

07/30/2021

Hello REDC Board,

Here is your weekly update.

I. NDAA & SERVE Act Status:

- Unfortunately, the Senate Armed Services Committee markup and the House SubCommittee markup did not include the SERVE Act because of the \$2M over 10 year mandatory funding offset to expand the care age limit from up to 20 to up to 64. Trust me when I say, it's extremely frustrating since we were able to cut \$28M off that score from last year.
- We have three more bites at the apple for NDAA:
 - House Full Committee markup on Sept. 1st
 - Senate Floor Vote
 - House Floor Vote
- Short Summary of the Strategy is to focus right now on the House Amendment in Full Committee Markup scheduled for **Sept. 1st**.
 - (1) See if we can cut the mandatory spending even further, limiting it to active-duty TRICARE beneficiaries
 - (2) Pressuring Chairman Adam Smith (D-[WA-9](#)) in Seattle area and Ranking Member Mike Rogers (R-[AL-3](#)) from Eastern Alabama
 - (3) Securing a Republican from HASC to co-lead w/ Moulton a HASC Amt. for the Sept. 1st Full Committee markup, since Katko isn't on Committee
 - (4) Week before the markup, pressure HASC Members to co-sponsor the amendment and vote in favor of it
- Emily on our team will be reaching out for your help with more grasstops, but in the short term if you have any relationships, know any non-eating disorders organizations or business leaders in the following Congressional districts, please let us know so we can collaborate to put more pressure on the members:
 - **Bacon (R-[NE-2](#)) SERVE Act Co-Sponsor:** Which is NE Nebraska with the main city being Papillion.
 - **Hartzler (R-[MO-4](#)) SERVE Act Co-Sponsor:** This is Western Missouri, the district just south of Kansas City, MO and KS.
 - **Bice (R-[OK-5](#)):** This is Oklahoma City and SW of Oklahoma City.
 - **Turner (R-[OH-10](#)):** This is Dayton area (SW Ohio)
 - **McClain (R-[MI-10](#)):** This is just north of Detroit.
 - **Stefanik (R-[NY-21](#)):** This is the NE tip of New York.
 - **Gallagher (R-[WI-08](#)):** This is the NE end of Wisconsin.
 - **Chairman Adam Smith (D-[WA-9](#))** in Seattle area and

- **Ranking Member Mike Rogers (R-[AL-3](#))** from Eastern Alabama
- Pitches since last Friday:
 - Gallego (D-AZ-07)
 - Larsen (D-WA-02)
 - Anthony Brown (D-MD-4)
 - We also met for a strategy meeting with Lead Katko's office last Monday.

II. Defense Health Agency Pediatric Advocacy Forum

- Yesterday we attended the DHA Pediatric Advocacy Forum, where we highlighted for the Director of DHA the need to expand the age limit for eating disorders residential care, ensure parity is applied to TRICARE per the Obama rules in 2016, and highlighted co-pay discrepancies are a parity violation.
- DHA Director highlighted the following priorities:
 - Getting all servicemembers and health care workers vaccinated for COVID
 - Continuing to expand telehealth- noting the positive usage they saw during the pandemic
 - Addressing TRICARE contracting issues, with having their T5 RFP released for new TRICARE payer contracts (noting this is a multi-year process)
 - We quizzed them on mental health as he didn't note it was a priority, and they said "they were aware of the need and recently have been talking about it around the issue of suicide"

III. LHHS Package Passes the House

- The LHHS bill HR4505 – including the following provisions on eating disorders – passed the House as part of the "mini-bus" package
 - \$1 million for SAMHSA's National Center of Excellence for Eating Disorders to provide trainings for primary care health professionals to screen, briefly intervene, and refer patients to treatment for eating disorders
 - Encouragement for the collection of data through CDC on unhealthy weight control practices through the YRBSS and BRFSS surveys
 - Encouragement for increased NIH support for eating disorders research and increased collaboration to address research gaps in genetics, prevention, diagnosis, and treatment of eating disorders

IV. Telehealth

- **White House Meeting & Comment Submissions**

- A couple weeks ago we led a meeting with 3 White House officials to discuss the Administration's telehealth policy and strategy in the immediate future and after the pandemic.
 - The American Psychiatric Association, American Foundation for Suicide Prevention, Association for Ambulatory Behavioral Healthcare, and the Association for Behavioral Health and Wellness (represents payers) joined us in the meeting.
 - Officials were surprised to learn that commercial telehealth coverage was an issue and we alerted them to the Optum announcement eliminating PHP/IOP telehealth coverage effective 9/30/21.
 - Officials discussed the recent Medicare Physician Fee Schedule (PFS) proposed rule that includes telehealth provisions, including extending telehealth flexibilities through 2023.
 - We have followed up with a series of studies and service delivery data on the efficacy of this health delivery service and working on securing a meeting with officials at Health & Human Services.

