

04/22/2022

Hello REDC Members,

Here is this week's policy update.

REDC Virtual Advocacy Day

- Date: Wednesday, June 22 from 9am to 4pm EDT
- Where: Virtual, through Zoom
- Register here: [REDC Consortium Advocacy Day Registration](#)
 - Registration closes Monday May 30.
- This advocacy day, you will meet with Congressional staff to discuss:
 - Maintaining telehealth flexibilities that have been expanded during the COVID-19 pandemic.
 - Ensuring telehealth as a service modality for MH/SUD is at parity with telehealth offerings for medical/surgical services.

Story Collection on Insurance Discrimination

- Please continue to share stories on insurance discrimination.
- We will send new stories to DOL.
- Complete the survey here: <https://forms.gle/wSYoKoTN56YHGHLw9>.

Telehealth

State Licensure Worries Gaining More Traction

- More attention is being paid to states winding down their pandemic emergency declarations as millions of patients are at risk of losing access to telehealth across state lines.
 - Connecticut and Georgia's regulations that allow expanded telehealth access across state lines expired last week.
 - Arizona ended its emergency declaration on March 30.
 - A grace period for Iowa's eased rules runs out in May
 - Louisiana's regulations are set to expire in June.
- However, there is no consensus on how to solve the issue even as HHS Secretary Becerra has called on Congress to act.
- The change would exacerbate long-existing provider shortages by preventing patients from getting care in other states if theirs has an insufficient amount of providers.
- The Federation of State Medical Boards and the AMA have pushed alternatives to national proposals that would let patients get care in other states if a provider is licensed in one state, arguing a national solution could compromise state boards' ability to oversee providers and ensure patient safety.

- The Interstate Licensure Compact has more than 30 states and Washington, D.C. as part of the system, which serves as a common application so providers can more seamlessly apply for licensure in multiple states.
- The Alliance for Connected Care has proposed a system similar to the driver's license system that would enable states to recognize each other's licenses. They argue this would allow states to maintain their role with an established consistent national infrastructure.
- However, if a solution is reached, this wouldn't be the first nationally.
 - The Department of Veterans Affairs allows virtual care across state lines.

Kaiser Family Foundation Releases Primer on Implications for Coverage, Costs and Access after COVID-19

- KFF has released a section on telehealth and the flexibilities afforded under Medicare, Medicaid/CHIP and cross payer.
- The primer also has information on payment and coverage flexibilities, access to medical countermeasures, liability immunity.
- View the primer [here](#).

No Surprises Act Implementation

- The Center for Consumer Information and Insurance Oversight released another iteration on FAQs related to the good faith estimate provisions that passed within the Consolidated Appropriations Act of 2021.
 - See the FAQs [here](#).

Parity

- Significant provisions on parity and MH/SUD coverage in President's FY23 Budget Proposal. Highlights include:
 - Asks Congress to grant DOL civil monetary penalty authority (ability to issue parity fines) and stronger ability to go after third party administrators, define MH/SUD in uniform and objective manner, and make it clearer that those in ERISA plans who have been wrongly denied care can receive reimbursement for denied care.
 - Apply MHPAEA to all coverage types – including Medicare. Eliminate 190-day inpatient psychiatric limit within Medicare.
 - Require all plans and issuers to provide MH/SUD benefits.
 - Require all private plans to use medical necessity criteria consistent with nonprofit medical associations.
 - Limit considerations of profit in medical necessity determinations.
 - Allow HHS and DOL to regulate behavioral health network adequacy.
 - Issue regulations for a standard for parity in reimbursement rates.

- Require coverage of three MH/SUD visits without cost-sharing o End opt outs of self-funded state and local government plans
- Slides are attached.

Treatment Center Visits

- If you are interest in having a Member of Congress visit your treatment center, please reach out to Emily Rosenberg at emily.rosenberg@centerroadsolutions.com.

Have a great weekend!

Best,
Center Road Solutions Team