healthy-living/healthy-lifestyle/lifes-essential-8

Life’s Essential 8 to improve heart health

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- Eat better
- Be more active
- Quit tobacco
- Get healthy sleep
- Manage weight
- Control cholesterol
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Prevention - Medical

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- Annual visit to PCP
  - Vital signs
  - Medical and family history
  - Depression screening
  - Medications
  - Blood work
    - Cholesterol panel
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    - Medication adherence

In summary…

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- Heart disease prevalence in the United States
- Connection between mental health and heart health
- Lifestyle changes and medical treatment can help prevent heart disease

Questions?

Thank you!
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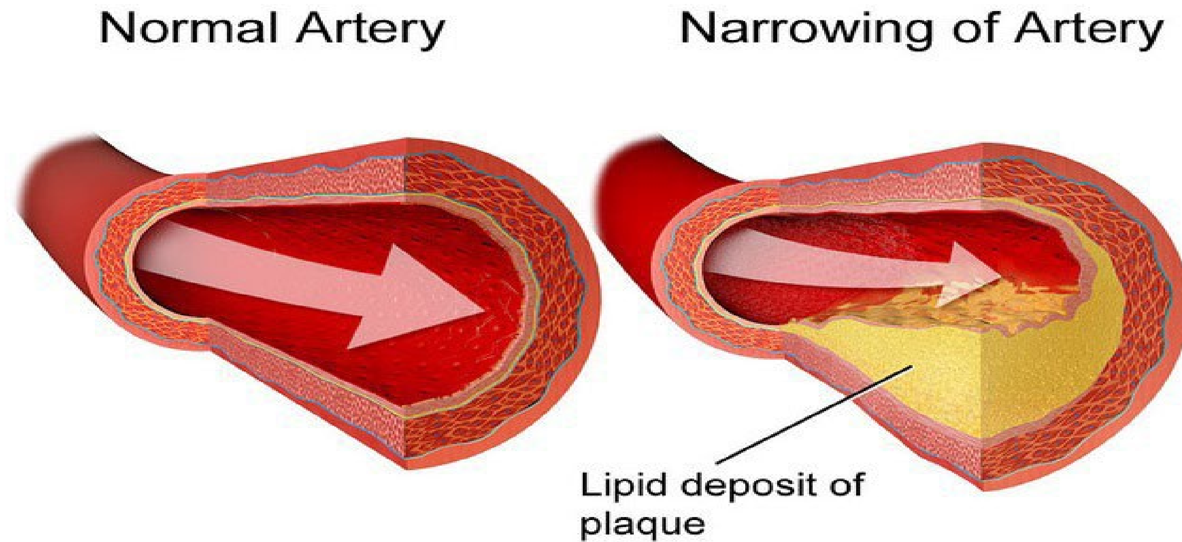

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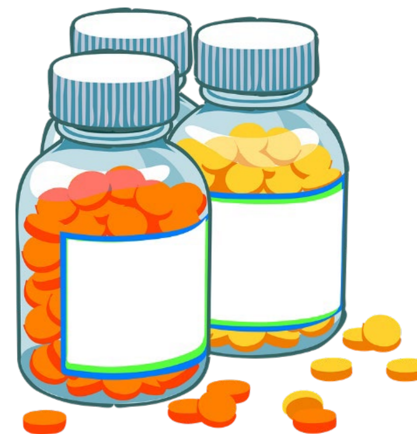

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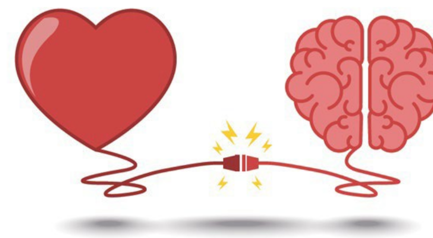

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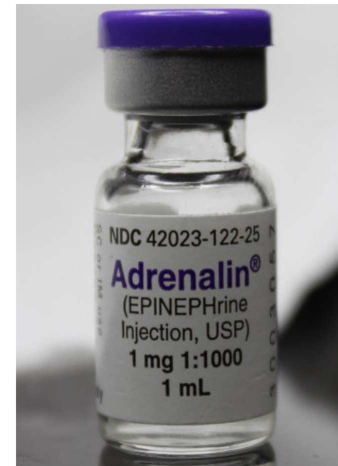

