

10/15/2021

Hello REDC Members,

Here is this week's policy update.

Telehealth

• Telehealth Bill Targeting HDHP Introduced

- Reps. Schneider (D-IL) and Wenstrup (R-OH) introduced Primary and Virtual Care Affordability Act ([H.R. 5541](#)), which would extend the soon-to-expire pandemic exemption for telehealth for certain high-deductible health plans (HDHPs).
- Under the legislation, high-deductible health plans would be allowed to offer telehealth for patients before they meet their deductibles. With the policy set to expire at the end of the year, the bill proposes a two-year extension with a mandated study of its effects and a report issued within a year of the legislation being enacted.
- Earlier this year, Sens. Daines (R-MT) and Cortez Masto (D-NV) introduced a bill that would make the safe harbor permanent.
- The REDC recently signed onto a letter in support of continuing the HDHP exemption.

Health Insurance

• Colorado Adds Trans-Care to Essential Benefits

- The state will be the first to require certain health insurance plans cover gender-affirming care, such as hormone therapy and surgery.
- The new benefits take effect in 2023 and are available to Coloradans who purchase insurance on the individual and small group market.
 - Insurance companies already cover some types of gender-affirming care, but the coverage can vary by company and service.
 - The new coverage requirements will be added to the state's benchmark plan, meaning they're considered an essential health benefit on par with preventive services and maternity care.
- In addition to gender-affirming care, the state would require coverage for an annual mental health wellness exam and as many as 6 acupuncture visits, part of a plan to reduce opioid dependence.

• Senate Finance Committee Holds Health Insurance Hearing

- Next Thursday, the committee will hold a hearing entitled, [“Health Insurance Coverage in America: Current and Future Role of Federal Programs”](#) where the committee will hear from 4 think tanks in the health care and space.
- We have submitted questions to select committee members on parity, eating disorders care, and telehealth and those questions are under consideration to be asked live.

- **REDC Joins MHLG & Coalition to Stop Opioid Overdoes Submits Mental Health Recommendations to Senate**

- The REDC joined a letter as a member of the Mental Health Liaison Group (MHLG) to Senate Finance leadership in response to their request for information on mental health priorities and ways to improve the delivery of MH/SUD care in the U.S.
- The priorities include:
 - **190-Day Lifetime Limit on Inpatient Psychiatric Hospital Services.** No other medical condition has this limitation, which arbitrarily cuts off necessary treatment for individuals with serious mental illness.
 - **Lacks Coverage of Intensive, Evidence-Based Interventions.** Medicare does not cover evidence-based, multi-disciplinary team interventions for people with the most severe mental health and substance use disorders. This includes Coordinated Specialty Care for early psychosis, Assertive Community Treatment (ACT) teams, and medical nutrition therapy for eating disorders.
 - **Limited Coverage of Levels of Behavioral Health Care.** Medicare does not cover residential or intensive outpatient levels of care for mental health and substance use disorders. It also inadequately covers services within the American Society of Addiction Medicine (ASAM) Criteria’s levels of substance use disorder care, including withdrawal management.
 - **No Coverage for Freestanding Community-Based Substance Use Disorder Treatment Facilities.** Medicare does not authorize payment for treatment in these facilities, which needlessly limits the availability of SUD treatment.
 - **Narrow Range of Covered Providers.** Medicare does not cover the services from the full range of providers that make up a significant part of the mental health and substance use disorder workforces.
 - **Restrictions on Telehealth.** Medicare’s coverage of mental health and substance use disorder telehealth services remains limited, including for audio-only, though some temporary flexibilities have been granted during the COVID-19 pandemic.
- The full letter is attached.

NDAAs/SERVE Act

- Waiting for the Senate to vote on their version of the NDAA which is expected to be later this month.
 - Senators Shaheen (D-NH) & Tillis (R-NC) will submit the House amendment language that includes SERVE Act provisions.
 - Senators Shaheen (D-NH) & Klobuchar (D-MN) will submit the House amendment that Rep. Meng (D-NY) introduced and passed in the House NDAA that would furnish training in eating disorders screening, identification, and referral for all military health professionals who provide direct care.
- Conference Negotiations: After NDAA passage in the Senate, both chambers will need to come together to negotiate differences within each chamber's bill, then vote within each chamber on the reconciled version.

The Association for Behavioral Health and Wellness (ABHW) Summit

- Collaborating with Validation Institute to host this year's Behavioral Health and Well-Being Policy Summit on November 4th and 5th
- ABHW Friends and Family are eligible to register for a complimentary pass using Promo Code "ABHWFREE"
- Register [here](#).

Have a great weekend!

Center Road Solutions Team