

04/23/2021

Good Afternoon REDC Members,

Happy Spring!

Congress is kicking into high gear with the anticipated arrival of the President's full FY22 budget plan and infrastructure package in the next several weeks. Below is your policy update as we readying for a busy spring and early summer.

I. SERVE Act

• **ACTION ALERT: Request for REDC Members with a Presence in Massachusetts, Montana, and North Carolina**

- Recently we've pitched Sens. Warren (D-MA), Daines (R-MT) and Burr (R-NC) on the SERVE Act. All three meetings were positive, but we can use some calls/emails from REDC Members and/or their staff/patients who live in MA, MT, or NC to help amplify and get them to co-sponsor the legislation. Please share the Phone2Action with your networks if they are in those three states:
 - Montana (Daines): <https://p2a.co/4Ulpdm>
 - North Carolina (Burr): <https://p2a.co/1bRrCZK>
 - Massachusetts (Warren): <https://p2a.co/xJRqgm>

• **Letter from REDC sent to DoD:**

- The REDC led a letter which EDC collaborated on to the DoD requesting implementation of the SERVE Act provisions from last year's NDAA and to resolve additional issues (i.e. overdue payments).
- This letter was sent on Wednesday to Acting Assistant Secretary Adirim and Director of DHA LTG Place and is attached.

• **White House Meeting with TRICARE for Kids Coalition to Include SERVE Act**

- We led the coordination of a meeting with the White House for the TRICARE for Kids Coalition (includes AAP, Children's National, NACBH, NMFA, etc.) and this meeting will be next Tuesday.
- Included in this request is removing the age limits for military families to access residential eating disorders care from the SERVE Act.
- We will be meeting with four senior-level staff from the Office of the President and Office of the First Lady to discuss these requests, including the Joining Forces Team.

• **Sen. Shaheen meeting with Vice President Harris, to include SERVE Act**

- Earlier this week Sen. Shaheen's office (the SERVE Act lead) reached out as the Vice President will be in New Hampshire on Friday.

- The Senator will be having a private discussion with the Vice President and will raise the issue with her around the SERVE Act to remove the age limit for military families on residential treatment!
- **Senate Hearing FY22 Budget of the Defense Health Program**
 - Earlier this week, the Senate Appropriations Subcommittee on Defense held a hearing to address the DoD Defense Health Program budget for FY22.
 - Acting Assistant Secretary Adirim mentioned in his [testimony](#) that "access to timely, high quality mental health services and related activities to reduce the incidence of suicide among servicemembers, their families, and all beneficiaries" was a chief priority.
 - Additionally, he mentioned the Department has "undertaken a broad-based campaign encouraging servicemembers to seek mental health treatment when signs and symptoms occur...and destigmatize mental health care overall."
 - These comments can be found on page 16 of his testimony, which is hyperlinked above.
 - A full memo summarizing the conversation is attached.

II. Telehealth

- **The Alliance for Connected Health Policy held a telehealth summit this week, which we tuned into on behalf of the REDC.**
 - Christen Linke Young, Deputy Assistant to the President for Domestic Policy and Deputy Director for Health and Veteran's Affairs presented on the health priorities of the Administration. These included:
 - Broadband investment within the American Jobs Plan to bring high speed internet to families that are currently left out.
 - Wants all Americans to be able to participate in the modern economy.
 - Access to affordable health coverage
 - Special enrollment period for Healthcare.gov
 - Increased subsidies with the American Rescue Plan allows 80% of Americans to find health coverage for \$10 per month per person.
 - Commitment to racial justice and health equity--race and place matter in health outcomes
 - Equity outside of COVID and investing in the public health workforce
 - Investing in mental health parity and defending health care protections for everyone
 - **Telehealth**
 - Utilization during the pandemic has been especially pronounced in the MH/SUD space

- Studies have consistently shown that interventions can be successfully delivered with high patient satisfaction
- Telehealth has closed equity gaps in care access
- Questions for us:
 - Where is telehealth adding value that will persist after COVID?
 - How do we measure that value quickly after the pandemic?
 - Patient outcomes, experience, cost. This does not have to be formal studies.
 - What roadblocks did you run into and how can we solve them?

• **MedPac Report to Congress**

- The Medicare Payment Advisory Commission (MedPac) released a 500+ page [report](#) on policy suggestions to Congress.
- The highlights are notated below, but a summary of the key chapters of the report are attached for further information.
 - Overall, the commission does not recommend permanent policy changes due to the public health emergency (PHE), and believes temporary, targeted policies to affected sectors are a better solution for now.
 - Private insurers pay higher rates to clinicians generally. This is not a major issue now, but “eventually the difference between private insurance rates and Medicare rates could grow so large that some clinicians would have an incentive to focus primarily on patients with private insurance instead of Medicare patients.”
 - Medicare should cover telehealth for specified services regardless of location
 - Should cover select telehealth services in addition to services covered before PHE if there is potential clinical benefit
 - Should cover audio only too if there is potential clinical benefit
 - After PHE, go back to fee schedule facility rate (lower) for telehealth and collect data on service cost.
 - Policymakers should continue some aspects of telehealth coverage after PHE to gather more data on its impact/usefulness
 - There is concern that telehealth will supplement rather than substitute care, leading to higher expenditures.

• **Covid-19 Healthcare Coalition Telehealth Workgroup Survey**

- The [survey](#) asked just over 2,000 people who used telehealth during the pandemic to gain an understanding of patient satisfaction.

- Just more than 70% of individuals aged 18 to 30 said they were satisfied and would continue using telehealth.
- Patients were happy with the amount of time their providers spent with them.
- Demographically, the survey population was whiter and more female than the general population.

- **Telehealth State Debates**

- the TX House gave approval to a bill authorizing telemedicine reimbursement in Medicaid.
- DE lawmakers are debating keeping easier access to telehealth, for example, by striking down requirements that patients have an in-person visit first.
- KS officials are debating the right level of reimbursement for telehealth visits.
- Overall there is a total of 706 telehealth bills circulating among states.

Best,
Allison & the Center Road Solutions Team