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Gail Daumit, gdaumit@jhmi.edu

What You Need to Know About Out-of-Network Providers and Appeals

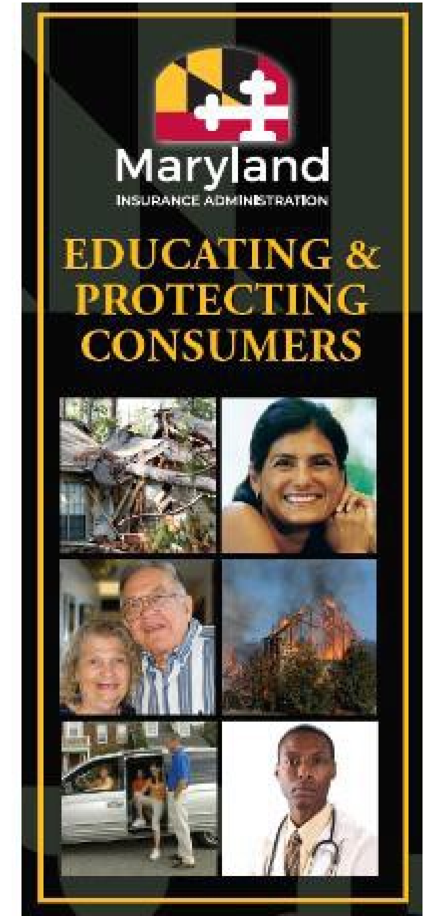
Consumer Education and Advocacy Unit
patricia.dorn@maryland.gov

This presentation does not provide legal advice. You should discuss specific questions with your trusted financial advisor or insurance producer.

What is the Maryland Insurance Administration

The Maryland Insurance Administration (MIA) is the state agency that regulates insurance in Maryland. The MIA:

- Licenses insurers and insurance producers (agents or brokers).
- Examines the business practices of licensees to ensure compliance.
- Monitors solvency of insurers.
- Reviews/approves insurance policy forms. Reviews insurance rates to ensure rates are not inadequate, excessive or unfairly discriminatory.
- Investigates consumer and provider complaints and allegations of fraud.



Video: How the MIA can help

In-Network vs. Out-of-Network

Your health insurer has contracts to pay set amounts for services with certain health care providers, called a *Provider Network*. Provider Networks are made up of service providers – doctors, hospitals, and other healthcare professionals who have a contract with your health insurer.

These providers are known as *In-Network Providers*. When you use in-network providers, you generally need to pay only your deductible and any applicable copay or coinsurance. You will not be billed for the balance by the provider.

An *Out-of-Network Provider* is a provider who does not have a contract with your insurer.

In-Network vs. Out-of-Network

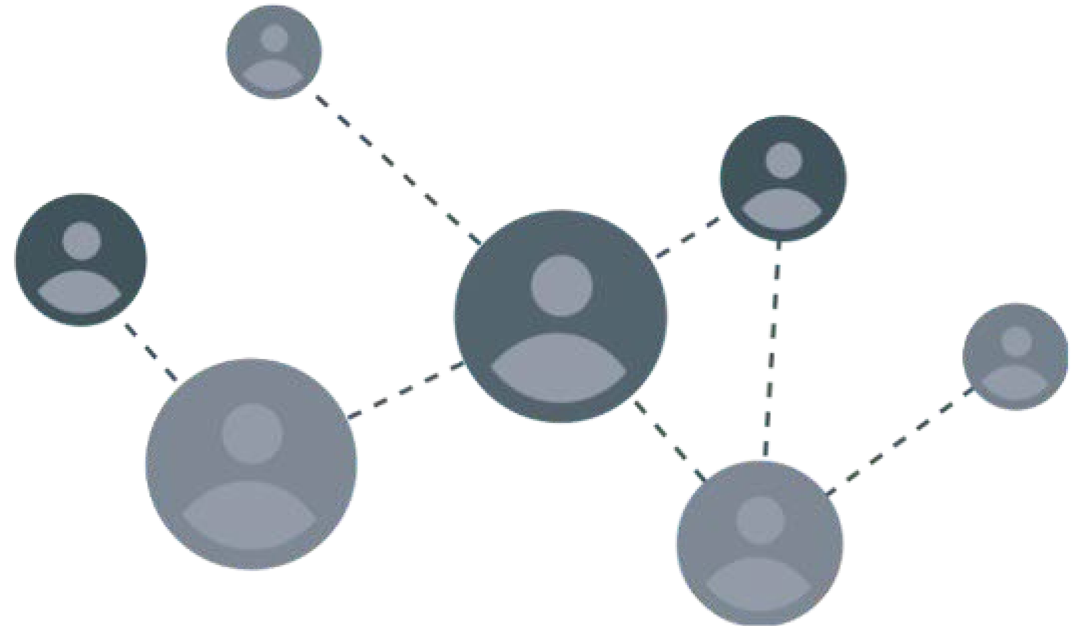
Sometimes, you may not be able to get the health care that you need from a provider who is in your insurance company's network.

