

Aetna Better Health® of Pennsylvania

Aetna Better Health® Kids

Provider Newsletter

FALL/WINTER 2018



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Provider Relations Email Communications

It is important that you stay up to date with all that's going on with Aetna Better Health. To help with that we will soon be launching a new provider email communications platform to help keep you in the loop about changes that affect your practice.

We will be emailing you updates when timely communication is necessary. So, be looking for Provider Relations updates about DHS notices, Network updates, Quality HEDIS guidance, Case Management or Utilization Management changes and more in your inbox soon.

Also coming soon is an easy way for providers to sign up for Provider Relations email communications on our website at aetnabetterhealth.com/pa. Until then, you can have your PR Rep add your name and email to our email list.

aetna®





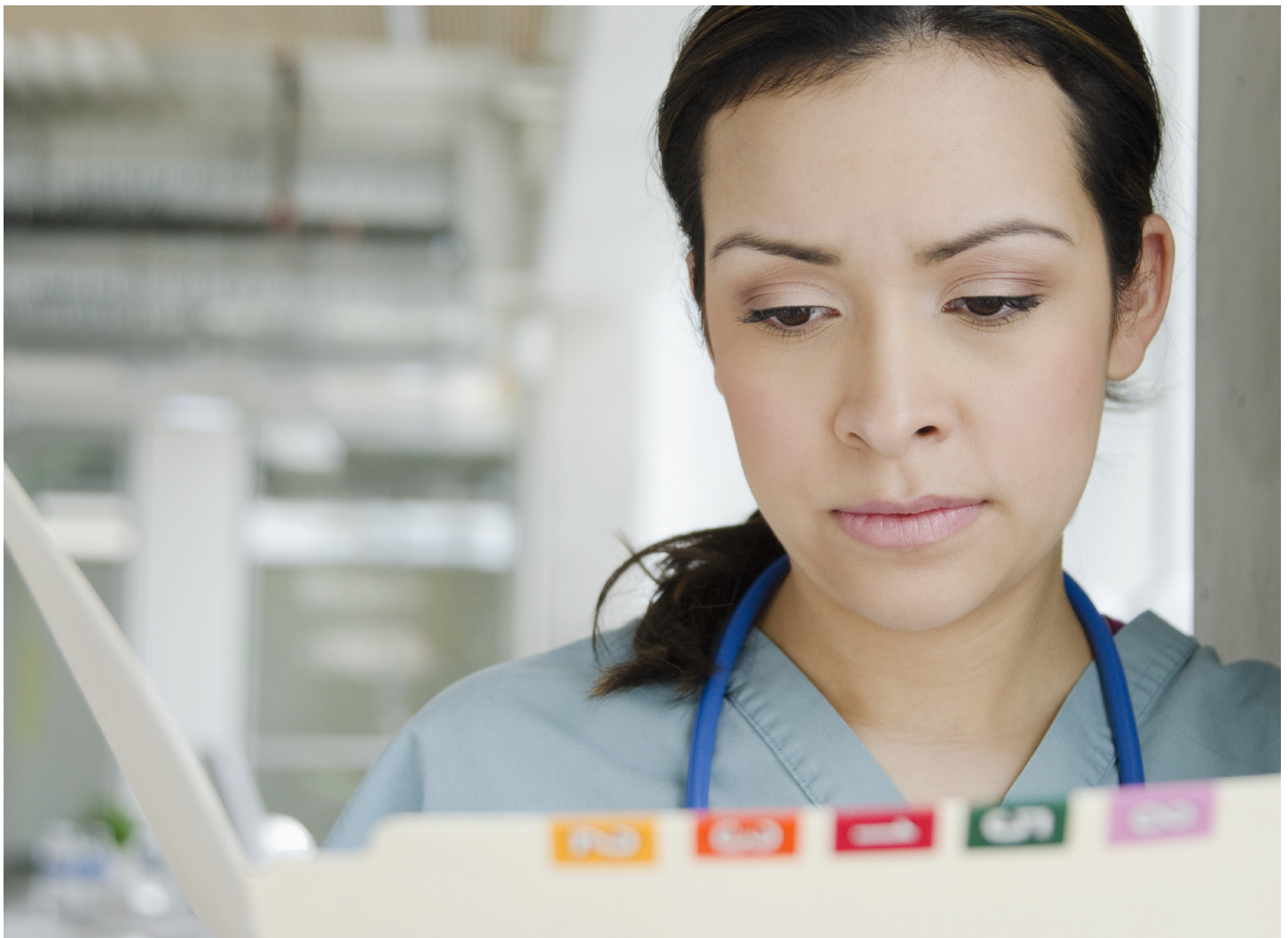
SKYGEN USA to Become Aetna Dental Benefits Manager (DBM)

