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Questions from Directors

I am struggling with a client who loudly challenges everything I say, everything my monitor does, and every rule we have. This has been going on for three months, and I am at my wit's end. No one wants to staff this case because it is so nasty and unpleasant. He has never threatened us, but other clients see how this father treats us, and I am afraid that his behavior may be rubbing off on them. He has substance abuse and mental illness issues. He always has to have the last word, so even if we gently correct him, he will say "We'll see about that." There is no one else involved in the case – no lawyer, no counselor, no case manager. We are all alone. I asked the judge to dismiss us from the case, but the judge (and the mother) practically begged us to stay involved. What should I do?

Thank goodness your judge understands that you have the ultimate discretion for what cases you can and can't take. And in my view, you have tried everything to make this client a partner in the visitation process. You've tried to demonstrate that you are partners in this process with the father. You have had individual meetings with him and have tried to emphasize the importance of mutual cooperation. The judge has tried to emphasize the importance of this parent behaving appropriately, and probably has no other resources to offer. My advice is to tough it out as long as you can. Separate this case as much as you can from other cases, so that you don't have the added burden of others watching (and learning from) this drama. Document everything. Don't lose your temper. If the behavior involves safety – like violating the staggered entrance and exit times, you may be forced to terminate individual visits. My guess is that this parent believes that he will get unsupervised visits if you close the case, and that's exactly what

he wants. Ask the judge to set clear goals and consequences for this client's privilege to use your program. Perhaps ask that the visits be reduced to a half hour or forty-five minutes, and can only be extended to the full visit if the father complies with your policies. Take it one visit at a time, after sitting down and discussing the plan with the father. And ask that the court order services that can address the underlying problems in the case, namely the father's substance abuse and mental illness issues. It sounds like assessments are missing in this case, and the problems won't be addressed by supervised visitation alone. But when you decide that you have to withdraw from the case, I won't second-guess you. It's your decision.

Questions about Clients and Policies?

Call the Clearinghouse at 850-644-6303

The following article is another in a series on dual diagnosis.

Dual-Diagnosis and Treatment – Considerations for Supervised Visitation

By Abby Novak

In the past, when service providers worked with individuals with a dual diagnosis, they treated each diagnosis separately, working with one disorder first and then the other. It soon became obvious this method of treatment wasn't working, as people with substance abuse problems were denied treatment for their mental health disorder because of their addiction; however, they could not receive treatment for substance abuse because of their mental health disorder. Additionally, some substance abuse treatment programs felt those with mental health disorders should stop taking all medicine including mental health prescriptions, as pills were pills and total detox was needed for rehabilitation.

New treatment methods

Because separate treatment wasn't working, counselors began exploring new treatment methods.

Parallel treatment, treating each diagnosis at



separate facilities at the same time, was thought to be a solution for dual-diagnosis services, however, the difference in treatment locations and methods made the process difficult for patients.

Integrated treatment

Integrated treatment is the most accepted method of treating individuals with dual-diagnoses.

Integrated treatment involves getting treated for mental health disorders and substance abuse at the same program, often by the same counselors (or counselors who work together to provide improved services). Though integrated service can be difficult, integrated models of treatment for dual-diagnosis are more successful than other treatment options.



Successful integrated treatment programs usually involve:

- Multidisciplinary treatment teams (psychologists, social workers, medical professionals, etc.)
- Interventions based on an individual's stage in treatment
- Access to Services (housing, employment assistance, food assistance, etc.)
- Service without time restrictions
- Assertive Outreach (i.e. rehabilitation counselors extend help without waiting to be asked)
- Motivational Interventions (improve and inspire)
- Substance Abuse Counseling
- Group Treatment
- Educating the family regarding the individual's mental health and substance abuse disorders
- Participation in Alcohol & Drug Self-Help Groups
- Pharmacological Treatment (medication for the mental health disorder)
- Interventions promoting healthy choices
- Secondary Interventions for continued treatment if needed

Variations by client

Treatment for a dual-diagnosis may look different than treatment for those with a substance abuse problem. Clients with a dual-diagnosis may go through treatments more slowly than

others; they may be dealing with their dual disorders and may not complete their treatment as quickly as individuals with one diagnosis.

As a visitation supervisor, you likely won't be designing dual-diagnosis treatment programs; however, you will certainly work with adults with dual-diagnoses and will likely supervise parents undergoing treatment for their dual-diagnosis. It is important to be respectful of their stage in treatment and the ways treatment may limit or impact visitations. Additionally, it is important to emphasize the positive impacts of treatment by recognizing progress the individual may have made. By providing positive reinforcement and understanding difficulties, you will be able to support positive visitation experiences.

For more information, please see the following:

<http://onlinelibrary.wiley.com/doi/10.1080/10550490500419060/pdf>

<http://muse.jhu.edu/journals/hpu/summary/v003/3.1.ries.html>

http://www.nami.org/Template.cfm?Section=By_Illness&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=54&ContentID=23049

http://www.nami.org/Content/ContentGroups/Hotline1/Dual_Diagnosis_-_Substance_Abuse_and_Mental_Illness.htm

<http://www.samhsa.gov/co-occurring/ddcat/index.html>

Holiday Arts and Craft Ideas for Supervised Visitation

**Make DIY (do it yourself)
post cards**

Materials:

- Empty cereal box
- Scissors
- Ruler

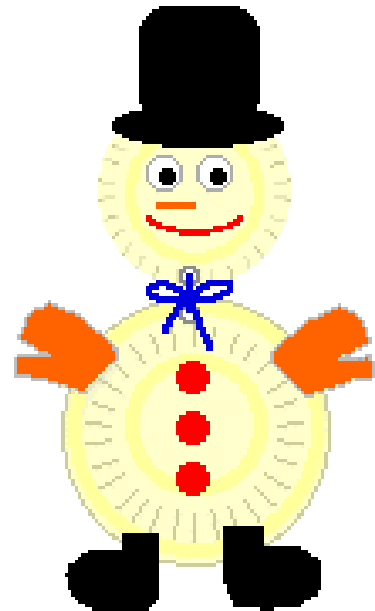


- Pen or pencil
 - Sharpie
1. Take an empty cereal box of your favorite cereal.
 2. Measure an index card sized rectangle for the postcard. Use scissors to cut out your post card
 3. Divide the post card in half, by measuring a line down the middle using your ruler. Use your sharpie to make lines on the right hand side of the post cards. Now you have post cards to write on!

