



Section for Psychiatric & Substance Abuse Services

To: Members, AHA's Section for Psychiatric & Substance Abuse Services
From: Rebecca Chickey, Director, Section for Psychiatric & Substance Abuse Services
Subject: Update on Key Issues in the Behavioral Health Care Field: [March 2017](#)

Register Now: Political, policy, opinion and health care leaders will come together May 7-10 in Washington, D.C. for the AHA Annual Membership Meeting. Visit www.aha.org today and register at the early bird rate.



AHA Advocacy Update

Make Your Voice Heard Now: Recently, [draft legislative language](#) became public regarding potential Affordable Care Act repeal and replace legislation that may be considered by the House. This legislative language is from a Feb. 10 discussion draft, and some reports indicate that it may be outdated. However, this legislative language could give an indication of the general direction House Republicans may take on ACA repeal and replace. The committees of jurisdiction will mark up a bill, perhaps very soon. For more information check out AHA's [Special Bulletin](#) outlining the key provisions. As Congress returns from Presidents' Day Recess, it's a great time to reinforce our [key advocacy messages](#). Also, see our [advocacy toolkit](#) for additional resources, and please make plans to speak with your legislators. Economists [estimate](#) that 1.3 million people with mental illness and 2.8 million people with substance use disorders could lose coverage if the ACA is repealed. For more info on the first 100 Days [Click Here](#).

Other Options for Repeal & Replace: Also in February House Republicans shared a [19-page document](#) with their colleagues ahead of the Presidents' Day recess, which outlined potential policy options. Those options are consistent with Speaker Paul Ryan's (R-WI) previously unveiled "[Better Way](#)" plan, and include familiar legislative proposals such as providing tax credits for individuals to purchase private insurance, promoting health savings accounts, establishing high-risk pools, and modernizing Medicaid by providing states with increased flexibility through "block grants" and per capita caps. Meanwhile, on the Senate side, another alternative has emerged: the [Patient Freedom Act of 2017](#), introduced by Sens. Bill Cassidy (R-LA), Susan Collins (R-ME), Shelley Moore Capito (R-WV) and Johnny Isakson (R-GA). This measure would preserve the vast majority of ACA funding and gives states the option of either retaining the ACA model, or using the same amount of resources to develop a new state alternative. And, we expect more direction from the Administration now that [Tom Price](#) has been sworn in as Health and Human Services Secretary.

AHA Regulatory Update

42 CFR Rule Delayed: The Substance Abuse and Mental Health Services Administration (SAMHSA) has [postponed](#) the effective date of its [final rule](#) on confidentiality of substance use disorder patient records for 60 days, to March 21. White House Chief of Staff Reince Priebus last month issued a [memorandum](#) calling for federal agencies to postpone the effective dates of regulations published in the previous administration that have not yet taken effect for the purpose of reviewing those regulations for questions of fact, law, and policy. AHA had [urged](#) SAMHSA to align the final rule, the first major update to the confidentiality rule since 1987, with the Health Insurance Portability and Accountability Act.

1115 Medicaid Waivers for Behavioral Health. Twelve states are using Section 1115 waivers to provide enhanced behavioral health services to targeted populations or to integrate the delivery of physical and behavioral health services, according a new [report](#) from the Kaiser Family Foundation. This number includes states responding to 2015 guidance, which describes a new Section 1115 waiver opportunity

that supports states' ability to provide more effective care to Medicaid beneficiaries with a substance use disorder (SUD), including the provision of treatment services not otherwise covered under Medicaid.

AHA Resources

Hospitals Support 1 in 9 U.S. Jobs: AHA's latest [annual report](#) on hospitals as economic anchors in their communities also shows hospitals supported more than \$2.8 trillion in economic activity in 2015. Hospitals were one of the top sources of private-sector jobs, directly employing more than 5.7 million people. Each hospital job supports about two additional jobs, with every dollar spent by a hospital supporting roughly \$2.30 of additional business activity. The report shows the total economic impact of U.S. hospitals by state, including jobs, payroll and hospital expenditures.

Hospital Workforce & Changing Needs: A new [report](#) from AHA's 2016 Committee on Performance Improvement can help hospital and health system leaders align the skills and abilities of their organization's current workforce, including behavioral health, with anticipated needs as health care continues to change. "There is a critical need to elevate the discussion about workforce planning and development so that it becomes part of a comprehensive strategic plan for hospitals and systems and not just an issue to respond to in a crisis situation," the report notes. The report includes a tool to help initiate strategic workforce conversations, and examples from hospital leaders and experts in the field.

Apply for 2017 Foster G. McGaw Prize: The AHA, along with Baxter International Foundation, is accepting [applications](#) through April 7 for the 2017 Foster G. McGaw Prize. The prize honors health care organizations that have demonstrated exceptional commitment to community service. The winner will receive a \$100,000 prize, and the top three finalists will receive \$10,000 each. For more information, visit www.aha.org, or contact Mike McCue at (312) 422-3319 or mmccue@aha.org.

Ensuring Access to Care in Vulnerable Communities: A new AHA [discussion guide](#) can help hospital and health system board members and leaders implement innovative ways to preserve access to essential health care services, such as behavioral health, in vulnerable rural and urban communities. "The ultimate goal is to provide vulnerable communities and the hospitals that serve them with the tools necessary to determine the essential services they should strive to maintain locally, and the delivery system options that will allow them to do so," the guide notes.

'Next Generation' of Community Health: A new [report](#) from the AHA's Committee on Research explores what the next generation of community health may look like as hospitals and health systems redefine themselves. "In short, through focusing on community health, the hospital field is devising new ways to improve the physical, emotional, mental and spiritual well-being of people and communities. The next generation of community health will be integrally aligned with this care evolution and will serve as the foundation for total population health," the report notes.

Principles to Guide Population Health Policy: An [article](#) co-authored by Jay Bhatt, D.O., AHA's chief medical officer and CEO of AHA's Health Research & Educational Trust, proposes seven foundational principles of population health policy to inform the development of practical tools, research and education. The principles respond to seven policy questions and address the value and importance of behavioral health services in population health throughout the article.

The [March Behavioral Health Update](#) includes information on: New [documents](#) designed to help Medicaid directors implement the federal parity law; A new [resource](#) on peer specialists; and A request for public review and comment on "Practice [Guideline](#) for the Pharmacological Treatment of Patients with Alcohol Use Disorder." [Click here](#) for more resources for AHA member behavioral health providers.

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