Welcome SKYGEN USA

There will soon be a new DBM for Aetna Better Health Kids and Aetna Better Health of Pennsylvania. Effective December 1, 2018 for Aetna Better Health Kids (CHIP) and January 1, 2019 for Aetna Better Health of Pennsylvania (Medicaid), SKYGEN USA will administer our dental member benefits. You can reach SKYGEN USA by calling Provider Relations at 1-800-508-4892.

Dental benefit update that will have a significant impact on overall physical health.

Starting January 1, 2019 all hygiene services for periodontal disease will be a covered benefit for Aetna Better Health of Pennsylvania members of all ages. See the article below to learn more about periodontal disease and remember that a dental checkup and cleaning can improve HEDIS rates!





Periodontal Disease and Link to Poor Overall Physical Health

Oral health is not just about the teeth, but the health of the whole mouth and even the body. Aetna Better Health of Pennsylvania knows having a great smile, can even affect confidence and we want all of our members to have a great and healthy smile.

This is why Aetna Better Health will now cover ALL levels of dental cleanings (including deep cleanings and more) for ALL members of ALL ages starting January 1st, 2019!

It is well documented that certain systemic illnesses, such as diabetes, contribute to poor oral health. In recent years, there has been countless credible research on the reverse effects of periodontal disease on physical health. We now know that cardiovascular conditions, endocrine system (e.g. diabetes) and immune disorders are adversely affected by chronic and untreated periodontal disease.

The Disease

Periodontal disease is the chronic infection of the structures surrounding the dentition; the bone, the gingiva, as well as the ligaments that support the teeth within the bone. It starts out from the formation of the biofilm on dentition that includes *S. Mutans* and other anaerobes and if not removed through routine hygiene practices, advances into the mentioned anatomy as gram-negative anaerobic bacteria.

Dr. Mana Mozaffarian, Dental Director at Aetna Better Health of Pennsylvania states: "The production of the endotoxins from the oral bacteria and the body's inflammatory response to combat it, will destroy the periodontal structures. The inflammatory response does not remain localized to the oral cavity and hence advances other physical conditions and diseases."

A group of patients this disease effects significantly is pregnant women. Periodontal infection and the body's immune response can result in high levels of byproducts that can rupture the uterine membrane and cause premature birth, just as other infections in the body can.

Periodontal health and disease is becoming one of the most researched areas in oral health. The researchers will continue to discover in what other ways oral health can affect physical health as well as new and innovative ways to prevent and treat periodontal conditions.

The Treatment

Currently the main form of periodontal disease treatment starts with different levels of a dental cleaning by a dental provider. Depending on the significance of the bacteria buildup and the advancement of the diseases, different levels of a cleaning are recommended to stop the progression. Starting January 1, 2019, Aetna Better Health will cover all the different types of cleaning as recognized by the American Dental Association (without the need for BLEs), including scaling and root planning (deep cleanings).



HEDIS Webinar Series

You're invited to attend our free HEDIS webinar series.

The goal of the series is to:

- Educate about HEDIS measure specifics
- Explore ways to reduce the burden of medical record review and maximize administrative data capture
- Present NCQA HEDIS reporting codes that will help effectively capture care provided
- Discuss HEDIS measures applicable to certain populations
- Encourage open discussion to learn how other providers are addressing HEDIS and barriers to care
- Strategies for improvement
- Connect you with a single point of contact at the health plan for HEDIS/ Quality questions

Be sure to check your inbox for monthly invites and class registration information.

Please cascade this information to other staff that may benefit from these free webinars.



Please email Madison (MRyonlisky@aetna.com) to be added to the invite list.



2018 Past HEDIS® Webinar Series Videos

You can watch the January – June 2018 webinars to learn how you can improve HEDIS rates and member health outcomes:

<https://www.aetnabetterhealth.com/what/videos>

If one of your staff or colleagues wishes to be added to the upcoming webinar invite list please email Madison - MRyonlisky@aetna.com Include in your email to Madison the email address of the person wishing to be added to the invite list. She will email the meeting link.