In-Network vs. Out-of-Network

If the in-network provider is unreasonably far away, or does not have an appointment for an unreasonably long time, or is not able to treat your condition, you have options.

In-Network vs. Out-of-Network

If these conditions are met, you may be able to see a provider that is out-of-network.



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In-Network vs. Out-of-Network

If the conditions are met and your insurer approves the request to see an out-of-network provider, your claims will be processed based on your in-network deductible, coinsurance, or copayment.

In-Network vs. Out-of-Network

If you do not receive approval, charges for covered services from an out-of-network provider may not be paid by your insurer, or your copay or co-insurance may be larger than if the services had been provided by an in-network provider.

In-Network vs. Out-of-Network

If your health plan does not cover out-of-network providers at all, such as an HMO, you will be responsible for the entire cost of services in most cases.

Before you visit an out-of-network provider, make sure you understand what you will need to pay.

Contact the provider and talk to you health insurer.

In-Network vs. Out-of-Network

Under Maryland law, your insurance company must approve treatment from an out-of-network provider if:

You are diagnosed with a condition or disease that requires specialized health care services or medical care; **and**

1. there is no in-network provider with the professional training and expertise to treat or provide health care services for the condition or disease; **or**
2. your insurance company cannot provide reasonable access to an in-network provider with the professional training and expertise to treat or provide health care services for the condition or disease without unreasonable delay or travel.

In-Network vs. Out-of-Network: Balance Billing

When an out-of-network provider bills you for the difference between their charge and the total amount your insurance company has to pay, this is called "balance billing."

So it's important to keep in mind you may experience balance billing when you go out-of-network for a provider.

In-Network vs. Out-of-Network: Balance Billing

Balance billing can happen when a patient receives covered health care services from an out-of-network provider or an out-of-network facility (a hospital, for example).

In-network providers agree with an insurance company to accept the insurance payment in full, and don't balance bill. Out-of-network providers don't have this same agreement with insurers.

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In-Network vs. Out-of-Network: Balance Billing

However, if you are approved to see an out-of-network specialist for **mental health or substance use disorder services**, your health plan must pay the costs of the out-of-network specialist's services.

IMPORTANT

In-Network vs. Out-of-Network: Balance Billing

Your health plan must ensure that the approved out-of-network services cost you no more than you would have paid if you received the services from a provider on the plan's provider panel. **This means there will be no balanced bill.**

You will still be responsible for your in-network cost-sharing amount (deductible, copay, coinsurance).

