

03/05/2021

Good Afternoon REDC Members,

Below is your policy update for the week:

I. Military & SERVE Act

• SERVE Act

- SERVE Act was introduced in the House last week, and has since added an additional 5 co-sponsors.
- Our team is heavily working on submitting all of the NDAA requests for House & Senate Armed Services Committee Members, and started to reach out to many REDC Members whose facilities were located in that district to also submit to have a double constituent request. ***Please note if we reach out, these are time sensitive submission requests.***
- NDAA process will be delayed this year, as Committee won't start creating their base text until **after** the President's budget is received...which is expected in mid to late April. We'll likely see markups in committee not be until June/July or even the Fall.
- Sen. Shaheen's team is running up the chain a letter to DoD on fully implementing the Senate report language from last year's NDAA on SERVE.
- Finally, we are working on a letter to DoD from REDC that details both the need to implement the Senate Report language and address the contracting issues our members face.

• SERVE Act Press

- Two articles regarding eating disorders in the military, including one directly mentioning the SERVE Act.
 - [Eating disorders hinder optimal health and TFF nutrition concept | Health.mil](#)
 - <https://riponadvance.com/stories/katko-supports-bill-providing-eating-disorder-treatment-for-service-members/>

• Congressional Briefing

- If you missed the Congressional briefing last week, we did have solid attendance with 186 people attending, including 66 Congressional Staff (300 registered, including 88 Congressional Staff).
- From this briefing, we received a call from Rep. Meng (D-NY) who sits on the Defense Appropriations Committee and began discussions on what things they can lead on Appropriations for military eating disorders given their strong interest. We offered up the following:
 - Discretionary funding for training of military health professionals to screen, briefly intervene and refer for treatment (SBRIT) for eating disorders

- Having DoD conduct anonymous surveillance of service member eating disorders to get better research/data on the breadth of the issue due to the stigma.
- **DoD & Pressure**
 - **Meeting with DoD Assistant Secretary:**
 - Yesterday, we met with Acting Assistant Secretary of the DoD Military Health System, Dr. Terri Adirim with the TRICARE for Kids Coalition.
 - Approximately 8 of us were on the call, and it was meant to be an introduction to all of our groups and issues as she is new to this role.
 - The biggest takeaways were as follows:
 - Right now the DoD Secretary is focused on COVID relief for members and their families. I asked her if this includes mental health, and she said no, but its good to be on their radar. (You could tell she was disappointed she didn't have more to say)
 - Biden Administration's priorities for DoD include military families and addressing sexual assault, in addition to COVID.
 - Going forward, she will now set up 2-4 meetings per year with us to discuss issues.
 - **Armed Services Questions to DoD:**
 - HASC Professional Staff is inquiring what DoD is doing on all the current contracting issues REDC Members are experiencing.
 - We collected all that detail and the Committee was shocked, and we also submitted them two questions to ask DoD.

II. Telehealth

- **House Committee on Energy & Commerce Health Subcommittee Hearing**
 - Earlier this week, the subcommittee held a 4.5 hour hearing earlier this week on the use of telehealth during the COVID-19 pandemic and the path forward for this modality.
 - Surprisingly, both sides of the aisle were concerned less about overutilization and fraud than originally anticipated and were in agreement about expanding telehealth coverage post-pandemic.
 - REDC Consortium joined the Mental Health Liaison Group (MHLG) in a letter to Committee outlining our support for telehealth and our priorities.
 - The full letter is attached
 - A memo summarizing leadership's opening remarks and those of the witnesses is attached
 - Here are some great highlights from the hearing from both sides of the political aisle:

- [Rep. Upton](#) asked for comments on the expansion of telehealth for mental health services. 1:30:47-1:32:26 (about 2 minutes)
 - [Rep. Dingell](#) (co-lead of the TREAT Act) asked Dr. Ateev Mehrotra of Harvard Medical School about implementing a time-limited state reciprocity licensure agreement during the pandemic. 2:34:37-2:36:28 (about 2 minutes)
 - [Rep. Kelly](#) asked Dr. Jack Resneck of the American Medical Association about the experience of providing care across state lines before and during the pandemic. 2:57:14-2:59:44 (about 3 minutes)
- **Office of Inspector General Letter on Telehealth Fraud**
 - After pressure from telehealth industry and trade groups, Principal Secretary Inspector General Grimm issued a statement clarifying the difference between telefraud and telehealth fraud.
 - The full statement/letter can be read here: <https://oig.hhs.gov/coronavirus/letter-grimm-02262021.asp> and serves as a big win for telehealth services to continue in some way post-pandemic.

III. ACA

- **Special Enrollment Period**
 - More than 206,000 Americans signed up for health insurance through Healthcare.gov in the first 2 weeks of the 3-month SEP.
 - That compares with about 76,000 who enrolled during the same period last year, when people could only pick a plan if they had a special circumstance (i.e., job loss).
- **ACA Navigator Program**
 - The Biden Administration is setting aside \$2.3 million to finance ACA navigators' efforts to sign up more Americans during the 3-month SEP that ends May 15.
- **Research Linking COVID-19 deaths and Uninsured**
 - Families USA has [released a report](#) that has found nationally 1 out of every 3 COVID-19 deaths are linked to health insurance gaps.
 - More than 40% of all COVID-19 infections are associated with health insurance gaps.
 - By February 1, 2021 health insurance gaps were linked to an estimated 10.9 million COVID-19 cases and 143,000 COVID-19 deaths.

IV. COVID Relief Package

- The Senate should pass the latest COVID relief package via budget reconciliation tonight or over the weekend.

- The bill will have to be sent back to the House for them to accept the changes that were made to the bill.
- Democrats remain on track for the bill to be on the President's desk for signature before unemployment benefits expire on Sunday, March 14.
- Some of the items of interest in the bill include:
 - 100% COBRA subsidy for Americans through the end of the 2021 fiscal year.
 - This is an increase from the 85% subsidy the House passed. After much pressure from unions, money that was saved by the elimination of the \$15 minimum wage, and support from several Senators led by Sen. Cortez Masto (D-NV), it freed up extra monies to be spent.
 - \$35 billion for a temporary increase in ACA subsidies, which is estimated to add an additional 1.7 million people to the health exchanges.
 - Subsidies would be newly available to people earning 4x the federal poverty line, which is about \$51,520 for a single person and \$106,000 for a family of 4.
 - \$50M in grants for local behavioral health services via telehealth
 - \$500M for CDC to modernize the public health department's surveillance and analytics
 - Rural hospitals are also slated to get \$8.5 billion
 - Additional money for the FCC Rural Telehealth Broadband Program

Best,
Center Road Solutions Team