

National Association for Behavioral Healthcare



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NABH Examines the High Cost of Compliance on Inpatient Psychiatric Facilities

WASHINGTON, DC (March 19, 2019) — The National Association for Behavioral Healthcare (NABH) on Tuesday released [*The High Cost of Compliance: Assessing the Regulatory Burden on Inpatient Psychiatric Facilities*](#), a comprehensive report that examines the burdens that certain regulations impose on the nation's inpatient psychiatric facilities.

NABH commissioned Manatt Health to conduct this first-of-its-kind study that focuses on three federal regulatory domains attached to participation in the Medicare program: the so-called “B-tag” requirements, a detailed set of standards for patient evaluations, medical records, and staffing in inpatient psychiatric facilities; “ligature risk points,” or those aspects of the physical environment that a patient could use to attempt self-strangulation; and the *Emergency Medical Treatment and Labor Act* (EMTALA), which obligates a hospital to screen all patients for emergency medical conditions, and, if an emergency condition is identified, to stabilize the patient before the patient may be discharged or transferred.

“Members of NABH’s Regulatory Overload Task Force worked closely with Manatt’s researchers on this study, which surveyed 62 inpatient psychiatric facilities,” said NABH Board Chair Pat Hammer, president and CEO of Oconomowoc, Wis.-based Rogers Behavioral Health. “The findings estimate that, taken together, these three regulatory areas impose \$1.7 billion in compliance costs nationwide—each year,” he added. “That means these regulatory burdens represent about 4.8 percent of an average facility’s annual revenue for all inpatient services from all sources.”

NABH recognizes that rules are intended to serve the important goals of patient safety and high-quality care. But some of these regulations are outdated, and many are applied inconsistently by surveyors in the field.

“Federal regulators have an opportunity to lift heavy compliance burdens from inpatient psychiatric facilities without harming patient care,” said Randi Seigel, a partner with Manatt Health.

The report notes that doing so could ultimately improve patient care.

“By removing low-value compliance burdens, the reforms outlined in this report would free up clinician time and financial resources that could be better spent improving patients’ access to high-quality psychiatric care,” said Fatema Zanzi, a partner with Manatt Health.

NABH released the report at its 2019 Annual Meeting, where the association also launched its *Access to Care* initiative. Follow us @NABHBehavioral and at #NABH19 for live updates from the meeting.

“This report emphasizes what our members have been saying for too long: regulatory overload takes time away from patient care,” said Mark Covall, NABH’s president and CEO. “As our nation works to address its deadly opioid and suicide crises, we need our behavioral healthcare providers to focus on what they do best: provide mental health and substance use disorder patients with the right care, in the right setting, at the right time.”

Please visit www.nabh.org to read the full report and to see NABH’s other *Access to Care* resources, including the association’s *Access to Care* resolution and brief video.

About NABH

The National Association for Behavioral Healthcare (NABH) advocates for behavioral healthcare and represents provider systems that are committed to delivering responsive, accountable, and clinically effective prevention, treatment, and care for children, adolescents, adults, and older adults with mental and substance use disorders. Its members are behavioral healthcare provider organizations that own or manage more than 1,000 specialty psychiatric hospitals, general hospital psychiatric and addiction treatment units and behavioral healthcare divisions, residential treatment facilities, youth services organizations, and extensive outpatient networks. The association was founded in 1933.