

The background features a dark blue gradient with several circular gauges and arrows. One large gauge on the left has numerical markings from 140 to 260. Other gauges are smaller and scattered across the frame. Arrows of various sizes and orientations are also present, some pointing towards the center and others pointing outwards. The overall aesthetic is technical and futuristic.

FEDERAL BEHAVIORAL HEALTH POLICY: A NEW (AND VERY DIFFERENT) ERA

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WELCOME

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A WORK OF ART!



SET THE STAGE

- When we last met...
- CARA had just been passed
- 21st Century Cures was on life support (and opioids was not even part of the picture)
- States were beginning to act on their own by declaring emergencies

A BIT OF A HANGOVER?

- In the 114th Congress, we saw the introduction of over 70 pieces of legislation aimed at curbing the opioid epidemic.
- With the passage of the Comprehensive Addiction Recovery Act, as well as 21st Century Cures, we now have a foundation for moving forward, in hopes of expanding federal involvement in prevention, treatment, and recovery services.

POLITICAL FOOTBALL

- How central is the opioid epidemic to politics?
 - It could have very well been one of the top three reasons that the ACA was not repealed
 - EVERYONE wants a seat on this train
 - It was without a doubt a BIG issue in the 2016 elections
 - There are drawbacks to being a political football. Big drawbacks.

ARE YOU READY FOR SOME FOOTBALL?



BUT WHERE ARE WE NOW?

- Resources remain scarce, and without funding, many new programs cannot become a reality. This session will look at the bigger picture, and how advocacy strategies will be necessary to succeed.
- “A vision without funding is a hallucination.” - Rep. Hal Rogers

ONE OVERARCHING THEME

- It's not ONLY about opioids
- Meth is back
- Alcoholism is also on the rise
- I don't know about you, but I care about the DISEASE of ADDICTION. Opioids are merely a subset (with different regulatory issues)

OPIOIDS

- A word or two on “Opioids...”
- Is it a battle or is it the war?
- Have clinicians lost control of the narrative? (Did they ever have it?)
- Attention does not automatically equate to knowledge

21ST CENTURY CURES

- 21st Century Cures
 - \$500 million for the states to fight opioid abuse, with another \$500 million promised for FY 2018
 - A bizarre funding mechanism was put in place to allocate the funds- so bizarre that it confused even those of us in D.C.
 - No exaggeration, it's as if Congress just made up a brand new allocation & appropriation process.

21ST CENTURY CURES

- A great gesture
- But how much impact did it really have?
- Is it more valuable as a program, or a talking point?

STRETCH THOSE DOLLARS!

- Illinois was awarded \$16 million
- The grant supports new treatment and recovery services
- establishment of an Opioid Crisis Line and expanded medication-assisted treatment for individuals with opioid use disorder.
- opioid-related enhancements to the Illinois Prescription Monitoring Program (PMP),
- the launch of a statewide opiate awareness campaign
- new pilot programs to provide medications to treat opioid use disorder
- pre-release and post-release services for individuals who are incarcerated in county jails.
- widespread expansion of the training of first responders to an opioid overdose and the availability of the overdose reversal medication Naloxone, commonly referred to as Narcan.

CARA

- A word on CARA
- Landmark legislation in terms of its message
- In terms of funding, it pales in comparison to existing programs
- The difference is, it's here to stay

IMD EXCLUSION

- *Medicaid Coverage for Addiction Recovery Expansion (Medicaid CARE) Act*
- *Rep. Foster (D-IL)*
- *Senators Durbin, Portman, Brown, Capito, King, Collins (3 Democrats, 2 Republicans)*

IMD EXCLUSION

- The *Medicaid CARE Act* modifies the IMD Exclusion to allow Medicaid coverage for up to 40 beds in appropriately accredited “residential addiction treatment facilities” for up to 60 consecutive days for adults with substance use disorders.
- The bill allows individuals receiving addiction treatment in such a facility to maintain Medicaid coverage for other medical services, which are currently ineligible under the IMD Exclusion.

IMD EXCLUSION

- The legislation also establishes a new \$50 million youth inpatient addiction treatment grant program to fund facilities that provide substance use disorder treatment services to underserved, at-risk Medicaid beneficiaries who are younger than age 21, with an emphasis on rural communities.
- In addition, the bill would increase flexibility for pregnant and postpartum women who are seeking treatment, and would allow them to access the services they need to ensure positive birth outcomes.

IMD EXCLUSION

- Road to Recovery Act
- Rep. Brian Fitzpatrick (R-PA)
- Joining Fitzpatrick in introducing the *Road to Recovery Act* were Representatives Stephanie Murphy (D-FL), Bipartisan Heroin Task Force co-chairs Tom MacArthur (R-NJ) and Ann Kuster (D-NH), and vice-chair Donald Norcross (D-NJ).

- The bill enables states to expand access to inpatient treatment for substance use disorder, while not intruding on a state's flexibility to implement care.
- Amends the Social Security Act and CHIP to provide coverage for residential substance use disorder treatment in accredited and licensed facilities as determined by HHS and the Single State Authorities on Drugs and Alcohol

- Removes the arbitrary 16 bed limit currently in federal law,
- Covers treatment for individuals under 65 years of age,
- Requires periodic review of need for service every 60 days, and
- Allows states to set standards for criteria.

THE COMMISSION (YOU'VE HEARD SO MUCH ABOUT...)