Schedule

January 2019

The early stages of the life cycle
– EPSDT and HEDIS, 0-11 year old members

February 2019

The teenage years up to age 21
– HEDIS measures, and a focus on maximizing administrative data capture

March 2019

An in depth look at Aetna's 21 and older male and female membership

April 2019

HEDIS measures with a focus on women and Maternity care

May 2019

Caring for members with serious mental illness or serious emotional disturbance

June 2019

Takeaways from the 2018 HEDIS medical record review

July 2019

Coding specific topic: Closing HEDIS gaps administratively cuts down on medical record review

August 2019

Back to school physicals and HEDIS measures for children under 11 years of age and EPSDT

September 2019

Back to school physicals – HEDIS measures affecting 12-21 year old members

October 2019

HEDIS measures affecting 21 and older male and female members

November 2019

HEDIS measures with a focus on women and maternity care

December 2019

Reducing the burden of medical record review preparation for HEDIS 2020



Smoking Cessation Aids – Which is right for your patient?

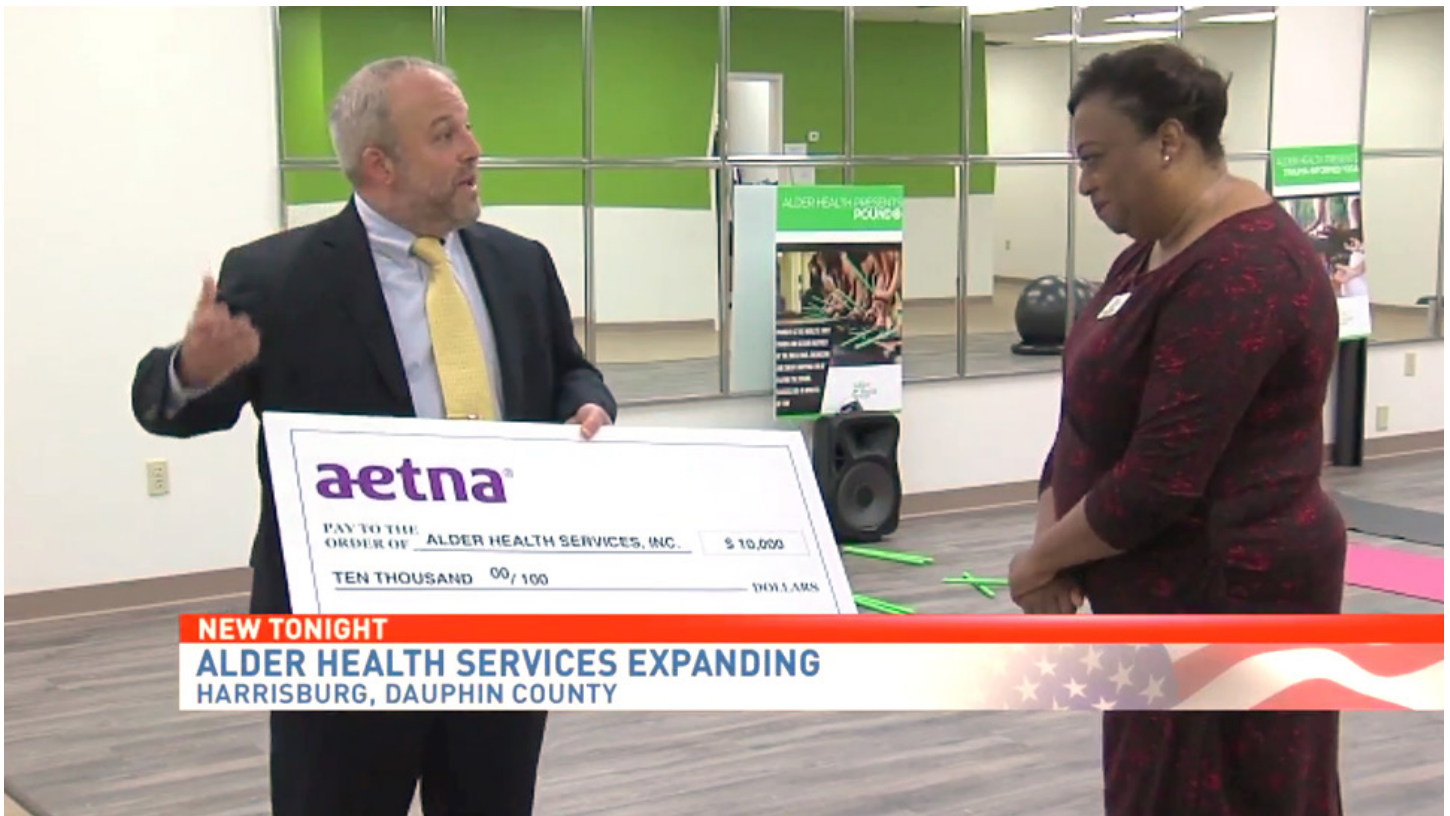
Effectiveness and abstinence rates for various medications and medication combinations compared with placebo at 6 months post quit (n = 83 studies)

