

# Federal Policy Update

**National Council for Behavioral Health**



@NationalCouncil



TheNationalCouncil.org 



# UNITE

## FOR BEHAVIORAL HEALTH

Lack of access to timely, high-quality treatment is the greatest barrier to a healthier America. We are **fighting to build a nation** that recognizes:

***Without mental health, there is no health. Without access to addiction treatment, recovery will be out of reach for many.***

*—Chuck Ingoglia, National Council President & CEO*

# Our Platform

1. Change the Model: CCBHCs in all 50 states
2. Respond to the Addiction Crisis
3. Strengthen the Field: Workforce Development
4. Build on the Parity Law
5. Expand Mental Health First Aid

# Recent News From Washington

- **Congress passes a continuing resolution (CR)**, keeping the federal government open through **November 21**. This included a **short-term extension for CCBHCs**.
- **FY2020 work continues**. Initial reports indicate minor increases health funding, including bumps for SAMHSA, NIH, Mental Health First Aid, and CCBHC expansion grants.
- **CMS** moves to permit **work requirements**, despite legal challenges. At the same time, feds expand **behavioral health wavier opportunities**.
- Key National Council **priority bills reintroduced**.

# A note about mental health & SUD appropriations...

- White House has proposed various cuts to SAMHSA programs over last 4-5 years to pay for new increases
- Congress has largely rejected program eliminations (*e.g. Mental Health First Aid, Primary-Behavioral Health Integration*)
- Major recent increase to addiction spending
- July budget deal secures topline budget numbers through FY2021

**Sequestration and its mandatory spending cut are gone!**

# Meanwhile, at the White House...

## *Emphasis on “Flexibility”*

“Today, we commit to ushering in **a new era** for the federal and state Medicaid partnership where **states have more freedom** to design programs that meet the spectrum of diverse needs of their Medicaid population...”

