



Current Policy & Advocacy Landscape: Opportunities to Leverage & Lead

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Speaker



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Split Congress Will Limit Bipartisan Health Care Reform to Key Areas

	Senate Committees		House Committees	
	Finance	HELP	Energy & Commerce	Ways & Means
Chair	Ron Wyden (D-OR)	Bernie Sanders (I-VT)	Cathy McMorris Rodgers (R-WA)	Jason Smith (R-MO)
Ranking Member	Mike Crapo (R-ID)	Bill Cassidy (R-LA)	Frank Pallone (D-NJ)	Richard Neal (D-MA)
Jurisdiction	CMS	FDA & Public Health Issues	CMS, FDA, & Public Health Issues	CMS



CMS: Centers for Medicare & Medicaid Services; HELP: Health, Education, Labor and Pensions; FDA: Food and Drug Administration



Patient Groups Must Evaluate How to Leverage or Lead in New Health Policies

Policy and Advocacy Landscape /

Congress and the Biden administration have spent the last few years advancing health care legislation, regulation, and executive orders to improve access, quality, and costs of care

Leverage vs Lead



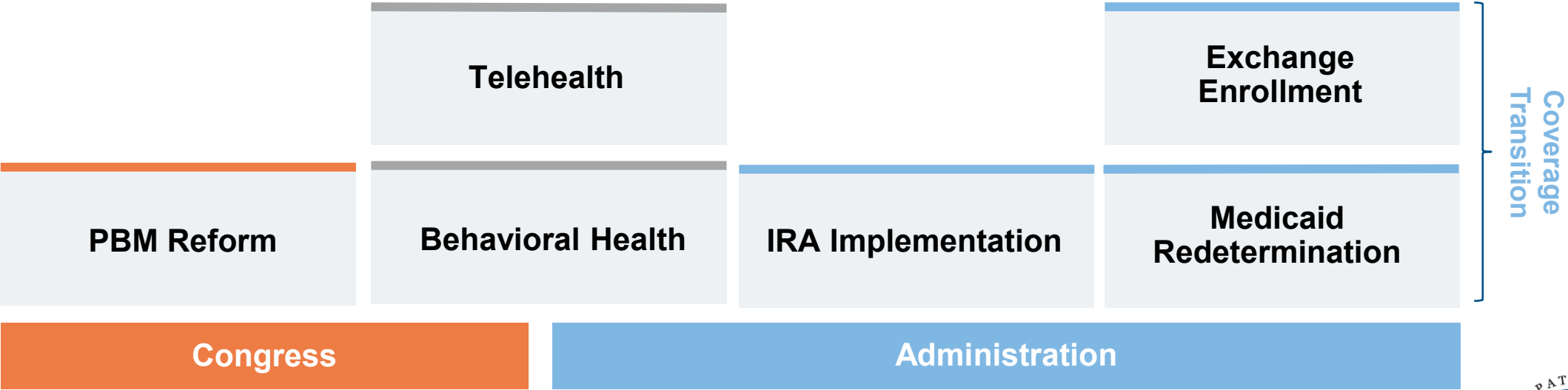
Leverage: Push priorities forward using existing materials and advocacy efforts



Lead: Advance emerging priorities by directing development and execution of new advocacy efforts



Congress & Administration Have Several Possible Health Care Targets



PBM: Pharmacy Benefit Manager; IRA: Inflation Reduction Act



Exchange Enrollment Is at a Record High with Redeterminations Set to Begin

ACA Health Insurance Exchanges

The 2023 OEP has shown a record-breaking number of enrollees; **16.3 million signed up** for Exchange coverage, a **13% increase** from 2022 OEP¹

Medicaid Redeterminations

Redeterminations start April 1. **~ 92 million beneficiaries** must re-enroll in Medicaid and/or CHIP to maintain coverage or else seek coverage elsewhere (e.g., the Exchanges)²

As the Biden administration continues to push for higher coverage rates, the Exchanges may be an important resource for adults (and children) who lose insurance via Medicaid redeterminations

Sources: 1. Biden-Harris Administration Announces Record Breaking Exchange Enrollment. Available [here](#). 2. October 2022 Medicaid/CHIP Enrollment. Available [here](#).
ACA: Affordable Care Act; OEP: Open Enrollment Period; CHIP: Children Health Insurance Program



Redetermination: Barriers & Opportunities to Leverage

Barriers	Opportunities to Leverage
Lack of Awareness	CMS Promoting Ex Parte Renewals
Low Health Insurance Literacy	Increased Navigator Funding
Varying State Regulations	SEP March 31, 2023 – July 31, 2024

Leverage vs Lead



Patient groups are primed to **leverage** existing efforts to help patients transition from Medicaid to the exchanges

Sources: CMS Memo on Exchange Enrollment. Available [here](#); CMS Memo on Ex Parte Renewal. Available [here](#).
CMS: Centers for Medicare and Medicaid Services; SEP: Special Enrollment Period



