

05/13/2022

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.

### **Support Eating Disorders Coalition for Research, Policy & Action (EDC) Advocacy Day**

- The EDC is hosting their virtual advocacy day next Tuesday, May 17th.
- You can show your support and take part in the day by using their social media tool kit (attached).
- **Included in the toolkit is:**
  - Information on the two pieces of legislation that the EDC is advocating for: Kids Online Safety Act ([S.3663](#)) and the Anna Westin Legacy Act ([H.R. 7249/S.3686](#)).
  - Sample social media captions and graphics for the Kids Online Safety Act.
  - Sample social media captions and graphics for the Anna Westin Legacy Act.
- **EDC kindly asks that nobody posts before Tuesday, May 17.**

### **Telehealth**

#### **Notice of Benefit and Payment Parameter (NBPP) Final Rule Released**

- Last week, the U.S. Department of Health and Human Services (HHS) released the final rule for changes to ACA plans for 2023 with some changes being implemented in the 2024 plan year (PY).
- This was the rule that REDC members submitted comments on back in January.
- We have strong partial victories in two big areas. **A full summary of the rule and our victories is attached.** The final 186 page rule can be found [here](#).

### **Key Takeaways**

- Effective January 1, 2023 **HHS will require a nondiscriminatory benefit design providing essential health benefits (EHBs) be one that is clinically based** and does not discriminate based on age, expected length of life, present, or predicted disability, degree of medical dependency, quality of life, or other health conditions.
  - The agency asserts requiring plan designs providing EHB to be clinically based, will protect consumers from discriminatory benefit designs. HHS will reassess whether refining this standard in future rulemaking is warranted as they continue to monitor issuer compliance with the nondiscrimination standards.
- **For certifying Qualified Health Plans, HHS will adopt time and distance standards to strengthen network adequacy for QHPs offered on the Federally Facilitated Exchanges**

**(FFEs). Appointment wait time and distance reviews will begin in PY 2024.** The method for assessing compliance with these standards will be addressed in future rulemaking.

- The agency also added additional provider specialties that would also comply with the distance and wait time reviews. **This includes Outpatient Clinical Behavioral Health (licensed, accredited, or certified professionals) and psychiatry.**
- **To count toward network adequacy standards, providers MUST have in-person services available. OH YEAH!**
- HHS is finalizing the requirement for issuers to submit information about whether providers offer telehealth services to begin informing the agency on the availability of telehealth within QHPs.
- Nondiscrimination proposals related to sexual orientation and gender identity will be addressed at a later date once the larger nondiscrimination rule is out.
- Creation of standardized plan options within each metal tier.
- Differential display of standardized plans on Healthcare.gov and extends this policy to web-brokers and insurers that use direct enrollment to protect the consumer.
- Limit on number of plan choices.
- Reversal of the policy that allowed an insurer to refuse enrollment of a consumer if they have outstanding premium debt.

### **Public Health Emergency Declaration**

- To fulfill HHS Secretary Becerra's promise of giving states 60-days' notice if the agency will not renew the PHE, he will need to make a decision by Monday.
  - Secretary Becerra sent a letter to governors easing concerns about the PHE declaration (see attached).
- Advocates for continuing the emergency another three months point to the consequences — an end to Medicaid coverage for up to 15 million people and restricted telehealth access, among other changes. It could also be a political liability for Democrats ahead of the fall's midterm elections.
- Republicans have pushed Becerra to sunset the health emergency to let the country "get back to normal."

### **Letters of Support**

The REDC Consortium joined the following letters of support detailed below and the full letters are attached:

- **Garrett Lee Smith Memorial Reauthorization Act**
  - Would provide increased funding in grants to states, tribes and college campuses for youth suicide prevention and resources.
- **Post-Disaster Mental Health Response Act**
  - The Post-Disaster Mental Health Response Act would extend the Federal Emergency Management Agency's Crisis Counseling Assistance and Training Program (CCP) to be available following Emergency Declarations, not only for Major Disaster Declarations.
  - CCP helps communities implement a mental health response, which may include facilitating peer support groups, disseminating educational material on coping with trauma, establishing mental health hotlines, and connecting survivors with longer-term care.
- **Children's Hospital Graduate Medical Education Program**
  - Urges the House and Senate Appropriations Committee to provide \$718.8 million in Fiscal Year 2023 for the program.
  - CHGME helps fund programs that train pediatricians and pediatric sub-specialists, including the training of residents in pediatric dentistry and pediatric psychology.
    - CHGME supports the training of about half of the nation's pediatricians and the majority of pediatric specialists.

- **Restoring Hope for Mental Health and Well-Being Act of 2022 (H.R. 7666)**
  - Letter sent to House Energy and Commerce Chair Frank Pallone (D-NJ), Ranking Member Cathy McMorris Rodgers (R-WA), Health Subcommittee Chair Anna Eshoo (D-CA), and Health Subcommittee Ranking Member Brett Guthrie (R-KY) from organizations supporting Section 321 of the Restoring Hope for Mental Health and Well-Being Act of 2022 (H.R. 7666).
    - Section 321 would end harmful opt outs from federal mental health and addiction parity requirements for nonfederal government plans.
    - This provision would sunset the ability of self-funded, non-federal governmental health care plans that cover first responders, public school teachers, and other city and state workers to opt-out of protections provided by the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (Federal Parity Act).
- **Mental Health Reform Reauthorization Act of 2022 (S. 4170)**
  - Senators Bill Cassidy (R-LA) and Chris Murphy (R-CT) included the same language as Section 321 of H.R. 7666 to eliminate the opt out in its [Mental Health Reform Reauthorization Act](#) (S.4170).

Have a great weekend!

Best,

Center Road Solutions Team