

NABH 2020 ADVOCACY PRIORITIES

NABH's top three advocacy priorities for 2020 each advance a common goal of expanding access to care for mental health and substance use disorder treatment.

1. ENFORCE PARITY IN MANAGED CARE COVERAGE

Fair and appropriate coverage for behavioral healthcare services must ensure, not solely offer, access to the entire behavioral healthcare continuum. In the present environment, managed care organizations (MCOs) in all markets nationwide use a variety of rationing practices that too often restrict patient access to medically necessary care, thereby violating the spirit of parity.

Rep. Donald Norcross (D-N.J.) has introduced H.R. 2848, the *Parity Enforcement Act*, which has broad, bipartisan support and would hold insurance companies accountable by giving the U.S. Labor Department the authority to levy civil monetary penalties for parity violations.

ACTION

- Ask U.S. House representatives to co-sponsor H.R. 2848, the Parity Enforcement Act
- Ask U.S. senators to consider sponsoring a companion bill to H.R. 2848 in the Senate.
- Ask representatives and senators to hold parity implementation oversight hearings.



2. REPEAL MEDICARE'S 190-DAY LIFETIME LIMIT

The Medicare program's 190-day limit prohibits beneficiaries from receiving more than 190 days of inpatient psychiatric care in their lifetime. Senators Susan Collins (R-Maine) and Tina Smith (D-Minn.) and Representatives Paul Tonko (D-N.Y.) and Bill Huizenga (R-Mich.) are expected to introduce the *Medicare Mental Health Inpatient Equity Act* in the Senate and House, respectively. This legislation would permanently repeal Medicare's 190-day lifetime limit.

ACTION

- Ask U.S. representatives to co-sponsor the bipartisan bill from Reps. Tonko and Huizenga.
- Ask U.S. senators to co-sponsor the bipartisan bill from Sens. Collins and Smith.

3. REFORM MEDICARE'S B-TAG REQUIREMENTS

Introduced in 1966, Medicare's "B-tag requirements" are a detailed set of standards for patient evaluations, medical records, and staffing in inpatient psychiatric facilities that are obsolete and do not reflect current standards of care. B-tags impose an estimated \$622 million in compliance costs each year nationwide, taking money away from resources that could be spent on patient care.

ACTION

 Ask U.S. representatives and senators to urge the Centers for Medicare & Medicaid Services to repeal or substantially revise the B-tag requirements.



National Association for Behavioral Healthcare

900 17th Street, NW, Suite 420, Washington, DC 20006-2507 Phone: 202-393-6700 | Fax: 202-783-6041 | www.NABH.org





