



June 29, 2026

Dr. Mehmet Oz  
Centers for Medicare & Medicaid Services  
United States Department of Health and Human Services  
Attention: CMS-9898-NC  
P.O. Box 8016, Baltimore, MD 21244-8016

**Re: Comments on the REAL Health Providers Act Public Meeting**

Dear Administrator Oz:

The Association for Behavioral Health and Wellness (ABHW) appreciates the opportunity to provide comments following the Centers for Medicare & Medicaid Services' (CMS) public meeting on 6/15 regarding implementation of the Requiring Enhanced & Accurate Lists of (REAL) Health Care Providers Act.

ABHW is the national voice for payers managing behavioral health insurance benefits. ABHW member companies provide coverage to 200 million people in the public and private sectors to treat mental health (MH), substance use disorders (SUDs), and other behaviors that impact health and wellness. Our members are committed to ensuring timely access to high-quality mental health (MH) and substance use disorder (SUD) services and have made substantial investments in maintaining accurate provider directories and improving patient experience.

ABHW strongly supports the goal of improving provider directory accuracy. Accurate provider information is critical to helping Medicare Advantage (MA) beneficiaries identify available in-network providers and reducing frustration when seeking care. Our members continuously invest significant resources in outreach, verification activities, technology, and operational improvements to maintain complete and up-to-date provider directories.

At the same time, successful implementation of the REAL Health Providers Act requires recognition that provider directory accuracy is a shared responsibility of health plans and providers. Health plans rely heavily on providers to supply and update key information, including practice locations, whether they are accepting new patients, contact information, and participation in specific insurance products. Even the most robust verification processes cannot fully overcome situations in which providers do not respond to outreach or fail to timely report changes. Any implementation framework should therefore recognize the essential role providers play in maintaining accurate directory information and encourage meaningful provider engagement and accountability.

As CMS considers implementation of the Act, we encourage focusing on improving the quality of the underlying provider data rather than simply measuring inaccuracies after they occur.

## **Uniqueness Characteristics of Behavioral Health Providers**

Behavioral healthcare presents challenges for ensuring up-to-date provider directories that warrant special consideration. Many behavioral health providers operate solo or small practices with limited administrative staff and frequently use personal addresses or contact information for their practices. These realities can make timely verification and directory updates more difficult despite good-faith efforts by both providers and health plans. Implementation policies should recognize these unique characteristics of the behavioral health workforce and avoid imposing duplicative administrative requirements that divert limited resources away from patient care.

## **Focus on Long-Term Solutions that Improve Provider Data Quality**

ABHW encourages CMS to maximize the use of existing federal and state data sources to improve provider directory accuracy while minimizing unnecessary administrative burden. Currently, no single database currently serves as an authoritative source of provider information; however, existing resources, including the National Plan and Provider Enumeration System (NPPES), state licensure databases, Medicare enrollment data, and other validated government data sources, can play an important role in supporting provider verification. CMS should encourage greater interoperability among these systems and allow health plans to leverage provider attestations and validated information already maintained through existing federal and state processes whenever appropriate. Building upon existing infrastructure, rather than creating duplicative reporting and verification requirements, will improve data quality, reduce administrative burden for both providers and health plans, and promote greater consistency across the healthcare system.

Similarly, if CMS ultimately publicly reports directory accuracy metrics, those measures should be accompanied by appropriate context describing how provider information is collected and maintained, the reliance on provider-supplied information, and the factors outside of a health plan's direct control. Publicly reported scores, standing alone, risk creating an incomplete picture of network performance and patient access. If directory accuracy metrics are publicly displayed, CMS should also consider reporting provider verification and response rates so that consumers and policymakers have a more complete understanding of the factors contributing to directory accuracy.

## **Workforce Capacity Remains the Primary Driver of Behavioral Health Access**

Finally, it is important to recognize that provider directory accuracy, while important, is not the underlying cause of many access challenges facing behavioral healthcare. The United States (U.S.) continues to experience unprecedented demand for MH and SUD treatment that far exceeds available workforce capacity. Significant behavioral health



workforce shortages persist nationwide, particularly in rural communities, limiting appointment availability regardless of directory accuracy. Improving provider directories will help patients and MA beneficiaries identify available providers more efficiently, but it will not by itself increase the supply of behavioral health professionals or eliminate longstanding workforce shortages.<sup>1</sup> Continued federal efforts to strengthen and expand the behavioral health workforce remain essential to improving access to care.

ABHW appreciates CMS's thoughtful engagement with stakeholders as it implements the REAL Health Providers Act. We look forward to continuing to work collaboratively with CMS to improve provider directory accuracy while developing practical, balanced policies that recognize the shared responsibility for maintaining provider information, reduce unnecessary administrative burden, and ultimately improve patient access to behavioral healthcare. If you have questions, please contact Kathryn Cohen, Senior Director of Regulatory Affairs, at [cohen@abhw.org](mailto:cohen@abhw.org).

Sincerely,

A handwritten signature in black ink that reads 'Debbie H. Witchey'.

Debbie Witchey, MHA  
President and CEO

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<sup>1</sup> Government Accountability Office: Behavioral Health: Available Workforce Information and Federal Actions to Help Recruit and Retain Providers (October 2022): <https://www.gao.gov/products/gao-23-105250>