Medication	Number of Arms	Estimated Odds Ratio (95% CI)	Estimated Abstinence Rate (95% CI)
Placebo	80	1.0	13.8
Monotherapies			
Varenicline (2 mg/d)	5	3.1 (2.5-3.8)	33.2 (28.9-37.8)
Nicotine nasal spray	4	2.3 (1.7-3.0)	26.7 (21.5-32.7)
High-dose nicotine patch (>25 mg) (these included standard or long-term duration)	4	2.3 (1.7-3.0)	26.5 (21.3-32.5)
Long-term nicotine gum (>14 wk)	6	2.2 (1.5-3.2)	26.1 (19.7-33.6)
Varenicline (1 mg/d)	3	2.1 (1.5-3.0)	25.4 (19.6-32.2)
Nicotine inhaler	6	2.1 (1.5-2.9)	24.8 (19.1-31.6)
Clonidine	3	2.1 (1.2-3.7)	25.0 (15.7-37.3)
Bupropion SR	26	2.0 (1.8-2.2)	24.2 (22.2-26.4)
Nicotine patch (6-14 wk)	32	1.9 (1.7-2.2)	23.4 (21.4-25.8)
Long-term nicotine patch (>14 wk)	10	1.9 (1.7-2.3)	23.7 (21.0-26.6)
Nortriptyline	5	1.8 (1.3-2.6)	22.5 (16.8-29.4)
Nicotine gum (6-14 wk)	15	1.5 (1.2-1.7)	19.0 (16.5-21.9)
Combination therapies			
Patch (long-term; > 14 wk) + ad libitum NRT (gum or spray)	3	3.6 (2.5-5.2)	36.5 (28.6-45.3)
Patch + bupropion SR	3	2.5 (1.9-3.4)	28.9 (23.5-35.1)
Patch + nortriptyline	2	2.3 (1.3-4.2)	27.3 (17.2-40.4)
Patch + inhaler	2	2.2 (1.3-3.6)	25.8 (17.4-36.5)
Patch + second generation antidepressants (paroxetine, venlafaxine)	3	2.0 (1.2-3.4)	24.3 (16.1-35.0)

Adapted from Fiore MC, Jaén CR, Baker TB, et al. Treating tobacco use and dependence: 2008 update. Clinical practice guideline, Rockville (MD): US Department of Health and Human Services, Public Health Service; 2008. p 109.

People who quit cold turkey and without medication, NRT or counseling are least likely to sustain abstinence¹.

¹ Sean McCormick, PHD, MS, CTIS-M



Mike Paduano, CFO, Aetna Better Health of Pennsylvania presents a \$10,000 check to Rosemary Browne, Alder Health Services President & CEO

Aetna Better Health of Pennsylvania Donates \$10K to LGBTQ Wellness Center

Alder Health Services, a Harrisburg health clinic with a focus on the LGBTQ community, is expanding their services, thanks to a \$10,000 grant from Aetna Better Health of Pennsylvania and the volunteering efforts of Aetna employees.

The two organizations are teaming up to add a wellness center at Alder. The center will offer activities such as fitness classes and yoga. It's the first and only LGBTQ wellness center in Central PA.

"It is very important to have a place where people feel that they can come be their true selves in a non-judgmental kind of atmosphere," said Rosemary Browne, Alder Health Services President & CEO.

"The new wellness center will help address the some of the social determinants of health issues that are affecting members of the LGBTQ community in our region," said Jason Rottman, Aetna Better Health CEO. "Being able to provide safe access to exercise is highly important to our members' overall wellness goals.

The health plan celebrated the check presentation on National Coming out Day and the event included a Proclamation from Governor Wolf on LGBT Awareness Month for October.



2018 Provider Pay for Quality (P4Q) Program

Aetna Better Health® of Pennsylvania values our provider network and wishes to acknowledge their dedication our Medicaid members through our 2018 Pay-for-Quality (P4Q) Program. Participating Primary Care Providers (PCPs) and ObGyns in Pennsylvania who performed recommended services for key HEDIS® measures in 2018 could be eligible for the program incentives.

Our goal is to reward our valued providers for complete coding, excellent care, and quality metrics!