Make a snowman from paper plates

Materials:

- 2 white paper plates
 - Construction paper (black, red) or wrapping paper
 - A short length of yarn or ribbon
 - Hole punch
 - Marker or crayons
 - Scissors
 - Fuzzy pipe cleaners
 - Glue
 - Optional: googly eyes, large buttons
1. On one of the paper plates, cut off the outer rim, making a smaller plate.
 2. Punch a hole near the rim on both plates.
 3. Tie the two plates together, using the yarn or ribbon.
 4. On black construction paper draw and then cut out a top hat and two boots. On colored construction paper draw and cut out two mittens.
 5. Glue the hat, boots, and mittens on the snow man.
 6. Either glue on googly eyes or draw eyes. Draw a mouth. For the nose, cut a short length from an orange pipe cleaner. Stick the pipe cleaner through the plate to secure it (if the plate is too tough, make a tiny hole with the tip of the scissors).
 7. For the buttons, you can cut out shapes from construction paper, use round stickers, glue on real buttons, or simply draw them.



Make a paper bag reindeer puppet

Materials:

- Paper bags
 - Deep red (or another color) construction paper
 - Glue
 - Scissors
 - Markers or crayons
 - Optional - googly eyes
1. Trace two hands on the deep red construction paper. Cut them out. These will be the reindeer's antlers.
 2. Fold the two square edges of a paper bag under to form the reindeer's head.
 3. You now have the shape of the reindeer's head for the puppet.
 4. Glue, tape, or staple the handprints behind the reindeer's head.
 5. Cut out eyes from construction paper (or glue on googly eyes). Using red paper, cut out and glue on a large red nose. Glue them to the reindeer's face. Draw a mouth with a marker or crayons.



Make star holiday cards

Materials:

- Construction paper
 - Orange and red foam sheets
 - Scissors
 - Glue
 - Pencil
1. Have your child fold one sheet of construction paper in half to create the base for the card.
 2. Have your child draw and cut out the base and lip for the pot from the foam sheets. Your child can glue them together to finish the pot and set it aside.
 3. Draw and cut out the outlines for stars of all sizes on different colored construction paper.
 4. Draw and cut out leaves from green construction paper.
 5. Finally, it's time to assemble all of the parts of the flower pot. Glue down a few of the leaves first, then



glue down the pot, the rest of the leaves and all of the stars to complete his or her star card.

6. Now you have a holiday card that you can give to family and friends.

Make homemade snow globes

Materials:

- small glass jar
- a plastic figurine
- glitter
- water
- glue (we used a hot glue gun, but superglue should work too)
- Optional: glycerin (while it's not necessary, it makes the glitter float better)

1. Decide what you would like to put in your snow globe.
2. Glue, place, and stick your plastic figurine to the inside of the jar lid.
3. Fill your jar with water and/or glycerin and add glitter—1-2 teaspoons.
4. Screw the lid on the jar — glue it if you're concerned about your child trying to open it.



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HOW TO MAKE BOOKS

Making books is a fun and creative way for parents to bond with their children and encourage learning. Creating books from scratch is a very rewarding keepsake that a child will cherish beyond childhood.



The subject could be about anything that the child likes or is interested in. Some ideas include anything that the child wants to learn more about or already know about. Some common themes are animals, dinosaur stories, princess stories, or a story about aliens. Other topics are shopping, the zoo or writing about school. Choose anything that is appropriate for the child's grade level.

The supplies you need include

- construction paper
- ribbon
- a hole punch
- writing utensils (pens, crayons, markers)

Follow these easy steps:

1. First, take paper and fold it in half. Have the child choose his/her favorite color.
2. Next, use a hole punch and punch three holes in it.
3. Then, tie each hole with ribbon, you can get creative and use ribbons of any color.
4. Now that you have all the materials, you and your child can write a story.
5. Once you and your child chose a topic, create the main character start with a name and personality.
6. Write your story!
7. Think of a title.
8. Make it a picture book and draw or cut out and paste illustrations to go with the story.
9. Share this story with family and friends, and store it on the bookshelf at home as a token of your child's creativity.

<http://www.wikihow.com/Create-a-Children's-Book>

The Affordable Care Act: **An overview of what you need to know**

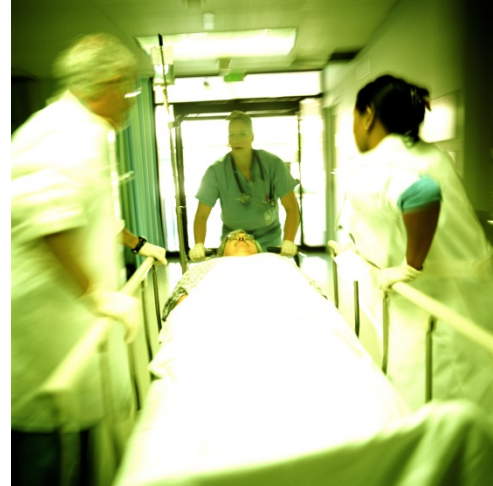
By Kayla Kirk

Introduction

The Affordable Care Act has officially been passed and millions of Americans now have the opportunity to search and enroll in health care. Choosing the right health care plan for you can be very confusing because of all of the changes and updated benefits that insurance companies

must include. Many people don't know if they qualify for cheaper insurance, what plans are available to them, and how to apply, and by when. In this training you will learn:

- Who qualifies for affordable health care
- The different plan options
- What the essential health benefits are
- The free preventative services
- The major changes to insurance companies
- Fees and exemptions from health care
- How to apply for the right plan for you



Who Qualifies

The majority of American citizens will qualify for cheaper health care. The price of your health care plan and the subsidies you qualify for are affected by several factors. There are two areas in which the price can be lowered: **out-of-pocket costs** and **monthly premium costs**.

Lower **out-of-pocket costs** may be available to you for deductibles, copayments, and coinsurance. This depends on your income and family size. If you qualify for lower out-of-pocket rates, you must choose the silver plan. In simpler terms, you are receiving the same medical plans as gold or premium plans, but at the cost of a silver plan (Plan options will be discussed in the next section).

Monthly premium costs are handled with the tax credit called Advance Premium Tax Credit. This credit can be applied directly to monthly premiums so you have immediate savings. The factors that can affect premium costs are:

- Age: Older people can be charged three times more than younger people.
- Location: The competition, local regulations, and costs of living are all affected by location and in turn, affect premium rates.
- Tobacco Use: Users of tobacco can pay up to 50% more than non-users.
- Individual versus Family: A higher rate may be charged for a spouse and/or children.
- Plan Category: The plan coverage type you choose will affect monthly premium prices.