How to Obtain Pre-Authorization to See an Out-of-Network Provider

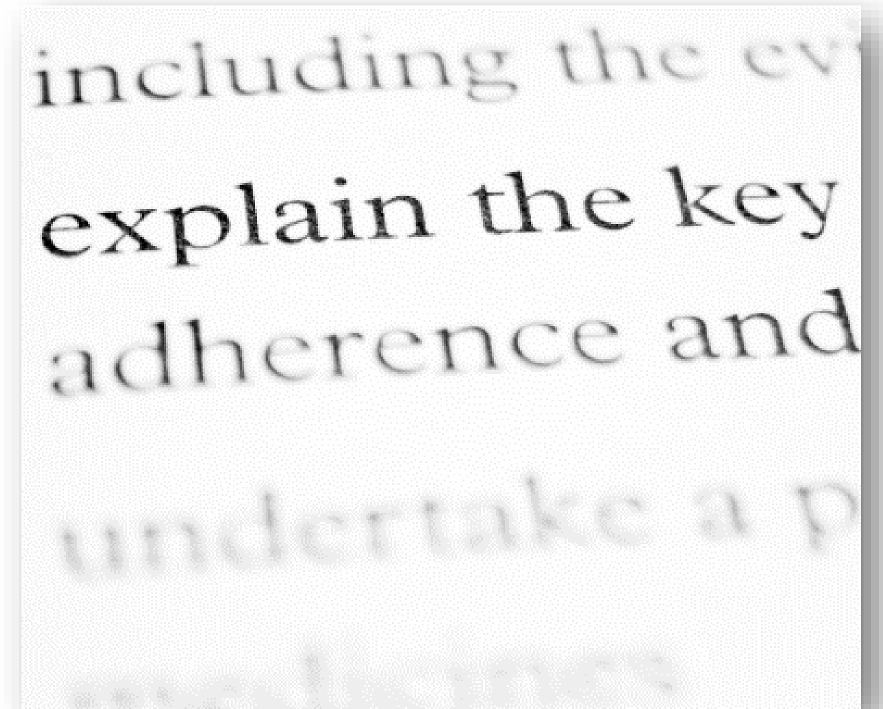
To start the process of obtaining authorization for a visit to an out-of-network provider for services, you will generally call the number on the back of the patient's health insurance ID card first. There may be a separate number listed for Mental Health or Substance Use Disorder (MH/SUD) services.

How to Obtain Pre-Authorization to See an Out-of-Network Provider

The insurance company will ask what facility or provider you would like to use for the patient and/or what treatment is required. The insurance company will tell you what documents they need in order to make a determination about coverage.

How to Obtain Pre-Authorization to See an Out-of-Network Provider

As a part of the request for out-of-network services, you may need to explain why the providers who are in-network are not adequate to provide you with the services that are medically necessary for your treatment.



How to Obtain Pre-Authorization to See an Out-of-Network Provider

In most cases, office staff working for your insurer will research the request, confirming availability (or lack of) in-network providers, and travel distances when necessary.

Clinical staff will review requests for medical necessity.

How to Obtain Pre-Authorization to See an Out-of-Network Provider

Your health plan must decide on your request in a timely manner, usually no more than 2 working days after the plan receives the information necessary to decide.

How to Obtain Pre-Authorization to See an Out-of-Network Provider

If a patient is in imminent danger to self or others, and the determination is made by the patient’s physician or psychologist and a member of the medical staff of the facility who has admitting privileges, then a health insurance company cannot deny the **first 24 hours** of an admission based on medical necessity. Notify the insurer as soon as possible.

How to Obtain Pre-Authorization to See an Out-of-Network Provider

For an emergency inpatient admission for treatment of a mental illness, emotional health disorder, or substance use disorder, the insurance company must make a decision on whether to pre-authorize the treatment within **2 hours** of receiving the requested documents.

How to Obtain Pre-Authorization to See an Out-of-Network Provider

The process to request authorization to receive services from an out-of-network provider may vary slightly between commercial health insurance carriers.

You must use the company process.

Out-of-Network Information on the Maryland Insurance Administration Website

The contact information and process for requesting an out-of-network provider from approved health insurance carriers in Maryland is now available on our website at:

https://insurance.maryland.gov/Consumer/Pages/Commercial-Carrier-Process-to-Request-a-Referral-to-a-Specialist-or-Non-Physician-Specialist.aspx

Or

https://bit.ly/miaccp

What to do if your Request to go Out-of-Network is Denied?

Each carrier has specific instructions, which can be accessed on our website. In general:

Your insurer may be able to resolve your issue without filing a formal grievance. Follow the directions for your specific insurer, which will likely direct you to call the number on the back to discuss the situation with a representative and determine if you should move on to the grievance process.

