



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: [November 2016](#)

AHA Election Update

AHA post-election breakdown, Nov. 9, at 4 p.m. ET: Who will be our 45th president? Will Congress remain under Republican control, switch to Democratic control or will it be divided? And what does it all mean for hospitals? Please [register](#) to join AHA President and CEO Rick Pollack and Executive Vice President Tom Nickels for a breakdown of the 2016 election and what the results mean for hospitals.

Chronic care legislation: The Senate Finance Committee Chronic Care Working Group has released a [discussion draft](#) of legislation to improve care for Medicare beneficiaries with chronic health conditions. According to a committee [summary](#), the draft legislation would revise and extend the Independence at Home demonstration, and provide certain flexibilities for Medicare Advantage plans. AHA supported a number of the draft's proposals in a January [letter](#) to the working group.

AHA Regulatory Update

Final provisions of MACRA physician payment system: CMS has issued a final rule with comment period implementing key provisions of the new physician payment system required by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). AHA's [Special Bulletin](#) provides highlights of the final rule. A new AHA tool, the [MACRA Tracker](#), helps hospitals evaluate where to invest time and resources in preparing for the program by [identifying](#) the areas of certainty or expected fluidity in the final rule. AHA has also created a MACRA 101 [video series](#), including "MACRA Minutes" that explore various aspects of the new payment system.

Grants to enforce ACA Parity: CMS has awarded \$25.5 million in [grants](#) to 22 states and the District of Columbia to enforce and oversee compliance with Affordable Care Act requirements for essential health benefits, preventive services, parity in mental health and substance use disorder benefits, appeals processes, and medical loss ratios.

OPPS/ASC final rule adopts revised site-neutral policy: CMS has issued a [final rule](#) updating hospital outpatient prospective payment system rates by 1.65% in 2017 compared to 2016. The rule also implements Section 603 of the Bipartisan Budget Act of 2015, which requires that, with the exception of dedicated emergency department services, services furnished in off-campus provider-based hospital outpatient departments that began billing under the OPSS on or after Nov. 2, 2015 no longer be paid under the OPSS. Under the final rule, hospitals will be paid under the physician fee schedule at newly established rates for these services. For 2017, the payment rate for these services will generally be 50% of the OPSS rate. AHA's [Special Bulletin](#) provides additional detail, including the impact on psychiatric partial hospitalization programs.

Final 2017 physician payment rule: CMS has issued its [final rule](#) for the physician fee schedule for calendar year 2017. After application of the 0.5% payment increase required by the Medicare Access and CHIP Reauthorization Act of 2015 and mandated budget neutrality cuts, physician payment rates will increase 0.24% for 2017 compared to 2016. The agency also finalized a number of new codes to more accurately pay for primary care, care management and other cognitive specialties, including separate payments to primary care practices that use interprofessional care management resources to treat patients with behavioral health conditions.

AHA Resources

Report documents dramatic rise in inpatient drug costs: Inpatient hospital drug costs increased more than 38% per admission between 2013 and 2015, according to a new [report](#) from the University of Chicago's NORC, an independent research institution. The survey was commissioned by the AHA and Federation of American Hospitals. AHA also released an [infographic](#) outlining how rising drug prices are hurting hospitals and potentially limiting access to care for patients.

AHA's Hospitals Against Violence initiative: AHA has released a [web-based resource](#), to help hospitals and health systems address violence and the toll it takes on their communities and colleagues. The webpage provides information on national, state and local efforts to help end violence in communities, and to help hospital employees cope with the impact of violence, whether at home, on the job or in their neighborhoods. On Nov. 15, the AHA's *Hospitals Against Violence* initiative will host its first monthly members-only webinar, which will focus on a Kansas City partnership to prevent the long-term health impacts of childhood trauma. [Click here](#) to register for the 4 p.m. ET webinar.

AHA video encourages young adults to enroll in health coverage: With open enrollment in the 2017 Health Insurance Marketplaces starting Nov. 1, a new AHA [video](#) highlights the importance of health insurance for young people. Hospitals are invited to share the video with their communities, on their websites and through social media channels. Open enrollment runs through Jan. 31. For coverage starting Jan. 1, consumers must sign up by Dec. 15. For more information and to access the video, available in English and Spanish in 30- and 60-second formats, visit www.aha.org/getcovered.

Why Hospital Leaders Need to Think Creatively About Behavioral Health: AHA's H&HN [speaks](#) with Wayne Young, SVP, behavioral health, JPS Health Network and Section Governing Council Chair.

AHA Members Only Webinars

- **November 16, 3:30 ET -- *Essentia Health's COAT Program Reduces Opioid Addiction.*** Dr. David Herman, CEO, and Dr. Brian Konowalchuck, Essentia Health, Duluth, Minn., will describe the evolution and impact of their *Chronic Opioid Analgesic Therapy* (COAT) program. The COAT program is designed to help people with a history of chronic opioid use reduce or eliminate their dependence on the medications for non-cancer-related pain. To register, [click here](#).
- **December 7, 3:30 ET -- *Expanding Mental Health Services in the Face of a Workforce Shortage.*** Caroline Fisher, M.D., vice president and department chair, and Heidi May-Stoullil, operations director, mental health, Samaritan Health Services, Corvallis, Ore., will explore the state of the mental health workforce and practice, examine outpatient models of mental health care extension and share how Samaritan Health System is trying to expand access by changing the way mental illness is address in both primary and specialty care. To register, [click here](#).
- **December 13, 3:00 ET -- *Morrison County's Success in Combating Prescription Drug Abuse.*** Lee Boyles, President, and Kathy Lange, Foundation Director, CHI St. Gabriel's Health, Little Falls, MN will describe the work and impact of a community *Prescription Drug Task Force*. In only four months prescription drug usage has decreased and \$439,000 taxpayer dollars saved. To register, [click here](#).

[The November Behavioral Health Update](#) includes information on: A [news release](#) from the American College of Emergency Physicians on increased waits for psychiatric patients in emergency departments; A [federal task force report](#) with recommendations to improve behavioral health parity; and more. As always, [click here](#) for more resources for AHA member behavioral health providers.

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