

BEHAVIORAL HEALTH & SUBSTANCE USE DISORDER LEGISLATIVE ADVOCACY COMMITTEE

RECOMMENDED LEGISLATIVE ISSUE FOR 2021

System: Behavioral Health & Substance Use Disorder
Subject: Reimbursement Rates
Submitted by: Dr. Paul Simeone (Lee Health) & Stacey Cook (SalusCare)

1. Please indicate #1 for Primary System and #2 for Secondary System that are most appropriate for this issue:

- Aging
- Behavioral Health (Mental Health and Substance Abuse)
- Child Welfare
- Children and Youth
- Criminal Justice (including Juvenile Justice)
- Developmental Disabilities
- Early Learning (Infant/Toddler/Pre-/VPK) & Education (K-12)
- Health Care
- Homelessness

2. Please indicate which is the most appropriate category for this issue:

- Budgetary: A new issue with known fiscal impact or a change in existing Legislation that will have fiscal impact.
- Substantive: Modification of existing Legislation.
(check one below)
 - With possible fiscal impact
 - With no fiscal impact
- New Legislation with no fiscal impact.

3. Please describe your legislative proposal. If applicable, please cite which statute(s) the proposal affects.

We (Community BH Leaders) urge you to support the continuation of reimbursement policies enacted during the COVID pandemic related to substance abuse and mental health disorders. These policies enabled those with mental health and/or substance abuse disorders to receive treatment via telehealth and enabled interns to provide services while being monitored remotely.

It has been well documented that medical treatment whether administered in person or via telehealth provides benefits well in excess of the cost of provision. These benefits include but are not limited to:

- Reduced time spent in jail,

- Lower levels of recidivism for those suffering from these illnesses,
- Increased employment opportunities and
- Less reliance on public assistance.

Clearly COVID has impacted the safety of delivering health care to all segments of the population. We have learned that Telehealth:

- Provides a safe, effective and timesaving alternative to office visits,
- Allows health care providers easy access to patients and
- Is even more efficient for the patient who does not need to arrange transportation to an office, spend time in awaiting room or interact physically with others especially in this COVID environment.

Medical reimbursement rates for telehealth should remain at current rates or be increased beyond COVID because:

- The cost of providing medical services related to substance abuse and mental health disorders does not materially change if provided via telehealth or in an office. Health care providers and back office staff are the same and must keep office as not all patients can be treated remotely.
- Timing of visits via telehealth often permits more time for patient health care provider one on one interaction without interruptions.
- Quality of care is the same and often enhanced via telehealth as the one on one time permits more interaction and consultation.
- Reducing reimbursement only provides health care providers incentives for in office visits, which during COVID are less safe. And not in the interest of the patient.

4. Describe the specific problem or challenge that will be addressed by this legislative proposal. Be specific about the impact on Lee/Collier County/statewide. Include local and state data that supports the problem or challenge. Quantify any fiscal impact, if possible. (Reasonable estimates are fine.)

Lower levels of recidivism and less reliance on public assistance:

- 483 Lee County individuals arrested more than 3x in 6-month period
- Total jail days for 483 individuals = 12,338 days
- Jail day = \$100
- \$100 x 12,338 days = **\$1,233,800 in tax payer dollars**
- Return on investment to tax payers = \$0
(Lee County Re-Entry Taskforce Data)
- Kaiser Permanente Northern California analyzed the average medical costs during 18 months pre and post SU treatment and found that the SU treatment group had a 35% reduction in inpatient cost, 39% reduction in ER cost, and a 26% reduction in total medical cost, compared with a matched control group. (Kaiser Permanent)

- A study comparing the direct cost of treatment to monetary benefits to society determined that on average, costs were \$1,583 compared to a benefit of \$11,487 (a benefit-cost ratio of 7:1). (SAMSHA)

Telehealth Regulations & Reimbursements:

- Interns to continue providing services while being monitored remotely allows for more patients to have time sensitive access to services.
- Significantly decreases the no-show appointment rates for providers new to telehealth technology further validating national statistics.
- Eliminates or drastically reduces the need for transportation as consumers can receive services where they are located or at a spoke facility where they frequent.
- Improves access to care in rural communities as the location of an individual provider is no longer an issue.
- Eliminates the stigma so often associated with a behavioral health diagnosis. Individuals needing services can do so in the comfort of their own space without being seen in a mental health facility or practitioner office.
- Experienced changes to patient satisfaction = **38% INCREASED, 3% DECREASED, 59% SAME**
- Changes to wait times = **68% DECREASED, 6% INCREASED, 26% SAME**
- Changes to patient engagement = **58% INCREASED, 14% DECREASED, 28% SAME**

(FBHA Survey Data)

5. Identify the interested/impacted parties and whether they would likely support or oppose your proposal. For instance, are other Lee/Collier County agencies affected? Are counties, regional agencies, professional associations, interest groups, and/or state agencies affected?

All behavioral health and substance use disorder providers within Lee, Collier and surrounding counties would benefit from this legislative priority.

6. Has this issue been proposed before? If so, what was the outcome? If it did not succeed, why?

Yes, the issue of reimbursement rates related to behavioral health and substance use disorder is a huge concern for providers in our community. With rates remaining the same for the better part of 20 years, this greatly impacts the ability to continue serving this population in any ethical capacity. We urge you to support the continuation of reimbursement polices enacted during the COVID pandemic, with the consideration to increase rates related to substance abuse and mental health disorders.

7. Is this a collaborative Issue involving more than one agency? If so, indicate which agency is the Lead Agency.

Yes. Please see below for a listing of organizations that have specifically offered their support to this community collaborative and legislative priority.

Lee Health

SalusCare
Healthcare Network
David Lawrence Center
Park Royal Hospital
Coalition for a Drug-Free SWFL
Hazelden Betty Ford
Florida Behavioral Health Association
Chrysalis Health
Public Defender, 20th Judicial Circuit
The Hunger & Homeless Coalition of Collier County
Valerie's House
Hope Clubhouse

8. **Primary Contact Information: (Representative of Agency or Group. This person, or a designated individual very familiar with the Issue, must attend and present the Issue at the Legislative Delegation)**

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