How does the program work?

- Care you provide to members that is submitted on claims will close care gaps for the and may count towards the P4P program (see below grid)
 - Medical record submissions will not count towards P4Q gap closures and incentive payments
- The program measurement year is the 2018 calendar year for dates of service January 1 - December 31, 2018.
- Maternity measures include care of members with deliveries from November 6, 2017 – November 5, 2018.
- Panel requirements vary by measure.
- Incentive payments roll up to the Tax ID level

Where can you find who has a care gap?

- Utilize the Provider Report Management Tool where you can access monthly reports that show which of your patients has a care gap and review your year-to-date quality metrics and progress toward HEDIS® benchmarks.
 - Access this tool on the [secure web portal](#)
- Partner with your Quality Practice Liaison – this is an Aetna Better Health Quality Management staff member that is dedicated to your office. They can help you achieve P4Q incentives by:
 - Providing P4Q gaps in care reports
 - Performing onsite education on the program at least quarterly
 - Conduct medical record reviews to determine missed opportunities and areas for improvement
 - Serve as your primary point of contact for the P4Q Program

Provider and health plan partnerships will close care gaps, enrich care delivery, improve data capture, and engage membership. This results in improved quality scores and healthier member outcomes.

What does the program entail?

There are measures with quarterly incentives payments in 2018 and measures with an annual incentive to occur in 2019 after the completion of calendar year 2018. You still have time to outreach to members and provide care that meets the below requirements.

Aetna Better Health Member Rewards Program

Measure	Panel Requirements	Required Service	Incentive Amount
Adolescent Well-Care Visits	50 or more members	One well care visit in 2018	\$25 per member
Well Child in the First 15 Months of Life – 6 or More Visits	50 or more members	6 or more well care visits by age 15 months (visits will occur in 2017 & 2018)	\$50 per member
Well Child Visits in the 3rd, 4th, 5th, and 6th Years of Life	50 or more members	One well care visit in 2018	\$25 per member
Dental – Fluoride Varnish Application	No panel requirements	One appropriate application of fluoride varnish (members between the ages 0-5)	\$10 per member
Frequency of Ongoing Prenatal Care: > 81% of Expected Visits	No panel requirements – payment goes to provider managing the pregnancy	Completes 81% of the recommended prenatal visits	\$100 per member
Prenatal Care in the First Trimester	No panel requirements – payment goes to provider managing the pregnancy	Completes a prenatal visit during the first trimester or within 42 days of enrollment in to the plan	\$100 per member
Postpartum Care	No panel requirements – payment goes to provider managing the pregnancy	Completes one postpartum visit 21-56 days post delivery	\$150 per member

Measures with 2019 payout after completion of calendar year 2018

Measure	Panel Requirements	Required Service	Incentive Amount
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>=9%)	50 or more members	Last HbA1c test in 2018 is <9.0	\$50 per member
Controlling High Blood Pressure (ages 18-85)	50 or more members	Last BP in 2018 is <140/90 mm Hg	\$25 per member
Medication Management for People with Asthma 75%	50 or more members	Members must remain on their asthma medications for 75% of the treatment period	\$20 per member
Emergency Room (ER) Utilization	200 or more members	Members who utilize the Emergency Room for ambulatory care services that do not result in an inpatient admission- providers do not want a high utilization rate	\$1500 per TIN for reaching 62.67 visits/1000 member months \$2500 per TIN for reaching or exceeding 52.27 visits/1000 member months
Reducing Potentially Preventable Readmissions	Primary Care Provider Groups whose total assigned members have a combined minimum of 25 eligible admissions	Members who are readmitted to the hospital within 30 days of discharge- providers do not want a high readmission rate	\$1500 per TIN for a 30 day all cause readmission rate of 8.0% \$2500 per TIN for a 30 day all cause readmission rate of 7.0% or better
Electronic Submission of Data	PCPs in the Philadelphia, southeastern region of Pennsylvania	Providers must actively participate in the exchange of member specific data with HealthShare Exchange of Southeastern Pennsylvania	Providers will receive payment out of the shared pool of \$30,000 once upon confirmation that connection has been achieved and data exchange has occurred.

Payment for the P4Q program is dependent on the funding that the Pennsylvania Department of Human Services provides. Aetna Better Health reserves the right to end the P4Q program if funding becomes unavailable.

Provider Appeal Information

Providers may file an appeal with Aetna Better Health if the provider disputes the resolution of a claim denial or adjudication, or services were provided without the proper authorization.

