

National Association for Behavioral Healthcare

Access. Care. Recovery.



Executive Committee Call Dec. 14, 2020 Minutes

Roll Call

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

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

I. **Minutes Approval: November Executive Committee Call**

A motion was made and seconded to approve the November EC call minutes. Board members approved the motion unanimously.

II. **NABH 2021 Budget**

Shawn provided an overview:

NABH finished the year in strong standing: NABH exceeded revenue expectations for dues and exceeded our growth for new meetings. We were able to minimize the effect of canceling our 2020 Annual Meeting. We came in line on salaries and expenses.

We were able to recognize savings in a variety of areas related to operations, some of which were related to Covid. Less traveling is one example. We saved about \$500,000, most of which related to the Annual Meeting.

We ended the year: Investments have held up well and we have not changed our long-term investments. Also, these savings present an opportunity to engage in new initiatives.

Shawn said NABH will use some of of this for “seed money”—about \$200,000—for the association’s education and research foundation. We will continue to look at different funding mechanisms for that.

The second area is to further protect us from problems with our Annual Meeting. We postponed our 2021 Annual Meeting until October. News about the vaccine is promising, especially related to immunity. Still, there is the possibility that we would need to host a hybrid meeting (in-person and virtual), which would include some significant costs. Shawn recommended that the association set aside reserves for that.

The third area is for the CEO Unified Vision. We have engaged a public relations firm, Rubenstein, and the coalition is starting our public relations strategy there.

Pat Hammer complimented Shawn and the entire NABH team for meeting and exceeding financial expectations during a tough year.

There was a motion and a second to approve the budget. EC members approved the budget unanimously.

Shawn said he looks forward to 2021 and the new activities and initiatives that will come with it, including the ongoing work of the Covid task force, a government relations portal, a managed care denial-of-care portal, and the work of the association's foundation.

III. 2020 Legislative Wrap-up

A. Covid-19 Relief Legislation

Congress is considering a \$1.4 trillion government funding omnibus bill, which could include a bipartisan \$908 billion Covid-relief package.

That bipartisan COVID bill is expected to be separated into two legislative proposals potentially allowing Congress to vote on one bill for \$748 billion to be allocated for healthcare and education, and on a second bill for \$160 billion that would provide state and local funding and employer liability protection.

Funding would include \$35 billion for the Provider Relief Fund

There is language that says health systems could use the money for staff to use for childcare. It also directs HHS to focus new dollars on underrepresented groups from previous allocations or at risk of imminent closure.

Other parts include \$700 million for PPE and would keep in place telehealth flexibilities through December 2021.

The final section includes \$3.15 billion to SAMHSA for the Substance Abuse Prevention and Treatment Block grant, and \$1.31 billion for the State Opioid Response grants to address the nation's ongoing opioid crisis.

House leaders have said no votes will happen before Dec. 16, although a vote is expected this week.

One more piece: an agreement was announced Friday about a surprise medical billing fix. That appears more provider-friendly than previous packages have been. The AHA has already weighed in with concerns. We will review this closely as soon as the legislative language is available.

There has been a lot of regulations from this administration in the last few weeks. We will continue to review these and send details when we have them.

There are still two outstanding Senate seats in Georgia on Jan. 5, which will determine control of the Senate.

House: 222 Democrats, 212 Republican seats and 1 undecided seat.

Xavier Becerra has been named to lead HHS, which is subject to Senate confirmation. Republicans have said they're not pleased with the choice because Becerra is a strong advocate of the Affordable Care Act.

IV. Regulatory Wrap-up

A. Covid-19 Hospital Reporting Requirements

Kirsten Beronio reminded members that HHS changed its reporting requirements, which focus primarily on incidents of Covid-19 in facilities, shortages of staff and PPE. NABH has worked weekly with HHS staff about these issues as the NABH team learns of issues from members.

NABH was able to argue that psychiatric hospitals not report daily, but rather weekly. Initially we asked that psychiatric hospitals be exempt. More recently HHS has started to publish this data by facility. We did argue that psych hospitals not be included in this, and, for now, psych hospitals are exempt from this.

B. Hospital Price Transparency Rule

The final rule was published in November 2019 and requires two things: 1 and 2. This takes effect Jan. 1, 2021. NABH convened a task force to discuss concerns and have another meeting tomorrow to prepare for a meeting we have with CMS on Dec. 17. We have asked for a delay in this effective date.

We outlined concerns in a letter to CMS for the agency to consider, such as per-diem rates and aspects related to psychiatric care that might not be widely understood.

C. Medicare Telehealth Coverage Continuation

CMS did issue a final rule in early December that said the agency will continue several of the temporary telehealth services it has provided during the pandemic. A provision of the SUPPORT Act allows for coverage of in-home visits for people accessing SUD.

CMS will not extend Medicare coverage of audio-only office visits, but has provided coverage for a new more extended virtual check-in. In addition, CMS is extending Medicare coverage of services provided under supervision of and incident to physicians at distant sites who are supervising via telehealth.

D. Covid-19 Vaccine

We just had call with our task force. CDC has said healthcare should be a priority, but it's unclear who all is included. This is mostly handled by states, which have not specified.

In our letter to the NGA, we asked for special attention to this issue, especially as CDC looks to states to prioritize which healthcare workers will receive the vaccine.

V. New Administration and Congressional Outlook

- A. Public Health Emergency Declaration: Effective until 1-20-21. Shawn added that Vivek Murthy is expected to return as U.S. surgeon general and Rochelle Walensky has been named to lead the CDC. Meanwhile, Marcella Nunez-Smith will lead a new White House task force related to health equity, and Anthony Fauci is expected to continue his role in the Biden administration.

VI. CEO Unified Vision Campaign

- A. Jim Ramstad Model State Parity Legislation

Shawn said that in addition to working on its unified vision campaign—for which the group hopes to publish an op-ed—the coalition will also work to advance legislation in the New Year. The bill is based on existing, state-led efforts to advance parity. The coalition expects the federal bill to be known as the Jim Ramstad Model State Parity Legislation after the late Rep. Jim Ramstad (D-Minn.), who championed addiction recovery while he served in Congress.

VII. Adjournment

The call adjourned at 3:42 p.m. ET.