

National Association for Behavioral Healthcare

Access. Care. Recovery.



Executive Committee Call Nov. 9, 2020 Minutes

Roll Call

Present: Members: Pat Hammer, Board Chair; Michele Gougeon, John Hollinsworth, Eric Kim, Matt Peterson, Jameson Norton, Mark Covall

Staff: Shawn Coughlin, Kirsten Beronio, Maria Merlie, Julia Richardson, Sarah Wattenberg, Emily Wilkins, Jessica Zigmond

Absent: Tom Kenny

I. **2020 Election Update: Impact on Behavioral Healthcare**

Shawn Coughlin provided a brief update on the Senate: As of Nov. 9, there are four undecided seats. Neither the Alaska nor North Carolina races have been called; however, Republicans are leading in both elections. This would bring Republicans to 50 seats with two seats in Georgia requiring a run-off in January.

Democrats flipped seats in Colorado and Arizona; Republicans flipped Alabama. Whatever the final outcome, the Senate margin will be razor thin. This will be a huge factor for the next Congress. As a reminder, 60 votes are needed for most bills to pass.

In the House, Republicans picked up seats against expectations. As of Nov. 9, there are 215 called races in the Democrat column and 196 in the Republican column, leaving 24 seats undecided.

There were no questions about the congressional races.

Shawn added that former Vice President Joe Biden, the declared winner, has begun his transition process. The Biden-Harris administration is starting to choose its transition team and also a Covid-19 transition advisory board. It includes former U.S. Surgeon General Vivek Murthy, M.D., and former FDA Commissioner David Kessler, M.D.

Shawn said Joe Biden has been actively engaged on behavioral healthcare issues and parity. Some positive areas here include: Biden has called for mental health to remain an essential health benefit under the *Affordable Care Act*; he wants to ensure enforcement of the parity law; he called for increased funding; he has said within first 200 days, he will release a comprehensive approach to address veteran suicide and access to services for veterans.

Regarding substance use disorders (SUD): Shawn said Biden has promoted access to prevention, treatment, and access, and he has said there should not be jail time for people who have only SUD issues.

Shawn added that Biden has also indicated he would like to increase funding for telehealth for youth, increase investment in mental health professionals, and that pediatric behavioral healthcare should be included in primary care.

NABH will reach out to the transition team and his new leadership team, both separately and through the CEO Coalition team.

NABH Champions: Shawn said the association has lost only a few behavioral healthcare champions in the House: Rep. Joe Kennedy (D-Mass.) lost his bid for a Senate seat and will no longer serve in Congress; Rep. Greg Walden (R-Ore.) announced his retirement; and Rep. John Shimkus (R-Ill.) will also retire.

In the Senate, NABH lost behavioral healthcare champions in Sen. Johnny Isakson (R-Ga.), who retired in 2019; and Sens. Mike Enzi (R-Wyo.) and Lamar Alexander (R-Tenn.), who will retire. Shawn added that Sen. Chuck Grassley (R-Iowa), currently chairman of the Senate Finance Committee, is term-limited in that post and will move back to Judiciary Committee. Sen. Mike Crapo (R-Idaho) would likely take that spot. Shawn added that Sen. Crapo has indicated a series of workforce improvement initiatives, including more funding for National Health Services Corp and training for providers to improve integrated systems of care.

Finally, Shawn said he sees the 2020 election outcomes has positive for the association. This is because the NABH team is well-positioned with NABH behavioral healthcare champions and leaders of the respective committees, and a Biden administration has goals that are aligned with NABH's goals and mission.

II. Fall Committee Meetings Update

- a. Behavioral Health Services within General Healthcare Systems: Leaders discussed virtual solutions as they prepare for the fall surge of Covid cases; the committee will plan additional webinars on guidance on surge planning and workforce stabilization
- b. Quality: We had a CMS representative to discuss the IPFQR to discuss quality reporting measure outcome programs. We have an upcoming NQF webinar on Nov. 19 about Covid and Kirsten Beronio, Frank Ghinassi, Anne Kelly, and Joe Pritchard will represent NABH on this webinar.
- c. Managed Care: NABH will follow up regarding Tricare and the length of time processing claims; we are also working on a compilation of plan-based, value-based programs to use to pay for behavioral and SUD services. Plans are taking several approaches to value-based plans, and we will consider an NABH plan that we think should be considering in value-based decisions; we will look at the VA Community Care Network and problems regarding bill payment under this program; we will identify plans that refuse to acknowledge or cover telehealth plans; finally, we hope to develop a "plan denial database" portal that will be up and running in early 2021.
- d. Youth Services: We will work on a program to improve public understanding of youth services and we have received feedback from the committee on a document that is the centerpiece of this initiative. We are also looking at residential treatment programs. ASK ABOUT THIS; we also discussed the enactment of the 988 suicide hotline.
- e. Addiction Treatment: The committee is moving forward with approval of MAT statement for individuals with OUD; we have received very positive feedback from Google on the LegitScript issue. There was broad discussion about the SAMHSA

search box and puts SAMHSA contact information ahead of members who have addiction treatment terminology in their names. NABH consultant Meiram Bendat, J.D., Ph.D. provided an update on the *Wit v. UBH* remedies (see below for more information). In addition, members engaged in a discussion about low census and social distancing guidelines. OTPs were provided flexibility to extend take-home medication, curbside dosing, home delivery to support social distancing. One member discussed the need to keep units open despite the presence of Covid-19 cases to address the nation's ongoing addiction crisis that is happening simultaneously with the pandemic.

III. *Wit v. UBH* Remedy Announcement

Shawn said NABH is very pleased with the remedies in *Wit v. UBH* cases because the case's judge did nearly all he could under his authority to hold UBH accountable in the remedy phase.

NABH included a summary on this from NABH consultant Meiram Bendat, J.D., Ph.D. in *CEO Update* on Friday, Nov. 6. Here is a statement from that item: "*In its 99-page ruling, the court explained the need for: (1) a 10-year injunction requiring UBH to exclusively apply medical necessity criteria developed by non-profit clinical specialty associations; (2) appointment of a special master; (3) training of UBH in the proper use of court-ordered medical necessity criteria; and (4) reprocessing of nearly 67,000 mental health and substance use disorder benefit claims denied during the class period.*"

Mark Covall asked if UBH has made a statement on the remedies. Shawn said he has not seen anything committee. Shawn said Meiram was asked if UBH has learned anything, and he said he does not have an indication of dramatic changes from UBH.

EC members did not discuss any other issues. Before concluding the call, Shawn said NABH is well-positioned for 2021, which he will discuss with the EC on future calls.

IV. Adjournment

Shawn adjourned the call at 3:37 p.m. ET.