Note: when submitting the initial prior authorization request, it's important to **submit all clinical information with the initial request**. Providing all clinical information up front will reduce denials related to prior authorization.

Tips for submitting provider appeals: State exactly what is being disputed and why the claim should be paid, contact person, contact phone number and mailing address of appeal requestor should be typed or clearly written. Include the claim number and date of service on the appeal.

Submit appeals in writing to Aetna Better Health by fax or mail within **60 days of the provider remittance date**.

Appeals Fax Number: 1-860-754-1757

Appeals Mailing Address: Aetna Better Health of Pennsylvania,
2000 Market Street, Ste 850, Philadelphia, PA 19103



Reminder: Changes to Complaints, Grievances and Appeals Process

Effective July 1, 2018, The Pennsylvania Department of Human Services (DHS) updated the Complaints, Grievances and Appeals process. This updated process is available in the new Aetna Better Health [Provider Manual](#).



Check Out Our Community Events Calendar

Our Community Outreach team spends time in communities across our state supporting many local events. We partner with groups that support our efforts of improving the health of our members and all Pennsylvanians.

You'll find our calendar of where we'll be on our website. Just go to aetnabetterhealth.com/pa and click on Events on the right side of the home page. We hope to see you soon!



Recent Provider Notices

Stay up to date with our recent provider notices.

Check our [NOTICES](#) page often to stay up to date with changes that may affect you.



Watch for information about changes to our Member Rewards Incentives program in early 2019!



Network Development Update

We are excited that our provider network continues to grow, providing even more health care choices for our members.

We are pleased to announce that The City Health Centers operated by the Philadelphia Department of Public Health have joined the Aetna Better Health of Pennsylvania and Aetna Better Health Kids provider network. This continued network expansion means more choices for our members in the heart of Philadelphia.



Utilization Management Decisions

Aetna Better Health's affirmative statement declares that our organization does not use employee incentives or disincentives to encourage barriers to care and service. Our Utilization Management process:

- Renders decisions based only on appropriateness of care and service and existence of coverage
- Does not specifically reward practitioners or other employees/individuals for issuing denials of coverage
- Financial incentives for utilization making decision makers do not encourage decisions that result in underutilization



Member Rights & Responsibilities

Aetna Better Health of Pennsylvania and Aetna Better Health Kids maintain policies and procedures that formally address a member's rights and responsibilities. The policies reflect federal and state laws as well as regulatory agency requirements. We annually inform our members of their rights and responsibilities in the member handbook, member newsletter and other mailings. They are also posted within the For Members section on our website at aetnabetterhealth.com/pennsylvania/members.

We ensure that members can exercise their rights without adversely affecting treatment by participating providers. Member rights and responsibilities are monitored through our quality management process for tracking grievances and appeals as well as through member surveys. Issues are reviewed by our Service Improvement Committee and reported to the Quality Management Oversight Committee. For additional information regarding member rights and responsibilities, visit our website or call your Provider Relations Representative at 1-866-638-1232.



Pharmacy Updates

Please refer to the provider website or provider manual for pharmacy information:

- A complete list of pharmaceuticals (formulary), monthly changes, limits and quotas
- How to use the pharmaceutical management procedures
- How to provide information for exception requests

Generic substitutions, therapeutic interchange and step-therapy protocols



Vaccines for Children (VFC) Flu Shot Supplies

Please be advised that you should NOT turn away MA beneficiaries for flu vaccination due to any shortage or late arrival of VFC stocks.

The Pennsylvania Department of Health (DOH) has confirmed that all of the state's supply of flu vaccine has shipped to all VFC providers, with the last shipment going out on 10/19.

If Aetna Better Health of Pennsylvania providers run out of their VFC flu supply and are required to use a flu dosage from their other available stock, providers should:

- Issue the vaccination from other available stock
- Bill Aetna Better Health for the vaccine by submitting a claim, along with appropriate documentation demonstrating lack of available VFC stock to:

Aetna Better Health of Pennsylvania
Attn: Appeals Department
2000 Market Street, Suite 850
Philadelphia, PA 19103

If you have any questions about VFC flu vaccines or billing, you can contact our Provider Relations Department by calling 1-866-638-1232.



Environmental Lead Investigations (ELI)

Lead screening requirements

Lead Screening is an important component of early childhood preventive care. Children from ages 9-11 months and 24 months should receive blood lead screenings. Providers are required to screen children between the ages of 36 and 72 months of age if they have not been previously screened for lead poisoning.