You may also qualify for Medicaid. Medicaid provides individuals and families with low income free or low cost health care. It is not necessary for



you to buy health care through the Marketplace if you qualify. If you are below the minimum income, you may qualify for Medicaid. If your state did not expand their program, then you don't qualify under the rules and you can't get any lower costs. **This means you will pay the ENTIRE plan.** You will not qualify for subsidies on regular plans as well. If you can't afford any health care plan, you can get low-cost health care at a nearby community health center. Community health centers offer prenatal care, baby shots, general primary care, and referrals to specialized care.

Below is a graph showing the income and family size that will affect out-of-pocket costs, monthly premiums, and if you qualify for Medicaid.

		Number of people in your household					
		1	2	3	4	5	6
Private Marketplace health plans	You may qualify for lower premiums on a Marketplace insurance plan if your yearly income is between...	\$11,490 - \$45,960	\$15,510 - \$62,040	\$19,530 - \$78,120	\$23,550 - \$94,200	\$27,570 - \$110,280	\$31,590 - \$126,360
	<i>See next row if your income is at the lower end of this range.</i>						
	You may qualify for lower premiums AND lower out-of-pocket costs for Marketplace insurance if your yearly income is between...	\$11,490 - \$28,725	\$15,510 - \$38,775	\$19,530 - \$48,825	\$23,550 - \$58,875	\$27,570 - \$68,925	\$31,590 - \$78,975
Medicaid coverage	If your state is expanding Medicaid in 2014: You may qualify for Medicaid coverage if your yearly income is below...	\$15,857	\$21,404	\$26,951	\$32,499	\$38,047	\$43,594
	If your state isn't expanding Medicaid: You may not qualify for any Marketplace savings programs if your yearly income is below...	\$11,490	\$15,510	\$19,530	\$23,550	\$27,570	\$31,590

Plan Options

There are five plan categories to choose from: Catastrophic, Bronze, Silver, Gold, and Platinum. All offer the same set of essential health benefits and do not reflect the quality or amount of care each plan provides. The plan category chosen affects the premium costs and out-of-pocket costs. Here are some quick facts about the different plan options:

- Premiums are higher when more out-of-pocket medical costs are covered (Gold/Premium plans)
- Premium rates are lower when you pay more out-of-pocket costs yourself (Bronze plan)
- The maximum out-of-pocket cost an individual pays is \$6,350
- The maximum out-of-pocket for a family is \$12,700
- If you have or anticipate many doctor visits and prescriptions, then a Gold or Platinum plan is the best choice for you.
- If you don't have a lot of money and/or just want to cover yourself from a worst case scenario, than the Catastrophic plan is the best choice.
 - To qualify, you must be under the age of thirty or receive a hardship exemption.
 - You will pay all of your own medical costs up to a certain amount (normally maximum out-of-pocket cost) and then over that is generally paid by your insurance plan.
 - It is a standard price. You can't get lower costs on premiums of out-of-pocket costs based on income and family size.
- If you are looking for an affordable plan, but want more coverage than the catastrophic plan, than the Bronze and Silver plans are the best choice for you.

Essential Health Benefits

There are ten categories that are considered essential health benefits that every insurance plan must cover. **This includes current plans that people have.** They are listed below:

- Ambulatory Patient Services
- Emergency Services
- Hospitalization
- Maternity and New Born Care
- Mental Health and Substance Use Disorder Services (including behavioral health treatment)
- Prescription Drugs
- Rehabilitative and Habilitative Services and Devices
- Laboratory Services
- Preventative and Wellness Services and Chronic Disease Management
- Pediatric Services (including oral and vision)



Essential health benefits are minimum requirements for all plans. Plans may offer additional coverage and vary slightly from state to state.

Free Preventative Benefits

Most health care plans must cover preventative services for everyone. This is at no cost to you, which means no copayments or coinsurance needed for these services, even when you haven't met your deductible. The emphasis on preventative health care is to keep you healthy and save you money from developing health problems later in life. There are 15 preventative health care services everyone qualifies for, as well as extra services for women and children. They are listed below.

Everyone:

1. Abdominal Aortic Aneurysm one-time screening: Men ages 65-75 who have ever smoked.
2. Alcohol Misuse screening and counseling
3. Aspirin use: Men ages 45-79, Women ages 55-79
4. Blood Pressure screening for all Adults
5. Cholesterol screening: Men 35 and older, Men younger than 35 who are at risk for heart disease, Women who are at risk of heart disease.
6. Colorectal Cancer screening: Adults over 50
7. Depression screening for All Adults
8. Diabetes Type 2 screening: Adults with high blood pressure
9. Diet counseling: Adults at higher risk for chronic disease
10. HIV screening: Ages 15-65
11. Immunization vaccines: Hepatitis A and B, Herpes Zoster, Human Papilloma, Flu Shot, Measles, Mumps, Rubella, etc.
12. Obesity screening and counseling
13. Sexually Transmitted Infection (STI) Prevention Counseling: Adults at higher risk
14. Syphilis screening: Adults at higher risk
15. Tobacco Use screening: All adults and interventions to stop



Women:

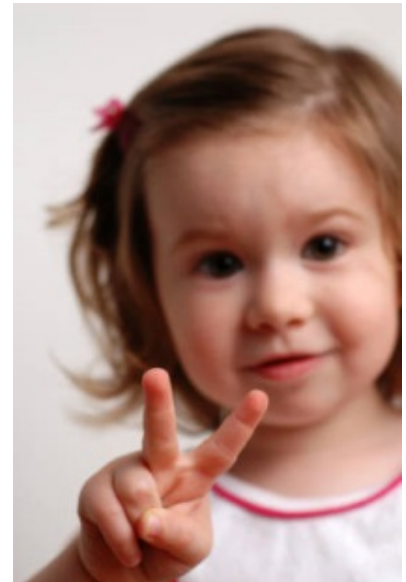
1. Anemia Screening: Routine for pregnant women
2. Breast Cancer Genetic Test Counseling (BRCA): Women at higher risk
3. Breast Cancer Mammography Screening: Every 1 to 2 years for women over 40
4. Breast Cancer Chemoprevention Counseling: Women at higher risk
5. Breastfeeding comprehensive support and counseling: Pregnant and nursing women
6. Cervical Cancer screening: Sexually active women
7. Chlamydia Infection screening: Younger women and other women at higher risk
8. Contraception: Food and Drug Administration approved contraceptive methods, sterilization procedures, and patient education and counseling
9. Domestic and interpersonal violence screening and counseling
10. Folic Acid
11. Gestational diabetes screening: women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes
12. Gonorrhea screening: all women at higher risk
13. Hepatitis B screening: pregnant women at their first prenatal visit
14. HIV screening and counseling: sexually active women
15. Human Papillomavirus (HPV) DNA Test: every 3 years for women with normal cytology results who are 30 or older
16. Osteoporosis screening: women over the age of 60
17. Rh Incompatibility screening: all pregnant women and follow-up testing for women at higher risk
18. Sexually Transmitted Infections counseling: sexually active women
19. Syphilis screening: all pregnant women or other women at increased risk
20. Tobacco Use screening and interventions