– CMS Administrator Seema Verma

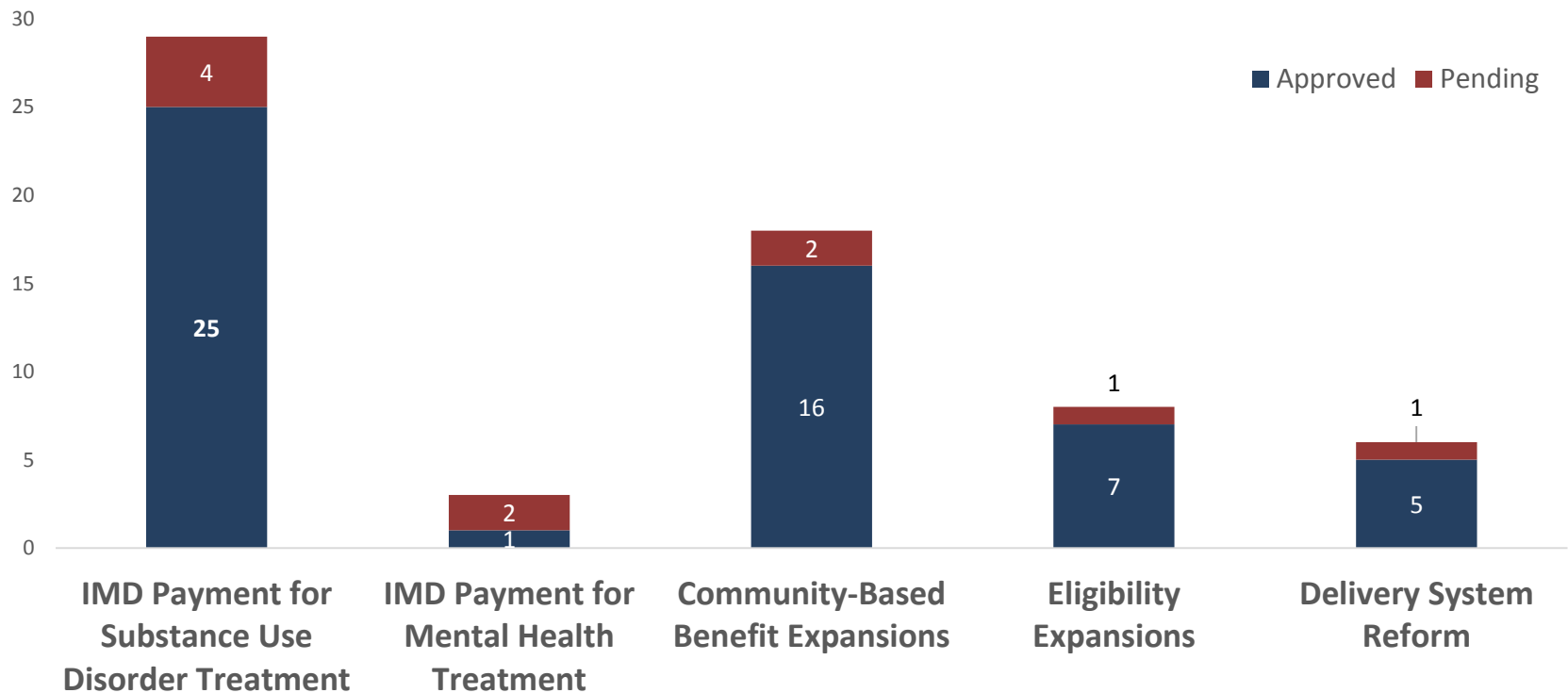
# Medicaid Managed Care Proposal



- [Proposed rule](#) would rollback many of the managed care standards
- Relaxes requirements that support **network adequacy** and **provider pay**
  - Rolls back time and distance standards for states to choose
  - Gives states flexibility to determine actuarial soundness
- National Council comments to CMS

# Waivers with behavioral health provisions

Approved and pending Section 1115 waivers with behavioral health provisions



Source: Kaiser Family Foundation,  
Current as of September 18, 2019



# New Section 1115 Opportunities

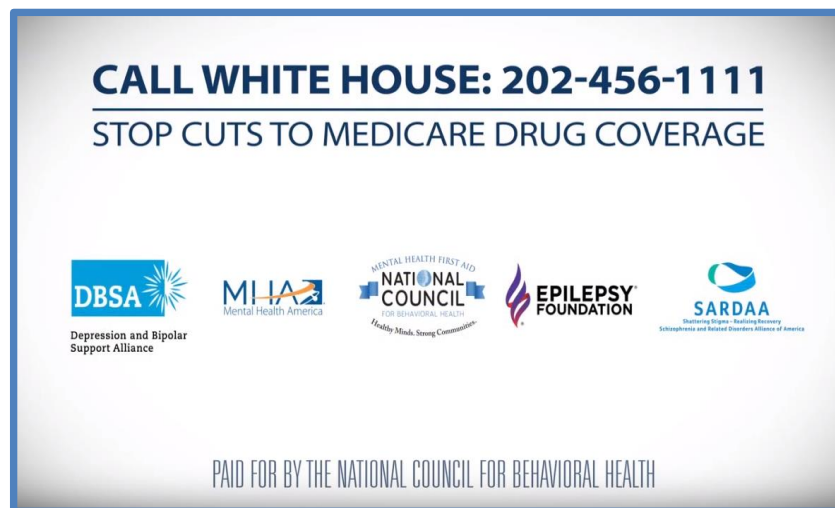
- November 2018 State Medicaid Directors letter explains how states can use 1115 waivers to “**support innovative service delivery systems**” for adults with serious mental illness (**SMI**) and children with serious emotional disturbance (**SED**).
  - Letter includes a demonstration, allowing states to **waive the IMD exclusion for short-term stays (around 30 days) for mental health treatment in IMD settings.**
- CMS Guidance for Medicaid Innovation via 1115 waivers for reducing substance use disorder

CMS highlighted **Certified Community Behavioral Health Clinics (CCBHCs)** as a model states could use to address these issues and other system improvements simultaneously.

# Medicare Part D Proposed Rule

Affects patients with:

- **Mental health conditions**
- Epilepsy
- HIV/AIDS
- Cancer
- And more...



**November 28:** Proposed rule would have allowed utilization management techniques within six protected classes (ex: step therapy, prior authorization).

**May 16:** CMS walked back each of its harmful proposals; a great advocacy win for National Council members and clients they serve.

# Congressional Work on Opioids

- Congress continues to be focused on the opioid and suicide crisis
- However, the fiscal climate means there is little desire to spend new money.
- Most investment is made via short-term grants, not expanding or improving insurance coverage.



# Congressional Work on Opioids

- More than 70 unique bills were rolled into SUPPORT for Patients and Communities Act, **signed into law** October 2018
- **Concerns:**
  - Few provisions spend any new money
  - Not a comprehensive response to addiction crisis
  - Does not support the full continuum-of-care for SUDs
  - Very OUD focused

