

Subject: REDC Policy Update 12.6.19

Happy Friday REDC Members,

Below you will find your weekly policy update.

Really quick on Timely Billing for Patients: We continue to negotiate on Section 305 Timely Billing for Patients provision with the Senate and House. We are now working closely with House leadership to watch out for this provision as it continues to be in play within the Senate.

It is increasingly likely this provision will be punted to 2020, so we continue to push awareness on the House side as they have not heard about this particular issue on a large scale. This makes us increasingly concerned about its ability to be slipped in last minute.

For our treatment centers in California, you can send an email to Crozer Connor in Representative Mike Thompson's (D-CA-05) office at crozer.connor@mail.house.gov about the consequences a 45-day adjudicated billing turnaround time with a steep penalty beyond that time limit can have on your centers. I have already reached out to several of you, so thank you for rallying your colleagues around this issue.

SERVE Act

House New Co-sponsors: Cardenas (D-CA), McCollum (D-MN), Hartzler (R-MO), Courtney (D-CT)

Note Hartzler & Courtney sit on Armed Services; McCollum sits on the Appropriations Defense Subcommittee

Senate New Co-sponsors: No new sign-ons yet

Department of Defense Military Family Readiness Council Meeting—December 17

On December 17th, the DOD will host a meeting of the Military Family Readiness Council who make specific recommendation for improving the lives of military families to the DOD (they are independent of the DOD).

This is a federally mandated advisory council.

We are set to attend and speak, and sent in our comments surrounding opening up access to care for military families and early identification of eating disorders for families- *thank you to Pam Kidd and Jillian Lampert for your input*

ACA Congressional

House Energy & Commerce Health Subcommittee Holding Hearing on Universal Coverage Proposals

The hearing will likely have two panels of witnesses discussing seven different bills, including Medicare for All, aides told Alice. One panel would be composed of members who are sponsoring the bills; the other panel would include outside experts and advocates.

Rep. Brian Higgins (D-NY) said he plans to testify in favor of his bill allowing Americans over 50 to buy into Medicare. Rep. Rosa DeLauro (D-CT) hopes to speak on behalf of her universal coverage plan.

It is unclear who will testify in support of the House's Medicare for All bill, given that the former CMS Administrator Don Berwick (the preferred pick of bill lead Rep. Pramila Jayapal (D-WA) won't be available.

The format isn't ideal for Medicare for All advocates, given that the bill will be competing airtime with six other, more modest pieces of health care legislation.

Although Medicare for All is not supported by House Democratic leadership, this hearing is held to appease the more progressive members of the Democratic Caucus.

Partnership for America's Healthcare is the Army Built to Fight Medicare for All

This multimillion-dollar cooperative is designed to overwhelm not just the swelling Medicare for All movement, but every single Democratic proposal that would significantly expand the government's role in health care.

This broad-based coalition is a rare collaboration in Washington lobbying's ultracompetitive culture, and it took some months to coax chief rivals on board.

There were negotiations over who would control the group and set its principles, coalition members present at the time said, and importantly, how it would remain isolated from the groups' individual policy agendas. "One of the ground rules we agreed upon early on," said David Merritt, a participant on behalf of insurer lobby AHIP, "was you're not going to bring your baggage to this coalition."

The Partnership officially launched in June 2018 with five founding members: Federation of American Hospitals, AHIP and fellow insurer lobby the Blue Cross Blue Shield Association, drug industry giant PhRMA and the country's premier association of physicians, the American Medical Association.

It's since expanded, signing up the influential American Hospital Association and some of the nation's largest individual hospital systems; biotech trade group BIO; the health care executive roundtable Healthcare Leadership Council; and a series of trade associations representing smaller slices of the industry like insurance brokers and financial advisers, generic medicine manufacturers and radiologists. Recently, the Partnership branched onto the state level, adding local Chambers of Commerce, industry groups and private companies.

The Partnership — as its critics are eager to point out — makes no claim to being a popular, up-from-the-ground movement. The biggest portion of its funding comes from a minority of its membership, and most of the 92 groups

listed as Partnership members don't weigh in on its day-to-day strategy in any substantial way.

Two Washington lobbying powers, meanwhile, defected in the past year. The National Retail Foundation quietly dropped out amid its escalating feud with hospital and doctor groups over surprise billing legislation.

Then in August came the bigger blow: The American Medical Association, a founding member, headed for the exits. Partnership members launched a series of broadsides at the doctor group in the wake of its departure, with multiple coalition members accusing it of caving to the liberal left.

In the two years since Democrats unveiled their Medicare for All plan, polls suggest that anxiety has also steadily risen. Voter support for Medicare for All narrowed from a high of 59% in March 2018 to 53% this month, according to Kaiser Family Foundation.

House Democrats Introduce Fair Indexing for Health Care Affordability Act

Introduced by Reps. Matsui (D-CA), Horsford (D-NV) and Van Drew (D-NJ), the legislation would reverse the Trump Administration's changes to how the ACA premium tax credit and out-of-pocket cost limits are determined.

Critics have said the administration's changes will raise costs for millions of ACA shoppers.

ACA Regulatory

Open Enrollment 2020

Nearly 2.9 million people signed up for ACA coverage through the first month of open enrollment, about 10% fewer than at the same time last year with two weeks left for people to purchase a 2020 plan. These figures don't reflect activity on state-run exchanges.

The drop-off was observed for both new enrollments and returning customers, and enrollment is behind last year's pace in every state, except Mississippi.

Telehealth Payments Improving

A new report from law firm Foley & Lardner shows payment for telehealth services is getting better. However, parity in payment is still an uphill battle.

Only 10 states have true payment parity—AR, DE, GA, HI, KY, MN, MO, NM, UT and VA.

Other states maintain laws that restrict telehealth services including FL, IL, MA and MI, which have laws that don't require health plans to cover telehealth services.

Best,

Allison, Katrina and Luke (the newest addition to the Center Road Solutions team!)