21. Urinary tract or other infection screening: pregnant women
22. Well-woman visits: recommended services for women under 65

Children:

1. Autism screening: children at 18 and 24 months
2. Behavioral assessments: At the following ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
3. Blood pressure screening: At the following ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
4. Cervical Dysplasia screening: sexually active females
5. Depression screening: adolescents
6. Developmental screening: children under age 3
7. Dyslipidemia screening: children at higher risk of lipid disorders at the following ages: 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
8. Fluoride Chemoprevention supplements: children without fluoride in their water source
9. Gonorrhea preventive medication: eyes of all newborns
10. Hearing screening: all newborns
11. Height, Weight, and Body Mass Index measurements: at the following ages: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
12. Hematocrit of Hemoglobin screening
13. Hemoglobinopathies or sickle cell screening: newborns
14. HIV screening: adolescents at higher risk
15. Hypothyroidism: newborns
16. Immunization vaccines: birth to 18; Tetanus, Hepatitis A and B, Inactivated Poliovirus, Measles, Mumps, Rubella, Rotavirus, ect.
17. Iron supplements: 6 to 12 months who are at risk for anemia
18. Lead screening: children at risk of exposure



19. Medical History: 0 to 11 months, 1 to 4 years, 5 to 10 years, 11 to 14 years, 15 to 17 years
20. Obesity screening and counseling
21. Oral Health risk assessment: young children ages 0 to 11 months, 1 to 4 years, 5 to 10 years
22. Phenylketonuria (PKU) screening: newborns
23. Sexually Transmitted Infection (STI) prevention counseling and screening: adolescents at higher risk
24. Tuberculin testing: children at higher risk of tuberculosis
25. Vision screening

Major Changes to Insurance Company Coverage

Now that the Affordable Care Act has been implemented, several major changes have been made to insurance coverage. These changes are to include more Americans in health care coverage and to protect clients from insurance companies taking advantage of them. Insurance companies must:

1. End pre-existing condition exclusions: Health insurance plans can't refuse to cover you or charge you more just because you have a pre-existing health condition.
2. Cover young adults until the age of 26: If a plan covers children, they can be added or kept on the health insurance policy until they turn 26 years old. Children can join or remain on a plan even if they are:
 - a. Married
 - b. Not living with their parents
 - c. Attending school
 - d. Not financially dependent on their parents
 - e. Eligible to enroll in their employer's plan
3. End arbitrary withdrawals of insurance: Stops insurance companies from canceling your insurance coverage because you or your employer made a mistake on your insurance application.

4. Guarantee your right to appeal: Ensures your right to appeal health insurance plan decisions--ask that your plan reconsider its decision to deny payment for a service or treatment.
5. End lifetime limits on coverage: Prohibits health plans from putting a lifetime dollar limit on the benefits you receive and also restricts the annual dollar limits a health plan can place.
6. Review premium increases: Insurance companies must publicly justify any unreasonable rate increases.
7. Help you get the most from your premium dollars: Your premium dollars must be spent primarily (80%) on health care, not administrative costs.
8. Cover preventive care for free: Preventative services you qualify for will be free, no copayment or coinsurance needed.
9. Protect your choice of doctors: Choose the primary care doctor you want from your plan's network.
10. Remove insurance company barriers to emergency services: You can get emergency care at a hospital outside of your network without increased charges.



Fees and Exemptions

Everyone must have health insurance by March 31st, 2014. If you do not have an insurance plan, you will be charged a fee, along with being responsible for all of your medical bills. The fee is sometimes called the individual responsibility payment, individual mandate, or penalty. The penalty for not having health care in 2014 is calculated in one of two ways (whichever is the higher fee):

1. 1% of your yearly household income.
 - The maximum penalty is the average yearly premium for a bronze plan.
2. \$95 dollars per person, or \$47.50 per child under 18.
 - The maximum penalty per family is \$285.

The fee increases every year. In 2015 it will be 2% or \$325 per person. In 2016 and later it's 2.5% of income or \$695 per person. If you are uninsured for less than 3 months you don't have to make a payment. You must enroll by March 31st, 2014. Coverage will then begin May 1st. After March 31st you will no longer be able to get insurance during open enrollment through

the Marketplace. You will have to pay a fee and be responsible for all medical costs. There are some exemptions to having no insurance and not having to pay a fee. Exemptions from the payment are listed below:

- Uninsured for less than 3 months of the year
- Lowest-priced coverage available to you would cost more than 8% of your household income
- You don't have to file a tax return because your income is too low
- You're a member of a federally recognized tribe
- You're a member of a recognized health care sharing ministry
- You're a member of a recognized religious sect with religious objections to insurance
- You're incarcerated
- You're not lawfully present in the U.S.

You may also qualify for a "hardship" exemption if you are unable to purchase health insurance for one of the following reasons:

- You were homeless.
- You were evicted in the past 6 months
- You received a shut-off notice from a utility company
- You recently experienced domestic violence
- You recently experienced the death of a close family member
- You experienced a fire, flood, or other natural or human-caused disaster
- You filed for bankruptcy in the last 6 months
- You had medical expenses you couldn't pay in the last 24 months
- You experienced unexpected increases in necessary expenses due to caring for an ill, disabled, or aging family member
- You expected to claim a child as a tax dependent who's been denied coverage in Medicaid and CHIP (Don't have to pay penalty for child)
- You appealed an eligibility decision and you're eligible for enrollment in a qualified health plan for a time period when you weren't enrolled before
- You were determined ineligible for Medicaid because your state didn't expand eligibility

How to Apply

Now that you better understand what the Affordable Care Act entitles you to, you may be wondering "how do I apply?" There are four options for applying. Please see the Epress entitled "How to Apply for Health Insurance Through the Marketplace."

Conclusion

Health care is changing rapidly in the United States during this time. Starting January 1st, millions of Americans may now buy affordable health care through the Marketplace. Affordable health care will provide Americans with essential health benefits, preventative services, and lower premium and out-of-pocket rates.

