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ABHW Comments on Medicare and Medicaid Revisions in Response to Covid-19 Pandemic

Washington, DC (June 23, 2020) – The Association for Behavioral Health and Wellness (ABHW), the national voice for payers that manage behavioral health insurance benefits for over 200 million people, recently submitted comments on the Centers for Medicare and Medicaid Services' (CMS) interim final rule with comment period (IFC) regarding the policy and regulatory revisions to Medicare and Medicaid in response the COVID-19 public health emergency.

ABHW and its member companies encourage CMS to consider the following improvements to the IFC to ensure that people with mental health (MH) and substance use disorders (SUD) continue to receive the care they need during the Covid-19 pandemic.

- Include community behavioral health organizations with rural health clinics (RHCs) and federally qualified health centers (FQHCs) for expanded telehealth services. Similar to RHCs and FQHCs, behavioral health organizations (BHOs) are a vital component to providing healthcare in underserved areas. Expanding telehealth coverage to BHOs will ensure that patients with MH and SUDs will have unfettered access to behavioral services.
- Invest in research to determine quality of audio-only therapy for opioid treatment programs (OTPs). ABHW fully supports allowing audio-only therapy for OTPs for the duration of the pandemic. However, before consideration is given to making this service permanent and in order to ensure that patients have access to quality, evidence-based care to healthcare, research is needed to confirm whether audio-only therapy and counseling are effective as a long-term strategy.
- Count audio-only encounters as complete encounters when conducted by behavioral health providers. During the pandemic, patients with access to audio-only communications should continue to receive behavioral health services to avoid a lapse

in care. However, research is necessary to determine the sustained efficacy of audioonly healthcare.

Additionally, ABHW urges CMS to consider the following suggestions directly related to the COVID-19 pandemic, but not captured by the IFC:

- Deny requests to waive actuarial soundness for Medicaid health plans;
- Increase the federal medical assistance percentage (FMAP) to states;
- Allow Medicaid managed care organizations (MCOs) to provide social determinants of health and incorporate costs into capitation rates;
- Safeguard MH and SUD benefits; and
- Extend behavioral health benefits provided by telehealth beyond the public health emergency.

Read ABHW's complete letter >> <u>HERE</u>

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<u>ABHW</u> is the leading health plan association working to improve access and quality of care for mental health and substance use disorders. ABHW's members include national and regional health plans who care for more than 200 million people. Together we work to reduce stigma and advance federal policy on mental health and addiction care. Member companies - Aetna Behavioral Health, AmeriHealth Caritas, Anthem/Beacon, Centene Corporation, Cigna, Kaiser Permanente, Magellan Health, New Directions Behavioral Health, and Optum.