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Statement for the Record by the

Margaret A. Murray, CEO
Association for Community Affiliated Plans

for the

House Energy and Commerce Health Subcommittee's Hearing

entitled

***“Combating the Opioid Crisis:
Improving the Ability of Medicare and Medicaid to Provide Care
for Patients”***

April 11, 2018



Chairman Burgess, Ranking Member Green, Members of the Subcommittee:

On behalf of the Association for Community Affiliated Plans, please accept this statement for the record on the House Energy and Commerce Committee's efforts to address America's devastating opioid and substance use disorder crisis and for the hearing entitled, "Combating the Opioid Crisis: Improving the Ability of Medicare and Medicaid to Provide Care for Patients." As organizations on the front lines of health care in this country, America's Safety Net Health Plans stand prepared to help Congress and maximize the potential in Medicare and Medicaid to address this crisis. We applaud Congress' attention to this important issue.

ACAP represents 61 member plans in 29 states serving more than 20 million Americans receiving coverage through Medicaid, CHIP, Medicare Advantage D-SNPs, and the Health Insurance Marketplaces. Our members serve almost 1 of every 2 Medicaid enrollees in managed care, and our qualified health plan (QHP) members have seen substantial increases in coverage provided to enrollees in the Marketplaces nationwide. Collectively, our Safety Net Health Plan members serve nearly half of a million enrollees in stand-alone CHIP programs as well as many additional children in Medicaid expansion CHIP.

States and the Federal government have turned to managed care organizations (MCOs) to provide coordinated care services for people who rely on publicly-sponsored health coverage programs. Because of their prominent role in coordinating care for Americans enrolled in these programs, Safety Net Health Plans are uniquely situated to provide high-value care coordination for individuals in need of treatment for substance use disorders. Access to coverage (along with comprehensive, integrated physical and behavioral health care) is essential to address the needs of those suffering from mental illness and/or substance use disorders (SUD). Unfortunately, cost is one of the key barriers to treatment for the SUD-impacted population and the importance of Medicaid coverage for the low-income adult population is essential to helping address this crisis.

As the normal course of operations, Safety Net Health Plans assess member needs, identify treatment gaps, engage members, encourage medication adherence, develop individualized care plans, and coordinate care. These programs are particularly important to facilitate integrated physical and behavioral health care and social services for enrollees with substance use disorders.

Collectively, ACAP Safety Net Health Plans have a track record of implementing programs and policies that improve health care and patient safety for individuals with substance use disorder. For example, with implementation of their "Managing Pain Safely: Multiple Interventions to Dramatically Reduce Opioid Abuse" initiative, Partnership Health Plan of California reported a 75 percent decrease in unsafe opioid



doses, a 66 percent decrease in the number of members with opioid prescriptions, and a 74 percent decrease in prescription opioid escalations between January 2014 and November 2016. Recognizing the benefits of improved integration of physical and behavioral services, including the integration of mental health and SUD services, Neighborhood Health Plan of RI has instituted weekly, co-managed care rounds. Through the co-managed care rounds, medical and behavioral health providers jointly review the cases of select complex members and work to develop a member engagement strategy and care plan. These are just two examples of the vital role that coordinated care plans have in addressing the health care needs of people suffering under the crippling burdens of substance use disorder.

ACAP Comments on Legislation Being Considered by the Committee

ACAP applauds the members of the Committee for recognizing the important role that Medicare and Medicaid can play in addressing America's opioid crisis. Specifically, ACAP offers our comments on certain bills that are being considered as part of today's hearing:

Top Legislative Priority

- ***H.R. __, Behavioral Health Measures, legislation to amend title XI of the Social Security Act to require States to annually report on certain adult health quality measures, and for other purposes***
 - *Comments:* In 2010, Congress required the development of a set of Adult Core Quality measurements in Medicaid. These measures provide federal and state policymakers with an assessment of the quality of care being provided to adults in this program. However, this measurement program is underperforming because states are not currently required to report on their state performance under these measures. This not only undermines policymakers' ability to understand what is working and what is not but also fails to offer sufficient insight as to whether the billions of dollars spent in Medicaid are effectively addressing the important health care issues addressed in these measures.

Building on the work done for Medicaid and CHIP quality reporting for children included in the recently-passed *Bipartisan Budget Act* (H.R.1892), ACAP strongly supports legislation that will institute a mandatory nationwide system of Medicaid quality measurement, reporting, and improvement for certain quality measures in Medicaid for adults. ACAP has long been on record in support of this approach, having previously endorsed the *Medicaid and CHIP Quality Improvement Act*



(H.R.2823/S.1317). ACAP notes that the existing Medicaid Adult Core Quality measurement set currently used by CMS includes several measures that are specifically related to opioids, SUD, and mental health services, including but not limited to:

- Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment
- Concurrent Use of Opioids and Benzodiazepines
- Follow-Up After Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence
- Use of Opioids at High Dosage in Persons Without Cancer

The reporting of these measures is particularly important given the severity of the opioid/substance use disorder crisis gripping America today. ACAP believes that the draft legislation offered by the Committee makes significant strides in addressing that issue and we strongly support it.

- *Proposed Amendments:* While ACAP supports this legislation in its current form, ACAP urges the Committee to consider the following amendments:
 - Given the urgency of the opioid crisis and the important need for federal policymakers to address this issue in a timely manner, ACAP urges Congress to expedite the implementation date for the State report required in subsection (d)(1) to 2021.
 - To help understand the effectiveness of the treatment of substance use disorders, we urge the legislation to be amended to require states to report the measures delivered through managed care organizations, primary care case management, and fee-for-service program separately.

Other Legislative Priorities and Comments

Although ACAP has seen the mandatory reporting of the Adult Core Quality Measures as a top legislative priority for years, we are also strongly supportive of other legislation addressing policy changes in the Medicare and Medicaid programs currently being considered by the Committee.



- ***H.R. __, CMS Action Plan***
 - *Comment:* ACAP supports legislation to provide for the development of a comprehensive Action Plan at the Centers for Medicare and Medicaid Services regarding recommendations for changes under Medicare and Medicaid to prevent opioids addictions and enhance access to medication-assisted treatment.
 - *Proposed Amendments*
 - With respect to the establishment of Stakeholder meetings under Section 1 (c) of the draft bill and given the significant percentages of Medicare and Medicaid beneficiaries that receive benefits through health plans, ACAP urges the Committee to amend the language to include “Medicare Advantage plans and health plans operating in the Medicaid program” among the list of meeting participants.
 - With respect to the CMS report to Congress established under Section 2(b)(5) of the draft bill, ACAP urges the Committee to amend the language to include “Medicaid health plans” and “health plans operating as Medicare-Medicaid Plans under the dual eligible demonstrations.”
- ***H.R. __, Provide IMD Services Up to 90 Days for Medicaid Beneficiaries with SUD***
H.R. __, Mom IMD
 - *Comment:* ACAP has been on record in support of allowing States to provide Medicaid services for certain individuals with substance use disorders in institutions for mental diseases (IMD) and we support both bills that will improve the delivery of Medicaid IMD services.

Again, thank you for the opportunity to submit this statement for the record. We hope that you find ACAP’s input to be of assistance and we stand prepared to assist the Committee in its efforts to address America’s opioid crisis.

For additional information on ACAP’s Medicaid policies, please contact Jenny Babcock at jbabcock@communityplans.net.

For additional information on ACAP’s Medicare policies, please contact Christine Lynch at clynch@communityplans.net.