What to do if your Request to go Out-of-Network is Denied?

You will be asked to complete a form and/or send an appeal letter with supporting documentation. You may have **180 days**, but this will vary between insurers.

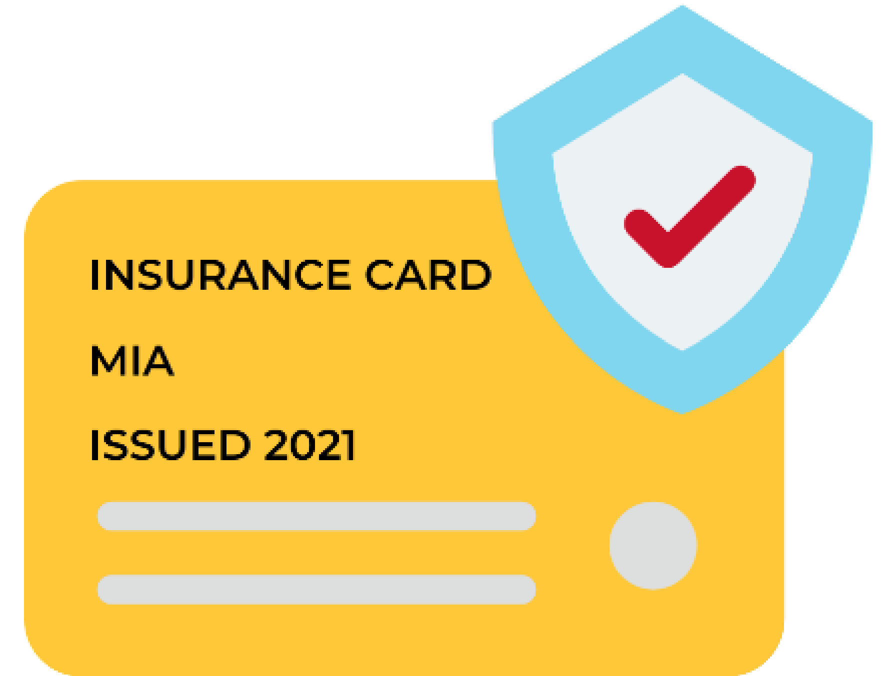
What to do if your Request to go Out-of-Network is Denied?

If the insurance company denies your request in the grievance process, you may call the Maryland Insurance Administration (MIA) at **1-800-492-6116** to file a complaint.

The MIA is available 24 hours a day for complaints in emergencies when care has not yet been rendered. In an emergency, the MIA will make a decision within 24 hours.

What to do if your Request to go Out-of-Network is Denied?

If you have a health plan ID card issued in 2021 or later, and it says "MIA", then the MIA can review your complaint.



Types of Complaints the MIA Cannot Review

The MIA cannot address complaints or inquiries involving insurance contracts which are not regulated by the state of Maryland. This includes the following:

- Self-funded or self-insured plans
- Medical Assistance (Medicaid)
- Medicare and Medicare HMO's
- Federal Employee Health Benefit Programs
- Uniformed Services Family Health Plans
- Contracts issued and delivered to the policyholder in another state.

What to do if your Request to go Out-of-Network is Denied?

If the MIA does not regulate the health insurance plan, your complaint will be sent to the agency that does regulate the plan.   An insurance company is not allowed to retaliate against you for filing an appeal of a denial with the insurance company or a complaint with the MIA.

What to do if your Request to go Out-of-Network is Denied?

The Health Education and Advocacy Unit of the Office of the Attorney General of Maryland can assist with filing an appeal or complaint.

They can be reached at 410-528-1840 (in Baltimore) or 1-877-261-8807.

What to do if your Request to go Out-of-network is Denied?

If you are not getting the assistance you need fast enough, the **Maryland Insurance Administration** can help you.

