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BEHAVIORAL HEALTH UPDATE: September 2017
A Monthly Report for Members
of the American Hospital Association www.aha.org and the
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1. *Senate Approves McCance-Katz as First HHS Assistant Secretary for Mental Health and Substance Use*

The Senate in August approved Elinore McCance-Katz as the nation's first assistant secretary for mental health and substance use. A clinical psychiatrist, McCance-Katz most recently served as the chief medical officer for Rhode Island's Behavioral Healthcare, Development Disabilities and Hospitals department, and served as Substance Abuse and Mental Health Services Administration's (SAMHSA) chief medical officer from 2013 to 2015. The *21st Century Cures Act* created this new position. Also last month, the Health and Human Services Department (HHS) appointed 14 members to a committee that the *Cures Act* created to better coordinate federal efforts to address serious mental illness and emotional disturbance.

2. *CMS Finalizes FY 2020 Quality Measures for Psychiatric Hospitals*

The CMS has finalized quality measures for psychiatric hospitals for fiscal year 2020. A full description of the Inpatient Psychiatric Facility Quality Measure Program (IPFQR) is available in the [Federal Register](#) (p. 1880-1936). In the regulation, CMS discusses all measures currently required, future plans to account for social risk factors, and proposed criteria for measure removal factors in the IPFQR program. On Aug. 30, CMS hosted a [webinar](#) to discuss changes to the Inpatient Psychiatric Facilities Quality Reporting (IPFQR) program in the 2018 Inpatient Prospective Payment Systems (IPPS) final rule and examine the Annual Payment Update (APU) determination and reconsideration processes.

3. *Six States Declare the Opioid Crisis a State of Emergency*

Alaska, Arizona, Florida, Virginia, Maryland and Massachusetts have each declared a state of emergency related to the nation's opioid crisis. In August—following a recommendation from his Commission on Combating Drug Addiction and the Opioid Crisis—President Donald Trump said the nation's opioid crisis is a national emergency; however, his administration has yet to take the formal steps to declare it as one. Declaring a national emergency could expedite waivers for the Institution for Mental Diseases (IMD) exclusion and provide immediate funding for opioid treatment.

4. *Opioid Treatment Programs Up by About 36 percent Since 2003: SAMHSA*

The number of Opioid Treatment Programs (OTPs) in the United States has increased by about 36 percent to nearly 1,500 in 2016 from 1,100 in 2003, according to a new [report](#) from SAMHSA. Meanwhile, the number of clients who receive methadone rose to more than 350,000 in 2015 from

227,000 in 2003, reflecting an increase of about 54 percent. The report is based on the National Survey of Substance Abuse Treatment Services, an annual, national survey of all known substance abuse treatment facilities, both public and private. It includes data from OTPs and facilities that do not have OTPs, but does not include data from private physicians who are not affiliated with a substance abuse treatment program or facility.

5. *CMS Offers Guidance on Medicaid/CHIP Managed Care Payments for Patients in an IMD*

The CMS issued a Frequently Asked Questions (FAQ) [document](#) to address common questions about payments to managed care organizations and pre-paid inpatient health plans for enrollees who are patients in an institution for mental diseases (IMD). The document addresses whether a state needs to submit an amendment to its State Plan or Alternative Benefit Plan to use the IMD provision in the managed care rule. CMS in the FAQ makes clear the answer is: “No...This flexibility is referred to in the regulations as ‘in-lieu-of’ services or settings and is effectuated through the contract between the state and the MCO or PIHP. Therefore, no modification to coverage under the State plan is required and none could be approved.” CMS urged states, managed care plans and other stakeholders to submit questions to ManagedCareRule@cms.hhs.gov to inform the agency about future guidance & FAQs.

6. *National Suicide Rate Up 22 percent in Last 15 Years: JAMA Psychiatry*

The national suicide rate in the United States has increased by 22 percent in the last 15 years while the number of psychiatric hospital beds has declined, according to a [study](#) published in the August edition of *JAMA Psychiatry*. In the study, the authors note suggest the availability of psychiatric hospital beds could be a risk factor in a complex network of suicide risk factors.

7. *September is National Recovery Month*

Every September, SAMHSA sponsors National Recovery Month to increase awareness and understanding about mental and substance use issues and celebrate the people who recover. Visit <http://recoverymonth.gov/> for details, and use this [toolkit](#) to help you prepare for community outreach throughout the coming month.

8. *September 8: CMMI Behavioral Health Payment and Care Delivery Innovation Summit*

CMS’ Center for Medicare and Medicaid Innovation (CMMI) will host a summit on September 8 for providers, payers, government and non-government organizations representatives, and other interested parties to discuss behavioral health payment and care delivery related to substance use disorders, mental health and medical comorbidities, Alzheimer’s disease and related dementias, and behavioral health workforce challenges. According to CMS, CMMI may use ideas and discussion from the summit to inform future behavioral health payment and care delivery models that could improve access, quality and the cost of behavioral healthcare for Medicare and Medicaid beneficiaries.

9. *September 14: NAMHC Open Policy Session*

The National Advisory Mental Health Council (NAMHC) will host an open policy session on Thursday, Sept. 14 to highlight the National Institute of Mental Health’s (NIMH) current programs and priorities.

Scheduled to last from 9 a.m. until 12:45 p.m., the open policy session will also be available to watch live at <http://videocast.nih.gov/default.asp>. The discussion will include a report from NIMH Director Joshua Gordon, MD, PhD; presentations from directors from different divisions within the National Institutes of Health; and a discussion about potential future funding initiatives.

Public comments are scheduled for 12:30 p.m. ET, although that is subject to change. NIMH suggests checking the [website](#) for additional information and a meeting agenda. If you plan to attend, please register [here](#) by noon on Tues., Sept. 12.

10. October 5: National Depression Screening Day

Our thanks to all those who will offer screenings in their local communities. Screening For Mental Health, Inc. has posted information about the annual outreach effort [online](#), along with a [toolkit](#) with social posts and images to help promote the event.

Jessica Zigmond prepared this edition of *Behavioral Health Update*. Feel free to give us your feedback, stories, and suggestions: **NAPHS**: Jessica Zigmond, NAPHS, jessica@naphs.org, 202.393.6700, ext. 101; **AHA**: Rebecca Chickey, AHA SPSAS, rchickey@aha.org, 312.422.3303

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