AHA Advocacy Update

Repeal and Replace: Last month, the Senate defeated proposals to repeal the Affordable Care Act (ACA): the Better Care Reconciliation Act (BCRA), which would have repealed and replaced parts of the ACA; the Obamacare Repeal Reconciliation Act, which would have repealed parts of the ACA without replacement; and a “skinny repeal”, which would have repealed the individual and employer mandates, and extended the moratorium on the medical device tax. “From the outset of this process, we have remained consistent in our call for the protection of coverage, the protection of the Medicaid program, and the stabilization of the Health Insurance Marketplace,” said AHA President & CEO Rick Pollack.

A bipartisan group of nearly 40 House members released a proposal to address the stability of the health insurance marketplaces, raise the threshold for the employer mandate, and fund cost-sharing reduction payments. See the AHA Legislative Advisory for details. Meanwhile, talks continue among some Republican senators, the White House and governors, on legislation to repeal and replace the ACA. Sens. Lindsey Graham (R-SC) and Bill Cassidy’s (R-LA) draft legislation maintains Medicaid changes included in the BCRA while creating a second optional block grant program that provides Medicaid expansion and tax credit dollars to states. See details in the AHA Legislative Advisory.

Aligning 42CFR with HIPAA: Reps. Tim Murphy (R-PA) and Earl Blumenauer (D-OR) introduced the Modernizing Addiction Treatment Act (H.R. 3545), AHA-supported legislation that would align Part 2 federal regulations governing the confidentiality of substance use disorder treatment records with the Health Insurance Portability and Accountability Act (HIPAA) to ensure patients with substance use disorders receive the integrated care they need.

Medicare Advantage (MA) & Chronically Ill Enrollees: The House Ways and Means Committee has approved legislation (H.R. 3168) that would reauthorize MA special needs plans and expand supplemental benefits to meet the needs of chronically ill enrollees, as advocated by the AHA. “This legislation gives plans the flexibility to tailor their products to better meet the needs of those chronically ill enrollees,” said AHA Executive Vice President Tom Nickels in a letter of support for H.R. 3044, which was incorporated into the bill.

AHA Regulatory Update

CMMI Meeting on Behavioral Health: CMS announced a Sept. 8 meeting to gather input on potential models to pay for behavioral health care. The initiative will be established under the Center for Medicare and Medicaid Innovation (CMMI), which tests experimental payment models that strive to improve quality and access to care while containing costs in Medicare, Medicaid, or CHIP.

IPF PPS FY 2018 Update: CMS issued a notice updating payment rates, as of Oct. 1, for inpatient psychiatric facilities (IPF) for fiscal year (FY) 2018. CMS makes a net payment increase of 0.99%, or $45 million, compared with FY 2017.

PHP FY 2018 Proposed Medicare Rates: For calendar year (CY) 2018, CMS has proposed a hospital-based partial hospitalization program (PHP) rate of $205.36 and a rate of $123.84 for community mental health centers (CMHCs) in the proposed Hospital Outpatient Prospective Payment System (OPPS) and
Ambulatory Surgical Center Payment System rule. The 2017 rate for hospital-based PHP is $207.27, and the CMHCs rate is $121.48. CMS has proposed to update hospital OPPS rates by 1.75% in CY 2018. The rule also would drastically cut Medicare payment for drugs that are acquired under the 340B Drug Pricing Program. See AHA’s Regulatory Advisory and participate in AHA’s webinar on Aug. 15 at 1 p.m. ET to review how the rule’s key proposals could affect hospitals and health systems.

Opioid Epidemic
President’s Commission on the Opioid Crisis: The Commission has urged President Trump to declare the opioid epidemic a national emergency. The draft interim report calls for federal action to eliminate barriers caused by the Medicaid Institutions for Mental Diseases exclusion; expand access to medication-assisted treatment and naloxone; and more. A final report is due this fall.

State Trends in Opioid-Related Hospital Stays: The Agency for Healthcare Research and Quality (AHRQ) has released a map showing state trends in opioid-related hospital stays from 2009 to 2014. Per a recent AHRQ report, opioid-related hospital stays increased 75% for women and 55% for men in that time. In 2015, mental health/substance use disorders were the nation’s leading cause of disease burden.

NQF Opioid Stewardship Initiative: The National Quality Forum (NQF) is launching an initiative to address the nation’s opioid epidemic. NQF’s National Quality Partners (NQP) will bring together experts to develop a practical resource to help health care practitioners better manage their patients’ pain while reducing the risk of opioid addiction. To learn how to participate, click here.

SAMHSA Report and Webinar: On Aug. 17, at 3:30 ET, SAMHSA is offering a webinar on an update to the 2014 SAMHSA report, Medicaid Coverage and Financing of Medications to Treat Alcohol and Opioid Use Disorders. To register, click here.

AHA Resources
Member’s Only Opioid Webinar: AHA’s Section for Psychiatric & Substance Abuse Services will host a members-only webinar Aug. 8 at 3:30 p.m. ET on effective approaches to coping with the opioid epidemic. William Goodman, M.D., chief medical officer and vice president of medical affairs for Catholic Medical Center in Manchester, N.H., will describe the hospital’s multi-pronged approach to coping with an influx of patients from the epidemic. To register, click here.

New Hospital-Community Partnership Report: With support from the Robert Wood Johnson Foundation, AHA’s Health Research & Educational Trust (HRET) has developed A Playbook for Fostering Hospital-Community Partnerships to Build a Culture of Health. The playbook incorporates lessons learned from HRET’s Learning in Collaborative Communities cohort, 10 communities from across the U.S. with strong, successful hospital-community partnerships. To learn more, register for the August 24th webinar: Fostering Hospital-Community Partnerships to Build a Culture of Health.

Two MACRA webinars: AHA will host a two-part webinar Aug. 17 and 31 on how Providence St. Joseph’s Health is working with clinicians to prepare for the new Medicare payment system for clinicians under the Medicare Access & CHIP Reauthorization Act of 2015. This is the first in a new series on hospitals leading the way in MACRA implementation. Click to register for the Aug. 17 and Aug. 31 events.

The August Behavioral Health Update includes information on: The Mental Health Annual Report 2014 from SAMHSA; the Design Guide for the Built Environment of Behavioral Health Facilities; and more. Click here for more AHA resources on behavioral health.

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