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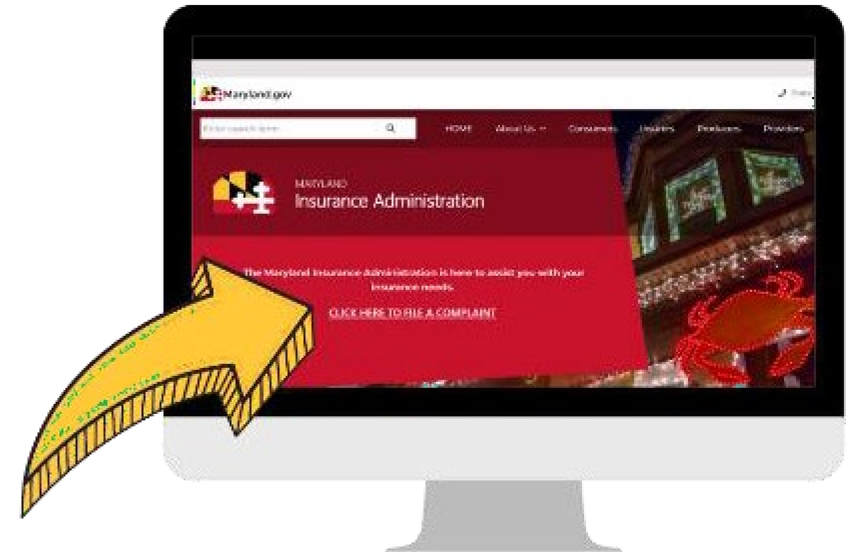
Or file a complaint at insurance.maryland.gov



No Surprises Act

Starting in 2022, a new law went into effect – the federal No Surprises Act – that protects you from many types of surprise bills.

So what is surprise billing?

Surprise billing happens when a patient receives an unexpected balance bill after they receive care from an out-of-network provider or at an out-of-network facility, such as a hospital. It can happen for both emergency and non-emergency care. Typically, patients don't know the provider or facility is out-of-network until they receive the bill.

Some states, including Maryland, have laws or regulations that protect patients against surprise billing. However, state laws generally don't apply to self-insured health plans, and most people who get coverage through an employer are in self-insured health plans. Now, a new federal law protects consumers in self-insured health plans as well as consumers in states that don't have their own protections.

No Surprises Act

What protections are in place?

The new federal law, the No Surprises Act, protects you from:

- Surprise bills for covered emergency out-of-network services, including air ambulance services (but not ground ambulance services), and
- Surprise bills for covered non-emergency services at an in-network facility.

It also gives you the right to receive a good faith estimate of costs if you are uninsured or a self-pay patient of an out-of-network provider.

For more information: Federal No Surprises Act
https://insurance.maryland.gov/Consumer/Pages/Federal-No-Surprises-Act.aspx
https://www.cms.gov/nosurprises

Health Appeal Process

If your health care provider tells you that a certain service or medication is needed, but your health insurance carrier or HMO disagrees, you have the right to appeal that decision.

Denials may include:

- **A claim denial.** This is where your carrier or HMO has denied payment for a service or medication that was provided.
- **An authorization denial.** This is when a medication or treatment requires a referral or prior authorization from your provider, but this authorization has been denied by your insurance carrier or HMO.

Health Appeal Process

In addition, you can appeal if:

- You were approved for a lower level of care than you asked for; or
- You believe the in-network or approved provider is too far away or the wait is too long; or
- You received an approval for fewer visits than your provider thinks you need.

You are entitled to a written denial unless you or your provider agrees to an alternative care plan.

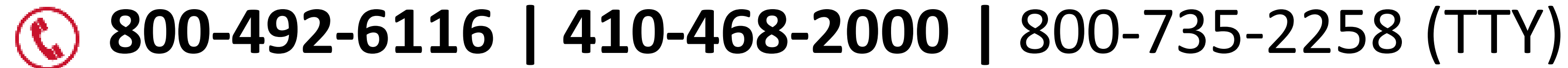
Health Appeal Process

The written denial will explain how to file an internal appeal to your health insurance carrier or HMO, as well as how to file a complaint with the Maryland Insurance Administration.

If you have any questions about filing a health insurance or HMO complaint, or you have a denial of benefit that involved an emergency case, please reach out to the Maryland Insurance Administration at 1-800-492-6116.

Contact Information

Maryland Insurance Administration



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Questions?