Mental Health Reform Legislation Likely 2022

IMD, Parity, Telepsych & COVID, Fentanyl, Substance Abuse, MTM Addressed

- The Senate Committee on Health, Education, Labor & Pensions (HELP) (Chair Murray, D-WA) held a hearing to discuss the strengthening of federal mental health and substance use disorder programs. The committee discussed several areas of focus regarding behavioral health in the US and important areas for increased funding. Details are <u>here</u>.
- Senate Finance (Chair Wyden, D-OR) will hold a hearing Mar 30 (here) & will release legislative text this Spring. The all-important Finance Committee asked for stakeholder input in 2021, and received a whopping 321 responses. Several SFC workgroups have formed to take on topics, meeting with patient groups, individuals, companies and coalitions/trades.
- We view mental health legislation as likely passing in 2022. Highlights and areas of bipartisan agreement from HELP are below.
 - Fentanyl use is troubling. Social isolation and stress, exacerbated by the pandemic, has caused an increase of people to take synthetic drugs. Fentanyl has become very available and it is used to contaminate other drugs as well. Last year, more than 100,000 people lost their lives to drug overdose (+30% from the year before) and 2/3 of these adults were linked to synthetic opioids such as fentanyl. Ranking member Burr (R-NC) stated that the FY 2022 omnibus bill provided \$5 B for substance use related disorders, but at least 9 of these authorized programs will not receive funding.
 - Behavioral health issues among children. Between 2016, the number of children that experienced depression increased by 27% and the number of children with anxiety increased by 29%. There is support to allow the Substance Abuse and Mental Health Services Administration (SAMHSA) to provide funding to schools. School programs have positive impact as more kids get connected to care. In March, the Energy and Commerce met to discuss COVID-19's Impact on American Healthcare. They too stressed the importance of making sure educators are aware of the issues in addition to removing barriers that are preventing students from accessing mental health care.
 - **Telehealth.** There is continued support for telehealth & addressing behavioral health issues among front-line health care workers.
 - Parity among health insurance plans is still not showing 100% compliance. When surveyed, about 50 plans were not in compliance with parity laws, and when they were made aware, the plans fixed the issue, and thousands were able to receive mental health treatment. SAMSHA has no regulatory authority, but is seen as a convener, and stresses the importance for individuals, states, and communities to understand parity laws. SAMSHA is looking to bring back policy academies to provide the resources to individuals and families to advocate for themselves.
 - Work force shortages mean a need for loan repayment/forgiveness programs and fellowship programs. There is a need for programs that create incentives for people entering behavioral health professions. The Subcommittee on Oversight and Investigations also stressed the importance of this issue. The average physician graduates with more than \$200 K in debt which often dissuades physicians from entering the lower paid specialties.
- <u>NEXT STEPS / OUR TAKE</u>: The Senate is aiming for bill mark up early summer: We could see passage of a ~\$5 B bill by year end. The Senate (Finance & HELP Committees) are working on a bipartisan mental health bill and likely to hold a mark-up in May/June. The two Committee bills will

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likely be combined for one larger mental health reform bill to be passed later in the year (fall/winter 2022). Below please fine likely buckets of provisions, with twists and turns likely via markup and manager's amendments:

- o Telemedicine and behavioral health, lessons learned of the COVID pandemic.
- Privacy becomes an issue here.
- There is also likely to be a substance abuse aspect to the bill.
- o Medication therapy management and adherence is likely in the mix.
- institutions for mental diseases (IMD) exclusion that has been in place in Medicaid statute since 1965. More information on IMD <u>HERE</u>.
- Apps and tech companies will be called to discuss potential role, solutions going forward.