Where have we been, where are we now, where might we be going?

• Debbie Plotnick & Nathaniel Counts
We’ve beat it back for now

But some parts are sure to reappear

• Included in Graham/Cassidy: Medicaid: Block grants/per capita
• Appearing in a state near you: work requirements/drug testing/and time limits
• What about IMD (modify, rescind, substance use only)
• Is expansion dead or alive?
• Attacks on Essential Health Benefits, such as Association Health Plans
• Regulatory rollbacks, changes, and just plain neglect
• Cost sharing offsets: cuts or worse
More Threats

Tax Reform

- Offsets could likely come from Medicaid
- Congress is likely to try to pass under reconciliation rules
Fiscal Threats (just a couple of many)

Trump Budget Would Eliminate Six Major Block Grants and Cut Overall Funding for Major Block Grants by One-Third in 2018

- $100 million dollars (26% reduction) out of Mental Health Block Grant
- Eliminate the Social Services Block Grant (flexible source of funds to states to support social services for vulnerable children, families, and seniors)
- The Community Services Block Grant, (26% cut), which provides anti-poverty services through local non-profit and public agencies.
- Eliminate the Preventive Health and Health Services Block Grant, which provides funds to states to address their priorities in disease prevention, infectious disease control, and other public health needs.
Glimmers of Hope

Bipartisan murmurings

• The HELP Committee—Alexander and Murray making nice
• Talk of hearings and a return to regular order
• But the need for constant vigilance remains
• Advocacy at the ready!
Policy: Low-Hanging Fruit and Future Directions
Low-Hanging Fruit

- Collaborative Care Model/Comprehensive Primary Care Plus
- Maternal Depression and Treatment
- Depression Care in Bundled Payments
More Confusing Fruit

- How do we fairly distribute incentives across sectors for promoting community-wide behavioral health?
- How do we capture predicted long-term savings now to incentivize more effective practice?
MATERNITY CARE BUNDLED PAYMENT

- Insecure access to nutritional food
- Risk of depression or anxiety
- Unsafe home
- Lack of access to parenting support
- Substance abuse

Conception

Postpartum

Adolescence

Young Adulthood

Mental Health America
#B4Stage4
ACH for Children and Families

• Paying for screening for health-related social needs of families as they relate to long-term behavioral health and development
• Paying for an integrator to address family risk and protective factors to behavioral health and development
• Paying for a fund to invest in meeting health-related social needs of the community, particularly to address safe and supportive environments to the extent that it is cost-neutral to CMS over time
• Agreements with non-health care payers to share incentives and co-invest in community needs including safe and supportive environments