

8/14/2020

Good Afternoon REDC Members,

This is what we call- "August Recess"- so you'll see much of our crew here in DC very happy that Congress fled DC until after Labor Day haha. So happy August Recess to you! Below you'll find your weekly policy update as well as some reminders:

- **Reminder to Share Virtual Advocacy Day Information- DEADLINE TO REGISTER IS AUGUST 28th:**
 - Virtual Advocacy Day is set for **September 23, 2020** between 10AM-5PM EST [*exact times will vary based on team locations*], with message training at 6-7:30PM EST on **September 22, 2020**.
 - We urge REDC Members to share the information and encourage your staff to attend, particularly including your operations/contracting staff in addition to others!
 - The topics that we will be advocating can be beneficial to REDC Members if passed into law:
 - **Nutrition CARE Act**- providing medical nutrition therapy (dietitian services) coverage under Medicare Part B. *Note if passed, this will also go to TRICARE.*
 - **Telehealth Expansion** for ERISA & ACA plans
 - Registration Information to Share:
 - Here is the link to the registration page: <https://bit.ly/393TDVF>.
- **SERVE Act and Military Eating Disorders GAO Study:**
 - **SERVE Act:**
 - With the infighting around the 4th COVID package (HEALS/HEROES Act), there was no "conferenced" package of the NDAA brought to the House or Senate floor when the Senate fled town last Friday.
 - Lawmakers are negotiating behind the scenes and we are on defense to ensure both House & Senate report language remains in. Once the NDAA is passed into law, the DoD will commence their work on the report language items including a report to Congress on the cost of adult residential treatment for military dependents as well as the encouraging language to enact the SERVE Act.
 - **GAO Report:**
 - GAO Released their Study on Military Eating Disorders that the EDC Requested in June 2018 (through Congress) and REDC Advocated on in May 2018.
 - In short, the report highlights that the DoD does not screen or take preventative action for eating disorders once a servicemember enters the military. The report also highlights limited knowledge of eating disorders by DoD medical professionals.
 - Additionally, DoD claims that there is not an access to care issue, listing 166 facilities that treat eating disorders under TRICARE.
 - In working with Jillian Lampert and Chase Bannister from the EDC, we estimate that 1/4th of those facilities listed in the GAO study do not actually treat eating disorders or are duplicates.

- The Alliance for Eating Disorders Awareness, through their FindEDHelp system, will be verifying all facilities and providing us with follow-up data to respond back to GAO with any discrepancies.
 - **You can find the final report below. I'd recommend taking a read and if there is anything that pops up to you as concerning, please do let us know as we can include in our Congressional response back to GAO.**
- **Telehealth:**
 - **New CMS Report to Congress on "Reducing Barriers to Using Telehealth and Report Patient Monitoring for Pediatric Populations Under Medicaid**
 - Centers for Medicare & Medicaid Services (CMS) released a final Report to Congress entitled, "Reducing Barriers to Using Telehealth and Remote Patient Monitoring for Pediatric Populations under Medicaid" as required by section 1009(d) of the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT Act). This report identifies best practices and potential solutions for reducing barriers to using services delivered via telehealth for the treatment for substance use disorders (SUDs) among pediatric populations under Medicaid.
 - **The 117 page report can be found here:**
<https://www.medicaid.gov/medicaid/benefits/downloads/rtc-reducing-barriers-may-2020.pdf>
 - **CCD Taskforce on Health Released Their New Principles on Telehealth:**
 - <http://www.c-c-d.org/fichiers/CCD-Health-TaskForce-Telehealth-Principles-July-2020.pdf>
- **ACA Watch:**
 - **Trump Executive Order on Pre-Existing Conditions**
 - President Donald Trump on Monday acknowledged a prospective executive order he's considering to make insurers cover pre-existing conditions amounted to political messaging — and that Obamacare already offered such protections.
 - Trump's administration has also increased the availability of cheap, skimpier health plans that don't meet Obamacare's coverage requirements and wouldn't protect some patients with chronic conditions.
 - **New Ruling Against Trump Administration- Owes Obamacare Payers Subsidy Funding (Politico):**
 - A federal appeals court ruled on Friday that the Trump administration owes insurers unpaid subsidies from an Obamacare program that the president abruptly halted nearly three years ago. But the court said the health plans won't receive all the money they're claiming because they've already recovered much of what was lost.
 - The decision by a three-judge panel of the U.S. Court of Appeals for the Federal Circuit didn't come as a surprise after the judges made it clear during January arguments that they didn't like the idea of insurance companies getting a "double" recovery of money. However, sorting out the exact damages could be extremely complicated.
 - **What this ruling does:** The three-judge panel said the government has to continue funding the subsidies promised by the Affordable Care Act

— a decision that extends to a slew of lawsuits for unpaid sums since 2017. The ruling syncs with an April Supreme Court Decision on a separate Obamacare subsidy program, in which justices said the government owed billions to health plans. But the appeals court noted insurers aren't entitled to all the unpaid money, since they came up with a plan to recover the lost subsidies through tax credits that go directly to Obamacare plans as a government discount for lower-income exchange customers.

- The health plans employed a tactic known as “silver-loading,” in which they hiked the price of certain benchmark plans used to calculate premium subsidies so that they could collect enough in tax credits to make up for what they lost in cost-sharing reduction payments.
- The panel ruled these additional subsidies should get deducted from any insurer damages starting in 2018. And the judges said it's up to insurers to prove what they are owed.

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