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Affordable Care Act's Impact on Mental Health Coverage

By Kayla Kirk

Introduction

The Affordable Care Act, also commonly known as “Obamacare”, is making health care reform history. It is giving millions of Americans the opportunity to compare health insurance plans and enroll in the best and most affordable plan for their families. Mental health and substance use disorders are now included as one of the ten essential health benefits that all insurance companies must provide. Health Secretary Kathleen Sebelius called this move, “the largest expansion of behavioral health coverage in a generation.” You will learn:

- What essential health benefits are
- What will be covered under mental health and substance use disorders
- How the Mental Health Parity and Addiction Equity Act of 2008 has affected the inclusion of mental health and expanded it

- How this coverage will affect Americans

Essential Health Benefits

Essential health benefits are the minimum requirements that all health plans must include in the Marketplace. This means that all insurance plans must pay for these treatments. What is covered will depend on the plan that you choose and the state that you live in.

Mental Health and Substance Use Disorder Coverage

Now that mental health and substance use disorders are covered under the Affordable Care Act, millions of Americans will have access to treatment. There are several free preventative treatments that are covered under all of the Marketplace plans.

Treatments that are now included in health care are:

- Psychotherapy
- Counseling
- Mental health inpatient treatment
- Behavioral health services
- Substance use disorder treatment
- Rehabilitation services
- Outpatient care

Treatments specific to certain groups are below:

- All Adults:
 - Alcohol Misuse screening and counseling
 - Depression screening
- Women:
 - Domestic and intimate partner violence counseling
 - HIV counseling
- Children:
 - Autism screening
 - Behavioral assessments
 - Depression screening

Also, insurance companies can no longer deny coverage due to pre-existing conditions. In the past, having a chronic mental illness could cause you to be unable to get health insurance. There are also no yearly or lifetime dollar limits; insurance companies are required to cover your treatment while you are seeking services.



Mental Health Parity and Addiction Equity Act of 2008

The Mental Health Parity and Addiction Equity Act (MHPAEA) of 2008 required mental health and substance use disorders treatment to be comparable to coverage for general medical care. This means that limits on mental health cannot be more restrictive than those for medical and surgical services in these areas:

- Financial: Same deductibles, copayments, coinsurance, and out-of-pocket rates
- Treatment: Same limit of days or visits covered
- Care Management: Same requirements to get authorization for treatments

The Affordable Care Act has expanded this parity to include millions of more Americans. Previously, the MHPAEA only helped individuals who had mental health benefits, but many plans were not required to cover these services. Now all Americans will have mental health benefits since it is one of the ten essential health benefits.

How New Coverage Affects Americans

With the Affordable Care Act in effect, along with the expansion of MHPAEA, mental health and substance use disorders are now extended to 62 million Americans. One-third of those previously covered under health insurance did not have substance use disorder treatment. The coverage was expanded in three ways:

1. Affordable Care Act provides more Americans with access to quality health care at an affordable price.
2. Mental health and substance use disorders are included as one of the ten essential health benefits all insurance plans must cover.
3. The Affordable Care Act applies the Federal parity protection to all insurance plans.

Conclusion

The Affordable Care Act has provided Americans the opportunity to compare prices of health insurance plans and pick the best and most affordable plan for them. It has expanded mental health and substance use disorders coverage, making this the largest expansion in a generation. This training explained that mental health and substance use disorders are an Essential Health Benefit, what the new coverage includes, the expansion of the MHPAEA, and how this new coverage affects Americans.

References

http://aspe.hhs.gov/health/reports/2013/mental/rb_mental.cfm

<http://www.dol.gov/ebsa/newsroom/fsmhpaea.html>

<http://www.whitehouse.gov/blog/2013/08/21/affordable-care-act-and-expanding-mental-health-coverage>

<https://www.healthcare.gov/do-marketplace-insurance-plans-cover-mental-health-and-substance-abuse-services/>

How to Apply for Insurance through the Marketplace

By Kayla Kirk

Introduction

With the new Affordable Care Act officially passed into law, millions of Americans will now be able to search for and enroll in affordable health care. It is an exciting, yet confusing time for many people who do not know what the Affordable Care Act is, what the Marketplace is, and how to take advantage of enrolling in a quality insurance plan at a price that is affordable. In this training you will learn:

- A quick background on the Affordable Care Act
- The four ways to apply for health care
- How to apply in each category and how you will be notified of the options you qualify for
- What information you will need to fill out the application
- How you can preview approximate prices before you enroll

Background

The Affordable Care Act, also commonly known as “Obamacare”, was signed into effect March 23rd, 2010 by President Obama. It aims to increase the quality and affordability of health insurance, lower the uninsured rate by expanding public and private insurance coverage, and reduce the costs of healthcare for individuals and the government. The Marketplace opened on October 1st, 2013. You must apply by December 23rd, 2013 to be covered starting January 1st, 2014. After December 23rd, you will not be covered until a later date. You must also sign up



by March 31st, 2014. This is when open enrollment will end and you will not be able to sign up again until October of 2014. If you do not sign up by this time, you will be fined and be responsible for all health bills for that year. Under the Affordable Care Act there are 10 categories of essential health benefits that every insurance plan must cover. There are five plan categories:

1. Catastrophic
2. Bronze
3. Silver
4. Gold
5. Platinum

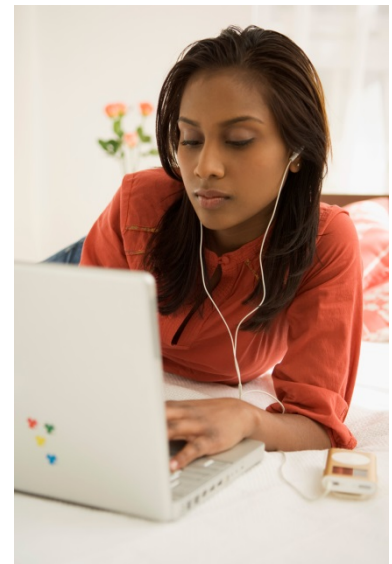
Each plan has a different premium price and out-of-pocket costs. Plans that have a higher premium cover more of out-of-pocket medical costs, while plans with a lower premium cover less out-of-pocket costs. In extreme circumstances there are exemptions to not paying for health insurance. If you are interested in enrolling in a Health Insurance Marketplace plan, then you have four options to apply.

Four Options to Apply

There are four different ways for you to apply for health insurance under the Marketplace. They are:

1. Online
2. Over the phone
3. With a paper application
4. In person

The **online** application is the fastest way to fill out the application and find out what plans you qualify for and what tax reliefs you may receive. By contacting a call center representative **over the phone**, they will be able to walk you through the online or paper application. The **paper** application is a great resource for those who do not have access to a computer or the internet. It must be mailed in. You may also have someone help you **in person** with your application by looking up locations that have trained and certified people who can help. These are the four options that are available to consumers interested in applying for health care through the Marketplace.