- The President's Commission on Opioid Abuse has, in their interim report, recommended:
- Grant waiver approvals for all 50 states to quickly eliminate barriers to treatment resulting from the federal Institutes for Mental Diseases (IMD) exclusion within the Medicaid program.
- "This will immediately open treatment to thousands of Americans in existing facilities in all 50 states. "
- "Immediately???"

PUBLIC HEALTH “EMERGENCY”

- President Trump stated that opioids is an “emergency.”
- However, he has not DECLARED a public health emergency (at least not yet)
- The necessary paperwork has not yet been filed.
- For digital health, that non-declaration is important: a public health declaration would allow HHS Secretary Tom Price to loosen regulations on opioid addiction therapy via telemedicine
- It would also allow Price to relax privacy regulations.

42 CFR 2

- The commission recommends passage of privacy-overhaul bills - notably those championed by Sen. Joe Manchin and Rep. Tim Murphy.
- This has caused a split in the advocacy community, as some oppose any loosening of confidentiality restrictions.
- Sorry to disappoint, but I am not a 42 CFR 2 expert. (But Jud DeLoss is!)

ALL ABOUT THE BENJAMINS...

- “Don’t tell me what your priorities are. Show me your budget, and I’ll tell you what your priorities are.”- Joe Biden

ALL ABOUT THE BENJAMINS

- A word or two about federal funding in FY 18:
- We are WAY behind in the process. At least two months, if not more.
- There is no sequester relief in sight, for the first time in six years.
- We have a White House very unfriendly to Non Defense Discretionary Spending (NDD)

PROPOSED CUTS (FIRST ROUND)

- Fiscal 2018 spending bills are to be marked-up to a nondefense topline of \$511 billion, \$7.5 billion below 2017 levels.
 - Health and Human Services (-23 percent);
 - Departments of Agriculture (-29 percent);
 - Department of Justice (-4 percent)
-
- The bulk of the HHS cut is at NIH, HRSA, and CDC...For now.

SAMHSA GRANTS

- SAPT Block Grant: Flat funded
- MH Discretionary funds: Potentially down \$230+ million
- CSAP: Potentially down \$58+ million
- (These are House of Representatives numbers. The OMB/White House numbers were far worse)

THE ALMIGHTY DOLLAR

- SAPT purchasing power
- Over the last ten years, the SAPT block grant has been flat funded. Which means that due to health inflation, it has lost close to \$500 million in purchasing power

ILLINOIS

Formula Funding

Substance Abuse Prevention and Treatment Block Grant	\$67,210,630
Community Mental Health Services Block Grant	\$17,158,047
Projects for Assistance in Transition from Homelessness (PATH)	\$2,704,000
Protection and Advocacy for Individuals with Mental Illness (PAIMI)	\$1,075,584
Subtotal of Formula Funding	\$88,148,261

ILLINOIS

Discretionary Funding

Mental Health	\$12,896,280
Substance Abuse Prevention	\$5,474,331
Substance Abuse Treatment	\$10,614,173
Subtotal of Discretionary Funding	\$28,984,784

IT'S NO SECRET

- In 2015, HRSA administered the NHSC Site Satisfaction Survey to all points of contact at NHSC-approved sites.
- 1,105 surveys were completed. As part of this survey, NHSC-approved sites were asked which disciplines they would like added as eligible for NHSC loan repayment in order to recruit, and which disciplines they felt were critical in meeting their organization's operational needs.

- Specifically, they were asked:
- Outside of the NHSC-approved disciplines that are already offered, which of the following clinicians would your site like to recruit using the NHSC Loan Repayment Program as a tool? Select five (5) in rank order.

IN DEMAND

- Results indicated that the top three additional disciplines sites would like to recruit through the NHSC program were
 - 1) Registered Nurses;
 - 2) General Practitioner Physicians;
 - 3) Substance Abuse Counselors. (out of 18 disciplines).

- The Health Resources and Services Administration designated 4,362 areas in the country as having a mental health professional shortage and estimated that another 2,700 mental health professionals are needed to meet the needs of the approximately 10 million Americans who live in one of these shortage areas.

WHAT MUST CLINICIANS FEEL LIKE?



WORKFORCE

- BHWET
- Formerly a \$50 million program at HRSA
- White House: Proposal of \$0
- House: \$25 million
- Eligible entities for this program shall include accredited programs that train Master's level social workers, psychologists, counselors, marriage and family therapists, psychology doctoral interns, as well as behavioral health paraprofessionals
- Illinois
 - Adler college receives \$250,000 annually in BHWET funds

THE FLUX CAPACITOR

- It's hard to talk policy (and plan a presentation on policy) when Washington is in almost a permanent state of flux
- I started preparing this presentation when Jeff Sessions was Attorney General
- If he is NOT Attorney General today, let's just pretend he- or someone who shares his ideals- is!

SESSIONS

- Many people in treatment are there as a result of a judicial order, drug court, diversion program, etc.
- We get the sense that AG Sessions is not a fan of these programs
- He is a supporter of mandatory minimums (especially for drug sentences)
- His idea of prevention- and the president's- is a return to “Just Say No!”

ADVOCACY

- Is there nowhere to go but...Down?
- Believe it or not, this is the number one public health issue in Washington right now.
- In my opinion, there has not been this much attention focused on a single disease since...



THE IRON IS HOT

- There is opportunity to continue an upswing in interest.
- Our goal should be to become embedded in the public health funding system
- Do not buy the argument that “throwing money at the problem” is not the answer.