



Knowledge Network Policy Workgroup Report

May 1, 2011

Christina VanRegenmorter, CRI; Dale Masten, Genoa; Kathleen Varda, River-Edge; Joan Sivley, CRI; Kevin Scalia, Netsmart

Agenda

- Our Team
- Overview of Advocacy
- HITECH work
- What We Didn't Do
- What We Can Do
 - Health IT
 - BH Pharmacy
 - Veterans



Our Team: The KN Policy Workgroup

- Christina VanRegenmorter* (Coordinator)& Dennis P. Morrison* (Champion), CRI
- Kevin Scalia,* Netsmart
- Kathleen Varda, River-Edge
- Roy Starks, MHCD
- Dale Masten, Genoa
- Joan Sivley, CRI board
- Debi Taylor-Tate*, CRI board
- Camis Milam, CHCS
- Chuck Ingoglia*/Mohini Venkatesh/ Rebecca Farley*/ Al Guida*, National Council
- Cheryl Holt, Cobb/Douglas CSB
- Suzanne Koesel, Centerstone Indiana



* Visited congressmembers to educate re: KN priorities.

Overview of Advocacy for Nov 2010- April 2011

- #1 Focus = State Budgets
- #2 Focus = Federal budgets
- #3 Focus: Getting HITECH Act re-introduced
- #4 Focus = Relationship building: SAMHSA, NIMH, Congress, and BH National Advocates & Allies

What we Did:

- Called & emailed our congressional delegation.
- Visited DC to educate & advocate re: HITECH extension act & 2011 Budget items.
- Educated colleagues internally & externally to advocate for BH policy issues (i.e. budget issues).
- Met with SAMSHA/CSAT re evolving privacy rules

State Budget Work

Georgia: DOJ suit against state. RiverEdge, with good outcomes tracking, was able to be responsive and use it to benefit clients.

Indiana: Cuts to programs avoided, increased opportunities for substance abuse service transformation (ROSC)

Tennessee: Cuts to programs avoided, still working on cuts to rates.

New York: CMHCs came out well in new budget. More care coordination roles.

Federal Budget Work

2011 Budget:

- Threat of large cuts to SAMHSA
- Cuts ranged from \$100M to \$200M
- Cuts were reduced to \$52M

2012 budget:

- Medicaid reform is necessary in all budget versions.
Question: what will that look like?
- The debt commission emphasizes outcomes tracking for CMS providers/ payers to help reduce costs.
- Ryan Amendment with Medicaid block grants for the states

HITECH Work: Nov-April 2011

- 1) Had one last “Hill Day” in early December
 - 1) Debi Taylor Tate participated, as well as others.
 - 2) Got us up to 87 cosponsors in the House.
- 2) KN members in informal coalition (Netsmart, CRI, National Council, Netsmart, NAPH) weekly strategized re: CMHC inclusion in HITECH act.
- 3) Coalition is now called the Behavioral Health IT Coalition (with letterhead, no less) and includes the NASW, the APA, NACO, NACCHO, the National Jewish Federation, NACHBHD, Netsmart and Centerstone
- 4) The coalition agreed on a cost offset (a BIG STRUGGLE)
- 5) Met with national policy leaders, members of Congress, & staff to elicit bi-partisan support for BH-friendly budgets & a CMHC-inclusion bill in the House & Senate.
- 6) The APA made HITECH bill it’s #1 focus for its Hill day.
- 7) S. 539 was introduced

HITECH Message

- A health IT system including CMHCs saves both lives & money. Without the HITECH extension act, most community mental health providers:
 - Cannot be part of the coordination of care for all Americans (essential for Health Home & ACO participation)
 - Cannot prevent polypharmacy
 - Cannot track outcomes
 - Cannot engage in cost-effective chronic disease management with their patients
 - Cannot be held accountable for using best practices.
 - Cannot provide the best healthcare for Vets, National Guard and active duty serviceman without being able to interface with the VA record.
- #1 Barrier = Cost of Bill.
- Proposals for reduction in costs
 - New Bill has: Facilities payment only, Accreditation required
 - Other Proposals: CMHCs only, \$1 million starting funding, not \$2 million
 - Cost Offset: Limited Legal Liability Safe Harbor

BH Pharmacy work

- Genoa is working on Federal legislation that will benefit all CMHCs that have pharmacies.
- S. 539 - Using our VoterVOICE system to send a grassroots letters to U.S. Senators asking for co-sponsors
- Support for Federal MTM Legislation
 - H.R. 891 (Rep. Rodgers (R-WA)/Ross (D-AR) and S. 274 (Sen. Hagan (D-NC))
 - Genoa one pager
 - Will activate VoterVOICE

State Legislation/Issues

- Clozapine
 - One pager - more states pay for Clozapine monitoring
 - One of Genoa's major priorities
 - Helps reduce barriers for Clozapine use
- Electronic Prior Authorization
 - Working with HID to study implementation/incorporate into e-prescribing
 - Point of sale - handled electronically - similar to CovermyMeds
 - Implement in state Medicaid programs
- Reimbursement Cuts
 - CT- Fighting Governor proposed reimbursement cuts totaling \$64.8 million to pharmacy - Dispensing fee from \$2.90 to \$1.40. Possible AAC for brand name drugs
 - FL - Reimbursement cut from WAC + 4.75% to WAC + 1.5%

Work for the Future

(aka goals not met)

- Pass the HITECH bill in the last congress (got closer, though, with 87 House cosponsors).
- Had meetings face to face with Nancy Ann DeParle, Don Berwick, and the NASBHDD head.
- Created a 10-point “gold standard” outcomes reporting checklist
 - Camis did some initial searching but more work needs to be done.
 - Joan Sivley will be setting up a meeting with Christina & the former head of state MH directors
- Finished white paper on privacy and security
 - Outline was finished