Online

Applying online is the quickest way to see what plans you are eligible for and the prices of your monthly premium. Go to **www.healthcare.gov** and choose **apply online**. It is a four step

process that is straightforward, but if you have any questions along the way, you can chat with a live customer service representative. The four step process is explained below:

1. Set up an account.
 - In this step, you will provide basic information about yourself, such as your name and address.
 - You will create a username, password, and security questions.
2. Fill out the application.
 - The application will ask specifics about you and/or your family members in your household.
 - You will need to know how many household members will be covered under you, your income, your current insurance, etc.
3. Compare insurance options.
 - After you have submitted your application you will see all the insurance options you qualify for.
 - Each plan will include details on costs and benefits to help make a decision of which is best for you and/or your family.
 - It will include private insurance, Medicaid, and CHIP.
4. Enroll in a plan.
 - Once you choose a plan, you may enroll online and choose how you want to pay your monthly premium.
 - If you or a family member qualifies for Medicaid or CHIP, a representative from these agencies will contact you.

The benefits of using the online application are that you can begin it, and if you don't have time to finish it or all the information you need, you can save it and go back. It is also the fastest method to see what plans you qualify for and what the premium costs will be. The only downside to the online application is that at times the website is down to fix complications and is unavailable from 1:00AM to 5:00AM EST daily.

Here is the link to apply online: <https://www.healthcare.gov/marketplace/individual/>

Paper

The paper application is a great way to apply if you do not have access to a computer or the internet, or if you are unfamiliar with these tools. Once you have completed the application **with your signature**, it must be mailed in. It will take one to two weeks before you are notified of your eligibility. You will find out if you are eligible for lower costs on private insurance, Medicaid, or CHIP. Once you receive your eligibility, you can either go online to compare and

enroll in a plan, or you can contact a call center to enroll you. If you or a family member is eligible for Medicaid or CHIP, a representative from these agencies will contact you to enroll.

Here is the link to print out a paper application:

<http://marketplace.cms.gov/getofficialresources/publications-and-articles/marketplace-application-for-family.pdf>

Mail your application to:

Health Insurance Marketplace
Department of Health and Human Services
465 Industrial Blvd
London, KY 40750-0001

Phone

You may apply and enroll in an insurance plan through Marketplace over the phone with a customer service representative. It is available 24 hours a day, 7 days a week.

Call: 1-800-318-2596

In-person

You may find a site near you that has people trained and certified to help you understand the health coverage options and enroll in the Marketplace. You can search for a site near you by city and state or by zip code. Each site will list their contact information, office hours, and the types of help they offer. Sites are known by different names depending on who provides the services and where they are located. Common names are:

- Navigators
- Application assistants
- Certified application counselors
- Government agencies: State Medicaid or CHIP offices

Insurance agents and brokers can also assist you in enrolling in a plan. To find a local site near you go to: www.localhelp.healthcare.gov

Information Needed for Application

There are several specific questions that the application will ask. The answers to these questions will affect what coverage you qualify for and if you can get help paying for your insurance plan. The information needed on the application is below:

- Name of yourself and household members

- Current address
- Social Security Number
- Document numbers of immigrants (if you or a household member is an immigrant)
- Employer information (if working)
- Income information (found on paystubs, W-2 Forms, and Tax Statements)
- Policy numbers of current health insurance (if you are covered)
- Information on available health insurance provided by employer

All information is kept private and secure. This is required by law.

Preview Prices of Insurance Plans

Before you apply and enroll in a plan, there are two ways to see approximate prices of plans you may qualify for. The first option is the Kaiser Family Foundation calculator. This will provide you a rough estimate of how much health insurance may cost you in 2014.

Kaiser Family Foundation Calculator: <http://kff.org/interactive/subsidy-calculator/>

There are a few things to know before using the calculator:

- It only provides a rough estimate of the costs for insurance. It will give you an idea of someone with circumstances similar to yours COULD pay for Marketplace insurance in 2014.
- The calculator accounts for some of the most important factors that affect insurance costs in the Marketplace: where you live, family size, ages of members, and tobacco use.
- The prices are based on a plan in the Silver category. Other plan categories will have higher or lower premiums.

The second option is to provide some basic information on the Marketplace website and see plans and prices available in your area. These monthly premiums shown DO NOT take into account your income and household details. The actual plan pricing can change. **Many times the price will be lower than the premiums shown.**

Marketplace Plans and Sample Prices: <https://www.healthcare.gov/find-premium-estimates/>

Conclusion

The goal of this new program is to increase the quality and affordability of health insurance, lower the uninsured rate by expanding public and private insurance coverage, and reduce the costs of healthcare for individuals and the government. If you do not already have health insurance, or would like to change insurance plans for a more affordable premium, then you should fill out an application in one of the four ways mentioned above and enroll in the plan that is the best fit for you.

References

<http://www.whitehouse.gov/healthreform>

<https://www.healthcare.gov/get-covered-a-1-page-guide-to-the-health-insurance-marketplace/>

<http://marketplace.cms.gov/getofficialresources/publications-and-articles/marketplace-application-for-family.pdf>

<https://www.healthcare.gov/marketplace/individual/>

<https://www.healthcare.gov/how-can-i-get-ready-to-enroll-in-the-marketplace/>

New and Noteworthy Children's Books

Developing a wish-list for your local supporters to benefit the visitation program? Ask for books for parents to read to their children at visits! This list, comprised from the ALSC's 2013 Notable Children's Books and recommendations from Goodreads.com, has award-winning novels, short stories, poems, and books to engage any reader.

Preschool

The Day the Crayons Quit

By Drew Daywalt

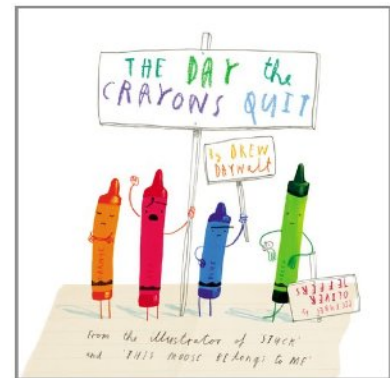
Theme: Identity, Self-expression, Art, Humor

Duncan, just wanting to color, finds a note that all his crayons are no longer there and have had enough. Hurt by being overused and underappreciated they decide to unite and restore equality among colors. They express to Duncan their concerns through different letters and how they want things to change. In the end, Duncan follows their wishes and uses the colors to create a beautiful picture.

