

03/12/2021

Good Morning REDC Members and Happy Friday!

Below is your policy update for the week:

I. American Rescue Plan/COVID-19 Relief

- The \$1.9 trillion package passed Congress earlier this week and was signed into law yesterday.
- **Key provisions include:**
 - **100% COBRA Subsidies**
 - For individuals who lost their jobs during the pandemic through the end of the fiscal year, September 30, 2021.
 - This is a provision the REDC advocated on by leading a support letter for COBRA subsidies last Congress for the Health Care Protection Act. The REDC also joined letters led by the Council for Affordable Healthcare on this topic.
 - **Increased ACA Subsidies**
 - Provision that no individual will pay more than 8.5% of their income on health insurance premiums.
 - By increasing the subsidies, this policy eliminates the subsidy cliff where some Americans made too much money to qualify for Medicaid, but made above 400% of the federal poverty line, which means they couldn't qualify for subsidized health insurance on the ACA marketplace.
 - **Tax Relief on Subsidies**
 - Provision that any individual that receive unemployment benefits last year--even if it was just 1 week--will not have to pay any subsidy overpayments that may be owed when filing their 2020 tax returns.
 - **Mental Health Block Grant Funding**
 - An additional \$3.5 billion for SAMHSA to support these programs
 - **Youth suicide prevention & mental health services**
 - An additional \$50 million to support existing programs that address the above issues

II. SERVE Act

- **NDAAs Submissions**
 - We are continuing to submit our requests and coordinating with REDC members in those districts/states of Armed Service Committee members so that were submitting multiple requests.

- Currently, we've pitched 85% of HASC and SASC members to include in their requests, receiving much more positive reception than previous years
- Sen. Shaheen (D-NH) has a pending CBO request out so once we get that back, we'll have more direction on the actual offset we'll need
- Overall, it is looking like the Committee won't markup until June/July as they are still waiting on the Presidents Budget which isn't expected to come out until April

• Regulatory

- We had a meeting with Acting Assistant Secretary Dr. Adirim with the TRICARE for Kids Coalition.
 - She discussed their priorities including military families, sexual assault, and addressing COVID-19.
 - When questioned if addressing COVID-19 includes mental health, she said not right now but seemed like it was the first time she thought about it.
- The REDC will be sending a joint letter with the EDC to the Defense Health Agency requesting the implementation of the SERVE Act provisions that passed within the Senate NDAA report last Congress.
 - The letter will also address the issues current TRICARE contracts are experiencing (i.e. overdue payments).

III. Telehealth

• Telehealth Legislation

- We had a meeting earlier this week with Rep. Kim Schrier (D-WA) office on the idea of amending their Health Care at Home Act bill.
 - This is legislation that the REDC supported during their joint advocacy day with the EDC last fall.
 - The bill would require all individual and group plans to cover telehealth services (with payment parity) for services the can be provided via telehealth during the duration of the public health emergency.
 - We are exploring an option of narrowing that bill to just cover essential health benefits (which includes MH/SUD services) under ACA plans that are appropriate to be delivered via telehealth after the public health emergency.
 - The office is open to this idea and we are working on drafting up what this would look like for the staffer to share with the Congresswoman.
 - We have a meeting next week to discuss the same idea with Sen. Tina Smith (D-MN) office who is the Senate lead of the Health Care at Home Act to gauge their interest.

- **Energy & Commerce Telehealth Hearing**

- We have received confirmation from Rep. Cardenas' (D-CA) office that they will be submitting our question for the Congressional record.
- The question will be addressed to Dr. Meghan Mahoney, CEO of Stanford Health Care who was one of the witnesses at the hearing. The question is:
 - “In California, we have approximately 1.3 million individuals with an eating disorder. Given how large the state is, we have several rural communities or communities that just don’t have access to specialized multidisciplinary treatment like eating disorders. The additional telehealth flexibilities provided by CMS has improved access for individuals that normally wouldn’t be able to access this type of treatment. Specifically, allowing coverage for the intensive outpatient (IOP) and outpatient (OP) levels of care gives people the additional opportunity to seek care and engage in treatment sooner potentially decreasing illness progression.
 - Dr. Mahoney, what is your opinion on continuing telehealth coverage after the pandemic for IOP and OP care for mental health conditions like eating disorders?”

IV. State Parity Call & Nat'l Council for Behavioral Health New Report

- **Kennedy Forum's Monthly Parity Call**

- The attached slide deck highlights the immense number of state-level parity legislation that has been introduced over the last month.
- The Kennedy Forum also highlight a new report from the Legal Action Center (attached) on SUD coverage in Medicare.
 - The report finds that "Medicare's coverage of SUD care is strikingly limited and out of sync with evidence-based treatment models and the current delivery system of SUD treatment."
- As REDC members know, similar gaps exist for MH coverage.

- **"State of the Industry" Report**

- The National Council for Behavioral Health released a new ["State of the Industry"](#) report, finding 40% of mental health and addiction treatment organizations surveyed will not be able to keep their doors open past the end of the year without additional federal relief.
- Key findings encompassing the last 3 months include:
 - **Organizational viability and access to care for millions of people is at risk of disappearing**, with 40% of mental health and addiction treatment organizations reporting a less than one-year financial window under the current situation.

- **Demand for mental health and addiction treatment services is increasing**, with 67% of organizations seeing an increase in the demand for services.
- **Demand for youth mental health and addiction treatment services is increasing**, with 63% of organizations seeing an increase in the demand for youth services.
- **68% of organizations** have had to cancel, reschedule or turn away patients; **nearly half of organizations** have seen patient waitlists grow with an **average waitlist growth of 7.2%**; and **half** of all organizations have laid off or furloughed employees.

Wishing all of you a great weekend,

Center Road Solutions Team