The CDC indicates that there is no safe level of lead in children; and advises that a provider offer education related to preventing lead exposure to families with young children. Providers should manage the condition of a child who is found to have an elevated Blood Lead Level (BLL) that is greater than or equal to 5 µg/dl. Management should include follow-up blood tests and consideration of possible sources of contamination including housing, food, and toys.

Ordering an ELI

For children identified with an elevated blood lead level, a provider should submit a request for an approved **Environmental Lead Investigator (ELI)** provider to conduct a comprehensive environmental lead investigation.

Comprehensive environmental lead investigation will include:

- Analysis by use of portable x-ray fluorescence analyzer on all painted surfaces,
- An interview with the family of the child to gather basic information about the habits of the child
- Written recommendations to the owner of the house/apartment for the immediate and permanent removal or reduction of the lead sources.

The ELI provider must be participating with Aetna Better Health of Pennsylvania and/or Aetna Better Health Kids. Only one ELI is authorized per household.

If an Environmental Lead Investigation (ELI) is needed, an ordering physician can just call our Utilization Management Department (UM) at 1-866-638-1232 to request an authorization and give you our network ELI provider information.



Did you miss an MAB?

If you missed a recent Medical Assistance Bulletin, just click [here](#).

Quick Reference Guide

Aetna Better Health of Pennsylvania			
Administrative Office	2000 Market Street, Suite 850 Philadelphia, PA 19103 1-866-638-1232	Claims Customer Service Contact (CICR)	1-866-638-1232
Pharmacy	CVS Caremark: 1-866-638-1232	Provider Relations / Contracting	1-866-638-1232
Eligibility Verification (by phone)	1-866-638-1232	Complaints & Grievances	1-866-638-1232
Claim Submission Address/Payor ID	Aetna Better Health PA P.O. Box 62198 Phoenix, AZ 85082-2198 Emdeon Payor ID: 23228	Appeals Address	Complaints Grievance and Appeals 2000 Market Street, Suite 850 Philadelphia, PA 19103
Prior Authorization Phone and Fax Numbers	P: 1-866-638-1232 Providers press *, and follow IVR prompts for appropriate service. F: 1-877 363-8120	Dental	SKYGEN USA 1-800-508-4892 www.skygenusa.com
Website	www.aetnabetterhealth.com/pa	Vision	Superior Vision: 800-507-3800 www.superiorvision.com/provider
Provider Web Portal	www.aetnabetterhealth.com/pennsylvania/providers/portal	Language Line Services	1-866-638-1232
Member Services	1-866-638-1232	Real Time support via Emdeon: Claim Inquiry & Response (276/277), Eligibility Inquiry & Response (270/271) and Health Service Review Inquiry & Response (278)	
Special Needs Unit	1-855-346-9828		
Pennsylvania Department of Human Resources			
Department of Human Services Helpline	1-800-692-7462	Provider Inquiry Hotline	1-800-537-8862 Option 4
Behavioral Health	1-800-433-4459	Pharmacy Hotline	1-800-558-4477 Option 1
OMAP - HealthChoices Program Complaint, Grievance, & Fair Hearings PO Box 2675 Harrisburg, PA 17105-2675	1-800-798-2339	MA Provider Enrollment Applications / Changes	1-800-537-8862 Option 1
Eligibility Verification System (EVS) – Phone	1-800-766-5387	Outpatient Providers Practitioner Unit	1-800-537-8862 Option 1
MA Provider Compliance Hotline	1-866-379-8477		