• **Notice of Benefit of Payment Parameters Rule**

- The Administration released their annual Notice of Benefit and Payment Parameter (NBPP) rule for 2022 ACA plans.
 - For reasons unknown to us, they truncated the comment period to under 30 days, which severely limits the opportunity for the public to submit comments and collectively work with like-minded organizations and groups to coordinate submissions.
 - That said, we submitted comments on behalf of the REDC Consortium (see attached), which included a push to integrate telehealth coverage for IOP/PHP levels of care within ACA plans among other items.

• **Public Health Insurance Option Comment**

- The Chairman of the House Energy & Commerce Committee and Chairwoman of the Senate Health, Education, Labor, and Pensions Committee released a Request for Information (RFI) regarding the development of a federally-administered public health insurance option.
- We submitted comments (see attached) on behalf of the REDC Consortium outlining the need for telehealth coverage for MH/SUD, including at the PHP/IOP levels of care as part of the essential health benefit design.
 - Additionally, we urged against modeling a public health insurance option off of Medicare given their poor coverage

for MH/SUD conditions, particularly eating disorders treatment.

- **[Alliance for Connected Care Support Letter](#)**

- The REDC Consortium joined over 400 groups in support of advancing permanent telehealth reform focused on the following priorities:
 - Removing arbitrary restrictions on where a patient is located in order to utilize services;
 - Ensuring Federally-Qualified Health Centers, Critical Access Hospitals and Rural Health Centers can furnish telehealth services;
 - Authorizing the Secretary to allow additional telehealth practitioners, services, and modalities; and
 - Removing restrictions on telemental health services.

- **SAMHSA Resource Guide on Telehealth**

- SAMHSA released an evidence-based [resource guide](#) on telehealth for the treatment of serious mental illness and substance use disorders.
- The resource guide reviews literature and research findings, examines emerging and best practices, discusses gaps in knowledge, and identifies challenges and strategies for implementation.
 - A summary of the report is attached.

- **Telehealth Flexibility in Illinois**

- Gov. Pritzker signed sweeping telehealth legislation that makes permanent some pandemic-era telehealth flexibilities and will bar insurance providers from mandating patients get in-person care from a provider before doing so via telehealth.
- The legislation was endorsed by the American Telemedicine Association and also includes a provision that will bar insurance companies from mandating patients prove hardship or an access barrier to pick telehealth over in-person care.

V. ACA

- **Most Insurers Participating in ACA Marketplaces Don't Expect COVID to Impact 2022 Costs**

- A Kaiser Family Foundation [review](#) of early rate filings for the individual market of insurers participating finds the most are expecting a return to normal in 2022 without the pandemic playing a large role.
- The review looked at 13 states and DC reveals that most expect health utilization patterns to return to their pre-pandemic levels.
 - Of the 75 insurer filings submitted in these states, 16 predict that COVID will have an impact in 2022, generally pushing rates up by less than 1%.

- Other factors that insurers cite as impacting 2022 rates include continued use of telehealth services, and a somewhat healthier marketplace population due to increased tax credits included in the American Rescue Plan Act.

VI. Support Letters (attached)

• Increasing Access to Mental Health in Schools Act (S. 1811 / H.R. 3572)

- The REDC Consortium joined a letter led by the National Association of School Psychologists in support of this legislation.
 - The bill would take a step toward addressing the shortage and improving access to mental health services by providing grants to create partnerships between local education agencies and universities. These partnership will help train, recruit, and retain school mental health professionals in high need districts experiencing shortages.
 - It also directs the Department of Education to establish a loan forgiveness program for school mental health providers who serve in areas with significant need.

• Mental and Behavioral Health Policy Recommendations

- The REDC Consortium joined a letter led by the Children's Hospital Association to House and Senate leadership of 3 health-oriented committees outlining mental and behavioral health policy recommendations.

Have a great weekend!

Best,
Center Road Solutions Team