*\*Bills included as a direct result of National Council advocacy efforts.*

## What's In It?

**Telemedicine\***

**SUD Treatment Workforce\***

**Behavioral Health IT\***

Recovery Housing Best Practices

MAT Prescribing Expansions

Parity for CHIP Plans

Temporary IMD Rule Repeal

Medicare OTP Access

Health Homes for SUDs

SUD Provider - Medicaid Capacity Demo

New and Reauthorized Grants

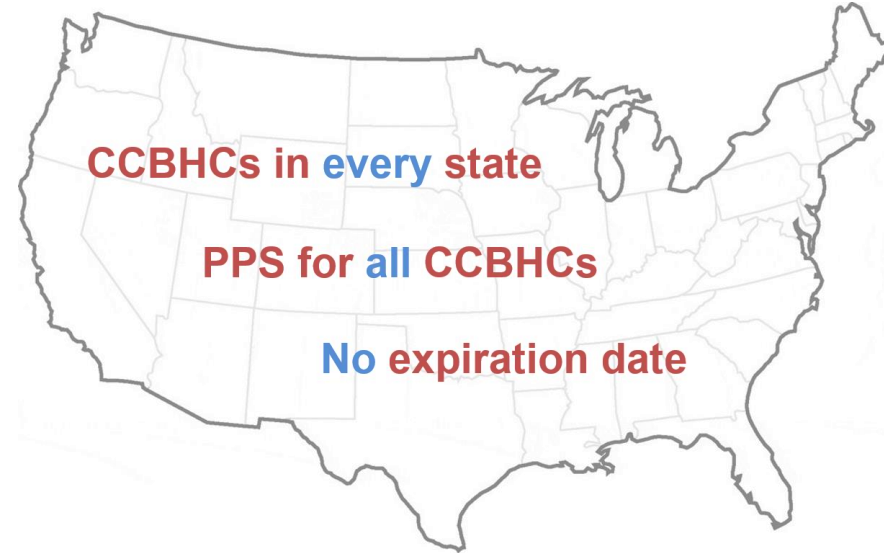


# Change the Model: CCBHCs in Every State



- CCBHC fly-in, print ads, op-eds, continued lobbying and more...
- 3 unanimous votes in Congress to extend the CCBHC demonstration. **The program now expires November 21.**
- Additional extension, expansion possible this fall via **Excellence Act expansion bill**

## Our Vision: CCBHCs 2.0



# Excellence in Mental Health and Addiction Treatment Expansion Act (S. 824/ H.R. 1767)



Sens. Roy Blunt (MO) and Debbie Stabenow (MI)



Reps. Doris Matsui (CA) and Markwayne Mullin (OK)

The bill, introduced March 14, 2019, would:

- **Extend the original eight states for an additional two years.**  
MN, MO, NJ, NV, NY, OK, OR, PA
- **Expand for two years to include the other 11 states** that applied but were not originally chosen for participation. Including: CA, CO, IA, IN, KY, MA, MI, NC, NM, RI, TX



# Respond to the Addiction Crisis



- CCBHCs expanding access to addiction care
- National Council advocacy to protect SAMHSA funding
  - Block grants, STR/SOR grants, prevention
- Legislative priorities:
  - **Mainstreaming Addiction Treatment Act (S. 2074/H.R. 2482)\***
  - **Improving Access to Remote Behavioral Health Technology Act (S.2244/H.R. 4131)**
  - Requiring education of controlled substance providers on OUD
  - Remove prior authorizations and other utilization restrictions in Medicaid

***\*June 4, 2019:** National Council Board of Directors voted unanimously to support this legislation*



# Strengthen the Field: Workforce Development



- CCBHCs supporting safety-net clinics in hiring new staff at all levels
- Championed loan forgiveness for SUD professionals, supported similar legislation for MH professionals
- Championed adding addiction treatment organizations as eligible sites for NHSC loan repayment
- Legislative priority: **Mental Health Access Improvement Act (S. 286/H.R. 945)**
  - Allows marriage and family therapists and mental health counselors to bill Medicare







# Expand Mental Health First Aid



***2 million trained in MHFA!***

- Increased MHFA funding in draft Senate appropriations language
- **National De-Escalation of Violence and Community Safety Training Act (H.R. 2457)**
- Legislative victories in Illinois and California
- Continue work in other states
  - Training requirements for specific groups (teachers, law enforcement)
  - Funding
  - Inclusion in high school curricula (tMHFA)



**Our team connected with 500+ state legislators and staff at NCSL's 2019 Legislative Summit**



- 2020 General Election Activities
  - Presidential Candidate Forums
  - Mental Health for US
  - Get Out the Vote
- Continued activities to strengthen state-based advocacy
- Data partnership with USC Schaeffer Center
- Looking ahead: Introduction of **Crisis Stabilization and Community Re-entry Act of 2019**
  - Strengthen communities' crisis response systems
  - Advance use of long-acting injectables prior to re-entry
  - Support suicide prevention in jails
  - Provide technical assistance to providers working with justice-involved populations

# As former Senate Majority Leader Everett Dirksen (R-IL) said...



*"When I feel the heat,  
I see the light."*

AUSTIN | TEXAS | APRIL 5 - 7

# NATCON | 20

## *Kaleidoscope*

*Registration is now open!*

# Questions?

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