And Then It's Spring

By Julie Fogliano

Theme: Seasons, Patience, Anticipation



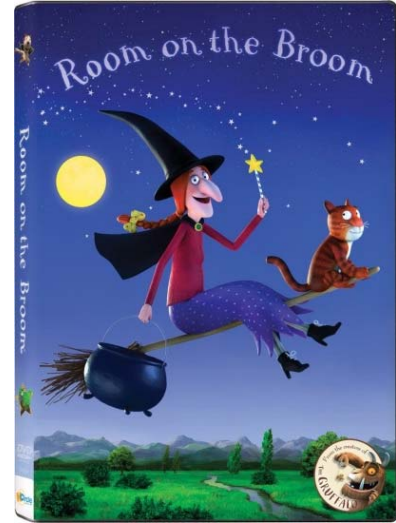
The book follows a little boy and his dog companion in their anticipation for Spring. He is saddened by the lack of greenery and decides to plant seeds. Still, there is brown all around him and so he waits for plants to grow. After days and days of waiting, after rain, wind, and anticipation he sees greens starting to sprout from the brown. The story ends with the sun shining, the animals playing, the plants fully grown, and a happy little boy.

Room on the Broom

By Julia Donaldson

Theme: Fantasy, Friendship, Magic, Animals, Poetry

Flying through the night sky, a witch and her cat are troubled by the wind and lose her hat, wand, and bow. Luckily she finds three animals, a dog, a bird, and a frog to help her. In return the animals would like a ride on the witch's broom. With now enough room on the broom it breaks and the witch is captured by a dragon. With the help of her new friends she is able to escape and use her magic to fit everyone on the broom.



Kindergarten to 1st grade

Black Dog

By Levi Pinfold

Theme: Fear, Dogs, Courage, Family

The Hope family walk out to a big black dog outside of their home. The dog grows bigger and bigger everyday as does the fear of it. The entire family is in fear except for the youngest family member who walks outside and approaches the dog. It then shrinks in size proving things are not always as they seem. The dog is brought inside and sits around the fireplace with the family that once feared him.

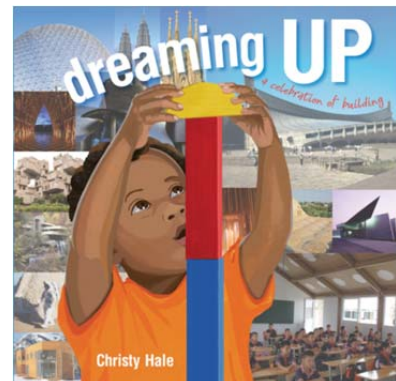


Dreaming Up: A Celebration of Building

By Christy Hale

Theme: Self-belief, Following big dreams, Architecture, Poetry

The book is a mixture of poetry, storylines, and architectural photos that demonstrate how constructive play can lead to



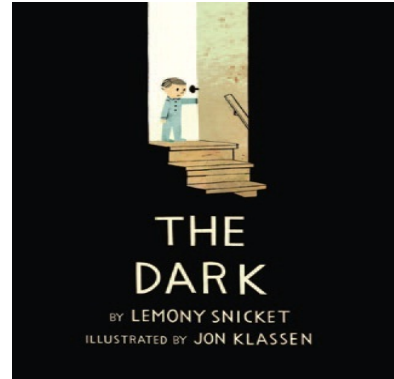
constructive building. Following a curious little boy the story provides clever anecdotes and rhymes that help children understand both the building blocks of play and life. It includes famous architectural buildings and fun, thought-provoking ideas.

The Dark

By Lemony Snicket

Theme: Fear, Confidence, Courage

Laszlo is afraid of the dark and knows that the darkness lives in the basement. One night the darkness creeps into his room and leads him to the basement where he finds nightlight light bulbs. With new found courage and fearless of the dark, Laszlo and the darkness live in peace.



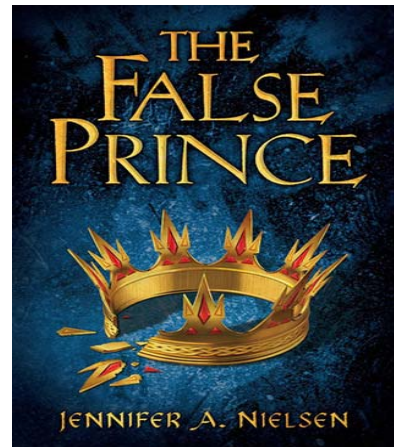
2nd to 4th grade

The False Prince

By Jennifer A. Nielsen

Theme: Adventure, Fantasy, Shortcomings

Sage is an orphan chosen among three others to play as the king's long-lost son for a country whose people are divided. He uses his wit and agility to prove his worthiness as prince. His rivals do everything in their power to defeat him, but through all the lies, deceit, danger, and action he overcomes.

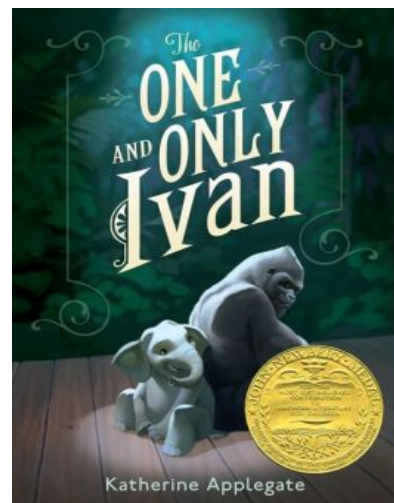


The One and Only Ivan

By Katherine Applegate

Theme: Animals, Humor, Tragedy, Friendship, Art

Ivan is a kind, easygoing gorilla on display at Exit 8 Big Top Mall and Video Arcade. Ivan is an artist with hopes of creating true paintings; capturing the beauty behind the image. He meets Ruby, a baby elephant, who introduces him to a new way of seeing things and sparking a change he never expected.



The Lions of Little Rock

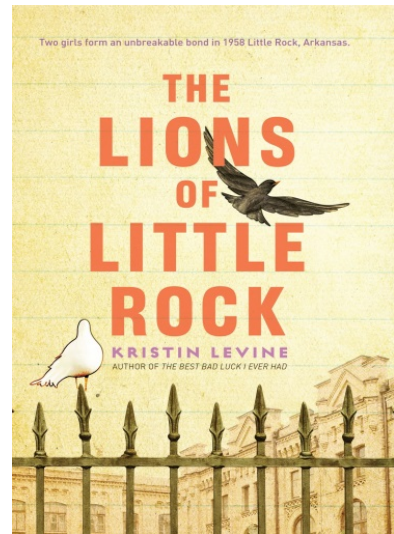
By Kristin Levine

Published: January 5, 2012

Theme: Historical Fiction, Gender and race equality, Courage, Self-confidence

The book follows the story of Marlee, a new student of an all-white public school during the integration of Little Rock schools in 1958. She meets Liz, and their friendship blossoms incredibly despite causing potential danger to their families.

