

Section for Psychiatric & Substance Abuse Services

To: Members, AHA's Section for Psychiatric & Substance Abuse Services

From: Rebecca Chickey, Director, Section for Psychiatric & Substance Abuse Services

Subject: Update on Key Issues in the Behavioral Health Care Field: December 2017

AHA Advocacy Update

Senate Passes Tax Bill... The Senate voted 51-49 to approve the Tax Cuts and Jobs Act of 2017. The bill includes a provision to repeal enforcement of the Affordable Care Act's mandate that most individuals have health insurance, effectively repealing the mandate. Unlike the House-passed bill, the Senate bill would not eliminate the tax-exemption for private-activity bonds, including qualified 501(c)(3) hospital bonds. The Senate bill, like the House bill, would amend the tax code to eliminate the ability of nonprofit hospitals to execute tax-exempt "advance refundings" of outstanding tax-exempt bonds. Click here to read the AHA's statement and for more on both bills, see our Nov. 27 Action Alert.

AHA Regulatory Update

New IMD Policy...The Centers for Medicare and Medicaid Services (CMS) has <u>announced</u> a new Section 1115 waiver policy that allows states to design demonstration projects that increase access to treatment for opioid use disorders and other substance use disorders. This new policy allows state Medicaid programs to reimburse for substance abuse treatment provided at inpatient facilities with more than 16 beds otherwise prohibited by the current Institutions for Mental Diseases (IMD) exclusion.

340B Program...The AHA, joined by the Association of American Medical Colleges and America's Essential Hospitals, filed a <u>federal lawsuit</u> to prevent CMS from reducing Medicare payments by nearly 30% for hospital outpatient drugs under the 340B Drug Pricing Program. On the legislative front, Reps. David B. McKinley (R-WV) and Mike Thompson (D-CA) have introduced H.R. 4392 – a bill that would prevent these payment cuts. See our <u>Action Alert</u> for more information.

42 CFR...The Partnership to Amend 42 CFR Part 2 (Partnership) is a coalition of more than 35 health care organizations, including the AHA, committed to aligning substance-use-disorder privacy regulations with the Health Insurance Portability and Accountability Act (HIPAA) to allow appropriate access to patient information essential for providing effective care. The Partnership is hosting a Congressional Briefing on December 7 to discuss 42 CFR Part 2 and AHA-supported legislation: The Overdose Prevention and Patient Safety Act, H.R. 3545, and the Protecting Jessica Grubb's Legacy Act, S. 1850.

AHA Ideas to CMMI...AHA responded to CMS's request for information on a new direction for the Center for Medicare and Medicaid Innovation. Specifically, "CMMI should explore delivery innovations that could be made under 1115 Waiver authority to eliminate or restrict the scope of the Institutions for Mental Disease (IMD) exclusion to improve access to care and help reduce costs," wrote AHA Executive Vice President Tom Nickels. AHA also urged CMS to consider specific concepts and models for the CMMI moving forward, including certain emerging strategies that could preserve access to essential health care services, including psychiatric and substance use treatment services, in vulnerable rural and inner-city communities.

Opioids

STR Opioid Funding Continues...Created by the 21st Century Cures Act, the \$1 billion Opioid State Targeted Response grant program <u>will be funded</u> for a second year. The program expands access to evidence-based prevention, treatment and recovery support services; reduces unmet treatment needs; and helps to prevent opioid overdose deaths. Hospitals can contact their state addictions authority to find out about sub-contracting opportunities under the STR grant program.

Opioids & Medicare...CMS' <u>proposed</u> changes to the Medicare Advantage program and Medicare prescription drug plans aim to reduce opioid abuse among seniors and dual-eligibles and lessen regulatory burdens for Advantage plans. See the <u>AHA Special Bulletin</u> for a summary of the rule.

President's Opioid Report...The President's Commission on Combating Drug Addiction and the Opioid Crisis released its <u>final report</u> with more than 50 recommendations to address the opioid epidemic. The report urges Congress and the Administration to: grant waivers for all 50 states to eliminate barriers to treatment caused by the Medicaid IMD exclusion; better align patient privacy laws specific to addiction with HIPAA; mandate prescriber education to enhance prevention; expand access to medication-assisted treatment; enhance data sharing among prescription drug monitoring programs; enforce the Mental Health Parity and Addiction Equity Act; and more.

ED Postings...According to David R. Wright, director, Survey and Certification Group Center for Clinical Standards and Quality Centers for Medicare & Medicaid Services, the materials <u>produced by the CDC</u> or in conjunction with <u>CDC and AHA</u> are appropriate for posting in hospital Emergency Departments and would not be an EMTALA violation.

Parity

NAMI Report Finds Similar Inequalities... NAMI's new report, "<u>The Doctor Is Out</u>," also found that people continue to lack the same access to mental health providers as for other medical providers. When they do find a provider, many must go out-of-network and pay high out-of-pocket costs at much higher rates than for primary or specialty medical care.

AHA Resources

Stem the Tide: Addressing the Opioid Epidemic...To advance the efforts of hospitals and health systems working to address the opioid crisis, the AHA developed a <u>new toolkit</u> for working with patients, clinicians and communities to stem this epidemic. Find more resources at: http://www.aha.org/advocacy-issues/initiatives/behavioral/opioid.shtml.

AHA Members Only Webinar: *Depression Screening of all Patients – Provides Comprehensive Care and Better Outcomes.* Please register for the Dec. 13, 3:00-4:00 CT, webinar to learn the impact of Cedars-Sinai Medical Center's seamless depression screening and evaluation done for all inpatients.

Quantifying Our Regulatory Burden...AHA worked with Manatt Health on a comprehensive review of federal law and regulations in nine regulatory domains from four federal agencies to develop *Report: Regulatory Overload: Assessing the Regulatory Burden on Health Systems, Hospitals, and Postacute Care Providers*. One finding: "Providers are dedicating approximately \$39 billion per year to comply with the administrative aspects of regulatory compliance in these domains."

Implementing Virtual Care...The AHA has released a <u>one-page guide</u> to help hospital and health system board members and leaders implement virtual care strategies for telehealth.

The December Behavioral Health Update includes the following information and more:

- A groundbreaking, independent <u>report</u> on true disparities between addiction and mental health and physical health related to in-network use and provider reimbursement rates
- A <u>report</u> from the Trust for America's Health, finding that more than 1 million Americans have died between 2006 and 2015 from drug overdoses, alcohol and suicide
- CMS' final rule impacting psychiatric partial hospitalization rates for Medicare
- Joint Commission 2018 Patient Safety Goals for Behavioral Healthcare and Hospitals

Go to AHA's Behavioral Health Webpage to access other AHA resources for behavioral health leaders.

Rebecca B. Chickey

Director, AHA Section for Psychiatric & Substance Abuse Services, rchickey@aha.org, 312-422-3303