



# ***Proposed Federal Behavioral Health Legislative Priorities for 2018***

*Updated November 6, 2017*

## **1. Prevent a health care access crisis by preserving Medicaid expansion and avoiding a long-term shift of responsibility to states.**

Preserve the expansion of Medicaid that creates access to care for millions of very low-income residents. Expansion includes lower financial risks for states and yields better health outcomes. Avoid changing Medicaid to shift burdens onto states or individuals – like the current proposals to implement block grants or per capita caps – causing major reductions in services and enrollment.

## **2. Approve Washington State’s request to restore its Institutions for Mental Disease (IMD) waiver as a temporary solution. Then revise the federal IMD exclusion to increase the availability of Medicaid for behavioral health care stays.**

Support access to critical behavioral health treatment by revising the federal Institutions for Mental Disease (IMD) exclusion. Restore Washington’s prior waiver as a short-term solution. This temporary waiver will provide time to pass a permanent fix to exempt stays of 30 days or less, rather than just 15 days, stabilizing treatment resources for all communities. Without action, federal financial support for inpatient behavioral health in King County will shrink by an estimated \$15.2 million per year, placing greater pressure on scarce state and local resources and potentially reducing treatment services. For many people, 15 days does not provide adequate time for them to get the help they need.

### ***King County also supports these issues:***

- **Align federal substance abuse confidentiality rules with HIPAA and other related regulations.**  
Establish one set of rules for confidentiality and security in health care by fully aligning confidentiality rules specific to substance use disorder treatment (42 CFR Part 2) with the Health Insurance Portability and Accountability Act (HIPAA) and companion laws, which facilitate care coordination while preserving privacy. This would promote integrated behavioral health and physical health care.
- **Update federal managed care regulations that govern behavioral health rates.**  
Revise CFR 42.438, moving actuarial rate setting away from dependence on past service volume, and toward consistency with value-based purchasing and integrated physical/behavioral health care.
- **King County endorses the National Council for Behavioral Health’s federal agenda:**
  - Promote federal initiatives that support public education on mental illness and addiction.
  - Ensure implementation and expansion of federal funding for community behavioral health organizations.
  - Promote and fund financial resources and incentives to help states and local governments expand drug treatment, prevention, and recovery efforts.
  - Preserve funding for other important behavioral health programs such as the Substance Abuse Prevention and Treatment Block Grant and other programs funded by the Substance Abuse and Mental Health Services Administration.
  - Work to ensure that behavioral health providers are eligible for health information technology incentives.
  - Protect federal funding for Medicaid and protect beneficiaries and providers.
  - Ensure behavioral health’s full inclusion in health reform implementation.
  - For more information, see <https://www.thenationalcouncil.org/policy-action/policy-agenda>.

For additional information, please contact

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