5th and 6th grade

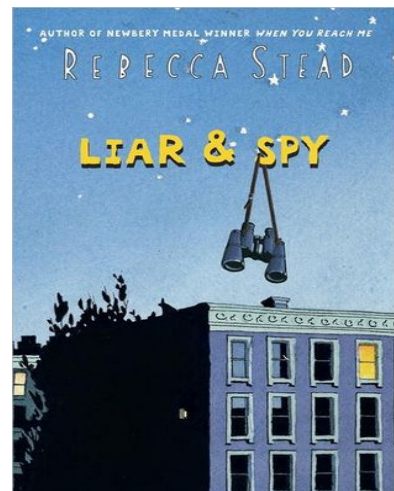


Liar & Spy

By Rebecca Stead

Theme: Mystery, Friendship, Secrets, Deception

Due to family finances Georges' family are recent resident of Brooklyn. In their new apartment building lives Safer, a twelve year old coffee drinker and self-proclaimed spy. Georges is recruited and together they are determined to find out more about Mr. X; a target who lives in the apartment upstairs.



Wonder

By R. J. Palacio

Theme: Friendship, Acceptance, Realistic fiction, Family

After years of home school, August Pullman and his parents decide Beecher Prep, a private Middle school was a great start to his fifth grade year. His facial deformities make it very difficult to make friends. The story is told from different points of view so that the reader can experience different reactions to August's wonder.

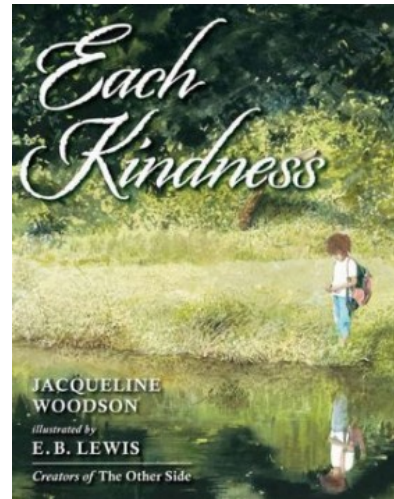


Each Kindness

By Jacqueline Woodson

Theme: Bullying, Realistic fiction, Culture equality, Friendship

Maya, the new girl at school, is rejected and bullied because she wears hand-me-downs and plays with old toys. She is rejected by a girl named Chloe and her gang to the point that she plays by herself and then stops coming to school. Learning of kindness and compassion, the students especially Chloe are hurt by the passed friendship opportunity.



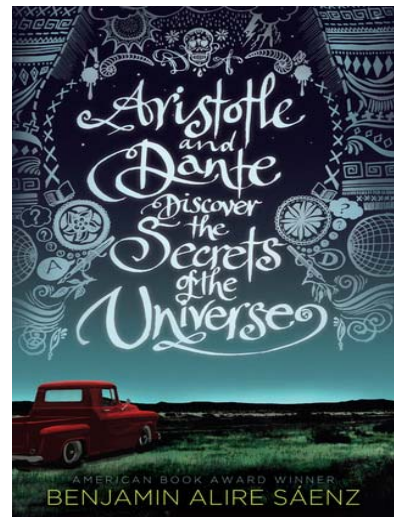
7th and 8th grade

Aristotle and Dante Discover the Secrets of the Universe

By Benjamin Alire Sáenz

Theme: Identity, Friendship, Family, Love

Aristotle, an angry teen, and Dante, a know-it-all who has an unusual way of looking at the world, discover an unordinary friendship in each other when they meet at the swimming pool. They teach each other and form their own ideals about manhood and life lessons. Together these two loners learn the truth about themselves and about the kind of people they aspire to be.



My Family for the War

By Anne C. Voorhoeve.

Theme: Family, War, Identity

Ten year old Ziska joins an Orthodox Jewish household in London after fleeing Germany. Taking a secret kinder transport train she escapes the Nazis to be embraced by her new family. Struggling with the worry of ever seeing her family again, she adjusts and becomes a courageous young woman.

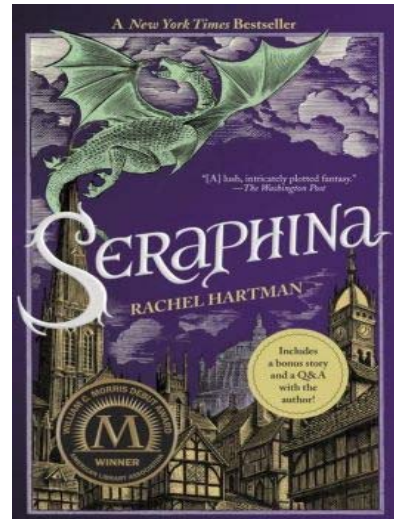


Seraphina

By Rachel Hartman

Theme: Mystery, Fantasy, War, Secrets

The kingdom of Goredd, a place of humans and dragons, is experiencing a rise in tension between its residents. Seraphina joins the court as a member of the royal family has been murdered and she is now pulled into the investigation. Struggling to keep her secrets hidden, she must fight to keep the peace.



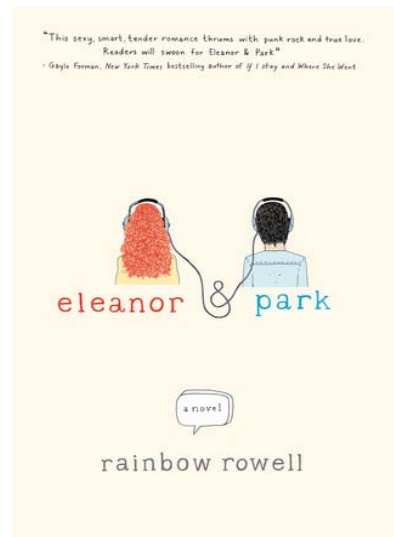
9th and 10th grade

Eleanor & Park

By Rainbow Rowell

Theme: Self-Identity, Racial equality, Romance, Young Adult

This novel follows the love of two extremely different characters brought together by similar interests and the misfortune of their lives. Park is a teenage boy struggling with identity and finding himself, while Eleanor is a low family income, victim of abuse by her drunken stepfather. The novel is entirely about the relationship and love they have for each other and how simple things can be.



Rose Under Fire

By: Elizabeth Wein

Theme: War, Adventure, Historical fiction, Friendship

Rose Justice is a pilot during World War II that is captured by Nazis and sent to a women's concentration camp. She finds comfort in loyal friends, but battles horrific circumstances. Will her courage and newly found friendships be enough to overcome and survive?

