

Date: December 19, 2018

To: SPTA and Division Federal Advocacy Coordinators, and APAGS Coordinators

From: Doug Walter, J.D., Associate Executive Director for Government Relations,
American Psychological Association Practice Organization

Cc: Jared L. Skillings, PhD, ABPP, Chief of Professional Practice
SPTA Directors of Professional Affairs
SPTA Executive Directors
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Re: 2018 Practice Government Relations Year in Review

Below are some advocacy highlights from the past year:

Medicare Mental Health Access Act (H.R.1173 / S.448)

We made substantial headway on our priority legislation, the Medicare Mental Health Access Act, bipartisan legislation that would allow psychologists to provide Medicare services without unnecessary physician supervision. The House legislation ends the year with 43 bipartisan cosponsors, including nine members on the committee of primary jurisdiction, the House Ways and Means Committee. The Senate bill has 14 bipartisan cosponsors. Your strong grassroots engagement and hard work from our primary sponsor, Representative Kristi Noem (R-SD), garnered more support for the bill than previous years. We will seek early reintroduction of the bill when Congress convenes in January.

2019 Medicare Physician Fee Schedule

The Centers for Medicare and Medicaid Services (CMS) has been working toward new coding and valuation for psychological and neuropsychological testing services for some time, but last fall we were informed that psychologists faced a 13-18% cut in reimbursement (and as much as 44% for some services depending on agency payment policy decisions) for testing in the 2019 physician fee schedule.

The APAPO immediately began to lobby both the agency and Congress to prevent these devastating cuts, highlighting the potential negative impact for both patients and psychologists in Medicare. Government Relations staff met with several congressional offices and worked with state psychological associations to build a bipartisan Congressional coalition to prevent these reimbursement cuts. These efforts resulted in five Member of Congress sign-on letters to CMS with 26 bipartisan co-signers and with other Senators and Representatives calling the agency to urge their preservation.

Our efforts with the agency were successful. In July, CMS published the proposed Physician Fee Schedule which included payment rate *increases* of 2-21%, depending on the services provided. Nearly 190 psychologists answered our August call-to-action and joined APAPO in writing to the agency to preserve these payment increases in the final rule. CMS did so when it published the final fee schedule in November. As a result, psychologists will see not only higher reimbursement for testing services but also 1-3% increases for psychotherapy and 2-7% for the provision of health and behavioral services.

APA has provided a [variety of resources](#) to educate and prepare psychologists for the changes to the testing codes and has made available [new code numbers and descriptions](#), crosswalks—charts designed to help you determine which CPT code to use for a particular services.

Medicare MIPS

Effective January 1st, psychologists will join physicians and other healthcare providers in the Merit-based Incentive Payment System (MIPS) reporting program. The APA Practice Organization anticipates that many psychologists in Medicare will be exempt from MIPS reporting under the low volume threshold (LVT). Only those who exceed all three criteria under the LVT are required to report under MIPS. For 2019 psychologists will be exempt if in 2018 they treated 200 or fewer Medicare beneficiaries, billed Medicare for \$90,000 or less in allowed charges; or Provided 200 or fewer covered professional services. Additional information on MIPS, including a webinar, will be available in January.

For psychologists and others who exceed the LVT or are interested in MIPS reporting, the Practice Organization currently offers a registry to facilitate reporting under MIPS. The registry, known as the [Mental and Behavioral Health Registry](#) (MBHR), is specifically designed to facilitate reporting for clinicians who provide mental and behavioral health services.

Opioids

APAPO government relations staff, working with APA government relations staff from across the association, successfully worked for passage of a bipartisan bill aimed at combating the ongoing opioids crisis. The “SUPPORT for Patients and Communities Act,” which was signed into law on October 24th, included a wide array of legislative initiatives APA sought to include in the final bill. We successfully lobbied for a provision that creates incentives for psychologists and other behavioral health service providers to use electronic health records and expanded access to telehealth services for Medicare beneficiaries with substance use disorders, including for those with co-occurring mental disorders.

APA also successfully advocated for provisions in the legislation to require HHS to identify best practices on how to include opioid use disorder information in patient medical records, at the patient’s request, and to develop model training programs for providers, patients, and their families regarding permitted uses and disclosures of information regarding substance use disorder treatment. The new law also requires state Children’s Health Insurance Program (CHIP) plans to cover mental health and substance use disorder benefits for pregnant women and children and to comply with mental health parity requirements.

Medicaid

This year APAPO was deeply concerned over attempts by both Congress and the President to dismantle the Affordable Care Act's (ACA) Medicaid expansion. The unsuccessful ACA repeal efforts during 2017 failed to offer any real alternatives for the gaps in health coverage that would result. This past March hundreds of psychologists went to Capitol Hill during the 2018 Practice Leadership Conference to draw Representatives' and Senators' attention to the importance of protecting and expanding access to Medicaid as an insurance safety net. These visits were successful! Not only was Medicaid protected, several states (Idaho, Nebraska, Utah, Virginia and Maine) voted at the ballot box this past November to expand Medicaid coverage to their low-income families.

Military and Veterans Affairs

APA continued its advocacy efforts to address TRICARE psychologist reimbursement cuts. We raised specific concerns about TRICARE contractors' 2018 cuts, communications with providers, and lack of network adequacy with both the Department of Defense (DoD) and Congress. Senators Jon Tester (D-MT) and Mazie Hirono (D-HI) and Representative Tulsi Gabbard (D-HI) co-sponsored bi-cameral, bipartisan letters to the Director of DoD's Defense Health Agency, Rear Admiral Bono, demanding briefings on the TRICARE reimbursement cuts. Sen. Hirono and Rep. Gabbard's staff also worked with APA's Director of Military and Veterans Health Policy to successfully include a GAO report on TRICARE's mental health service provision and contractor activities in the Fiscal Year 2019 defense authorization bill.

2018 marked the first full year incorporating APA's advocacy on behalf of military personnel, veterans, families, caregivers, and the psychologists who serve them into the APAPO Government Relations Office. This work has included hosting Capitol Hill briefings to educate staff about veterans' mental health issues, securing increases to DoD and Department of Veterans Affairs health research and evidence-based clinical programming, opposing DoD's proposed ban on transgender personnel serving in the military, organizing a Practice Leadership Conference workshop to train civilian psychologists about military and veteran populations, and working with studios and independent producers to provide expertise and resources for films focused on military and veteran experiences.

Closing

On behalf your Practice Government Relations staff here in Washington, DC, we wish you had a happy and safe holiday season and thank you for your dedication and hard work throughout the year.

For more information, contact APA Practice Organization Government Relations Office at Pracgovt@apa.org or (202) 336-5889. Visit APA Practice Organization on-line at APAPracticeCentral.org/Advocacy.