Pennsylvania County Services Referral Guide

Mental Health, Drug & Alcohol Services				Medical Assistance Transportation Program (MATP)			
Aetna Better Health recipients receive mental health, drug, and alcohol services through Behavioral Health (BH) Managed Care Organizations (MCO) in each county. Please refer to the list below to contact the office in the member's county.				Please refer recipients needing assistance with transportation to these local county offices. Recipients can use these numbers to obtain information on how to enroll in the MATP program.			
County		County	BH MCO /	County	Phone #	County	Phone #
Adams	CCBHO 866-738-9849	Lackawanna	CCBHO 866-668-4696	Adams	717-337-1345	Lackawanna	570-963-6482
Allegheny	CCBHO 800-553-7499	Lancaster	CBHNP 888-722-8646	Allegheny	412-350-6100	Lancaster	717-291-1243
Armstrong	VBHP 877-688-5969	Lawrence	VBHP 877-688-5975	Armstrong	724-548-3408	Lawrence	724-652-5588
Beaver	VBHP 877-688-5970	Lebanon	CBHNP 888-722-8646	Beaver	724-375-2895	Lebanon	717-273-9328
Bedford	CBHNP 866-773-7891	Lehigh	MBH 866-238-2311	Bedford	814-623-9129	Lehigh	610-253-8333
Berks	CCBHO 866-292-7886	Luzerne	CCBHO 866-668-4696	Berks	610-921-2361	Luzerne	570-288-8420
Blair	CCBHO 855-520-9715	Lycoming	CCBHO 855-520-9787	Blair	814-946-1235	Lycoming	570-323-7575
Bradford	CCBHO 866-878-6046	McKean	CCBHO 866-878-6046	Bradford	570-888-7330	McKean	866-282-4968
Bucks	MBH 877-769-9784	Mercer	VBHP 866-404-4561	Bucks	215-794-5554	Mercer	724-662-6222
Butler	VBHP 877-688-5971	Mifflin	CCBHO 866-878-6046	Butler	724-545-3669	Mifflin	717-242-2277
Cambria	VBHP 866-404-4562	Monroe	CCBHO 866-473-5862	Cambria	814-536-9031	Monroe	570-839-8210
Cameron	CCBHO 866-878-6046	Montgomery	MBH 877-769-9782	Cameron	866-282-4968	Montgomery	215-542-7433
Carbon	CCBHO 866-473-5862	Montour	CCBHO 866-878-6046	Carbon	570-669-6380	Montour	570-271-0833
Centre	CCBHO 866-878-6046	Northampton	MBH 866-238-2312	Centre	814-355-6807	Northampton	610-253-8333
Chester	CCBHO 866-622-4228	Northumberland	CCBHO 866-878-6046	Chester	610-594-3911	Northumberland	570-644-4463
Clarion	CCBHO 866-878-6046	Perry	CBHNP 888-722-8646	Clarion	814-226-7012	Perry	717-567-2490
Clearfield	CCBHO 866-878-6046	Pike	CCBHO 866-473-5862	Clearfield	814-765-1551	Pike	570-296-3408
Clinton	CCBHO 855-520-9787	Philadelphia	CCBHO 888-545-2600	Clinton	570-323-7575	Philadelphia	267-515-6400
Columbia	CCBHO 866-878-6046	Potter	CCBHO 866-878-6046	Columbia	570-784-8807	Potter	814-544-7315
Crawford	VBHP 866-404-4561	Schuylkill	CCBHO 866-878-6046	Crawford	814-333-7090	Schuylkill	570-628-1425
Cumberland	CBHNP 888-722-8646	Snyder	CCBHO 866-878-6046	Cumberland	717-240-6340	Snyder	570-522-1390
Dauphin	CBHNP 888-722-8646	Somerset	CBHNP 866-773-7891	Dauphin	717-232-7009	Somerset	814-445-9628
Delaware	MBH 888-207-2911	Sullivan	CCBHO 866-878-6046	Delaware	610-490-3960	Sullivan	570-888-7330
Elk	CCBHO 866-878-6046	Susquehanna	CCBHO 866-668-4696	Elk	866-282-4968	Susquehanna	570-278-6140
Erie	VBHP 855-224-1777	Tioga	CCBHO 866-878-6046	Erie	814-455-3330	Tioga	570-659-5330
Fayette	VBHP 877-688-5972	Union	CCBHO 866-878-6046	Fayette	724-628-7433	Union	570-522-1390
Forest	CCBHO 866-878-6046	Venango	VBHP 866-404-4561	Forest	814-927-8266	Venango	814-432-9767
Franklin	CBHNP 866-773-7917	Warren	CCBHO 866-878-6046	Franklin	717-264-5225	Warren	814-723-1874
Fulton	CBHNP 866-773-7917	Washington	VBHP 877-688-5976	Fulton	717-485-0931	Washington	724-223-8747
Greene	VBHP 877-688-5973	Wayne	CCBHO 866-878-6046	Greene	724-627-6778	Wayne	570-253-4280
Huntingdon	CCBHO 866-878-6046	Westmoreland	VBHP 877-688-5977	Huntingdon	814-641-6408	Westmoreland	724-832-2706
Indiana	VBHP 877-688-5969	Wyoming	CCBHO 866-668-4696	Indiana	724-463-3235	Wyoming	570-288-8420
Jefferson	CCBHO 866-878-6046	York	CCBHO 866-542-0299	Jefferson	814-938-3302	York	717-845-7553
Juniata	CCBHO 866-878-6046			Juniata	717-242-2277		