The IRA Includes Three Major Drug Policy Reforms

1

Medicare Negotiation

- HHS will negotiate prices with a defined ceiling for a subset of drugs with high spending that have no generic/biosimilar competition

2

Inflation Rebates

- Manufacturers will be required to pay rebates to the government when drug price growth exceeds the rate of inflation

3

Part D Benefit Redesign

- Restructures the Part D benefit to include a \$2,000 out-of-pocket cap, a new manufacturer discount program across coverage phases, and an increase in plan liability

Beginning in 2025, beneficiaries will also be able to spread their OOP costs over the course of the plan year via Part D smoothing

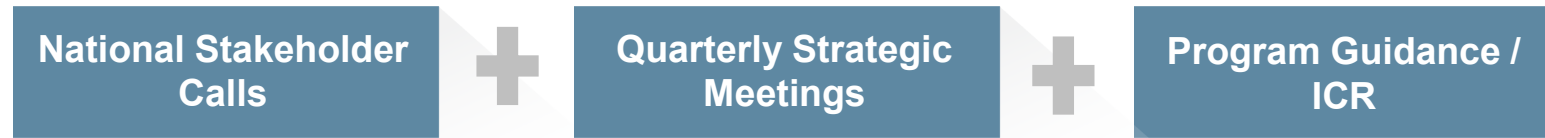
IRA: Inflation Reduction Act; HHS: Department of Health and Human Services; OOP: Out-of-Pocket



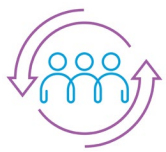
CMS Will Spend the Next Few Years Implementing the IRA

Near-Term Engagement Opportunities /

Leverage vs Lead



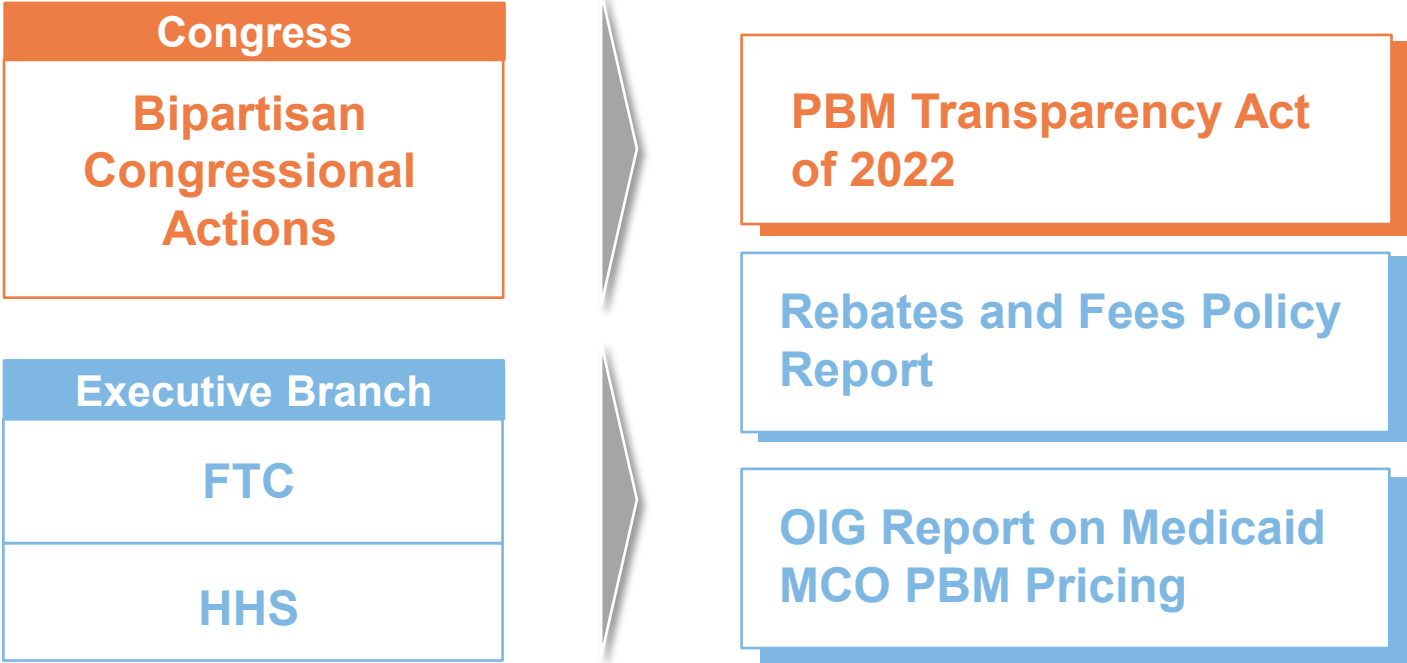
The patient community has a unique opportunity to **lead** how CMS will operationalize several IRA provisions that will impact patients



IRA: Inflation Reduction Act; ICR: Information Collection Request; CMS: Centers for Medicare & Medicaid Services



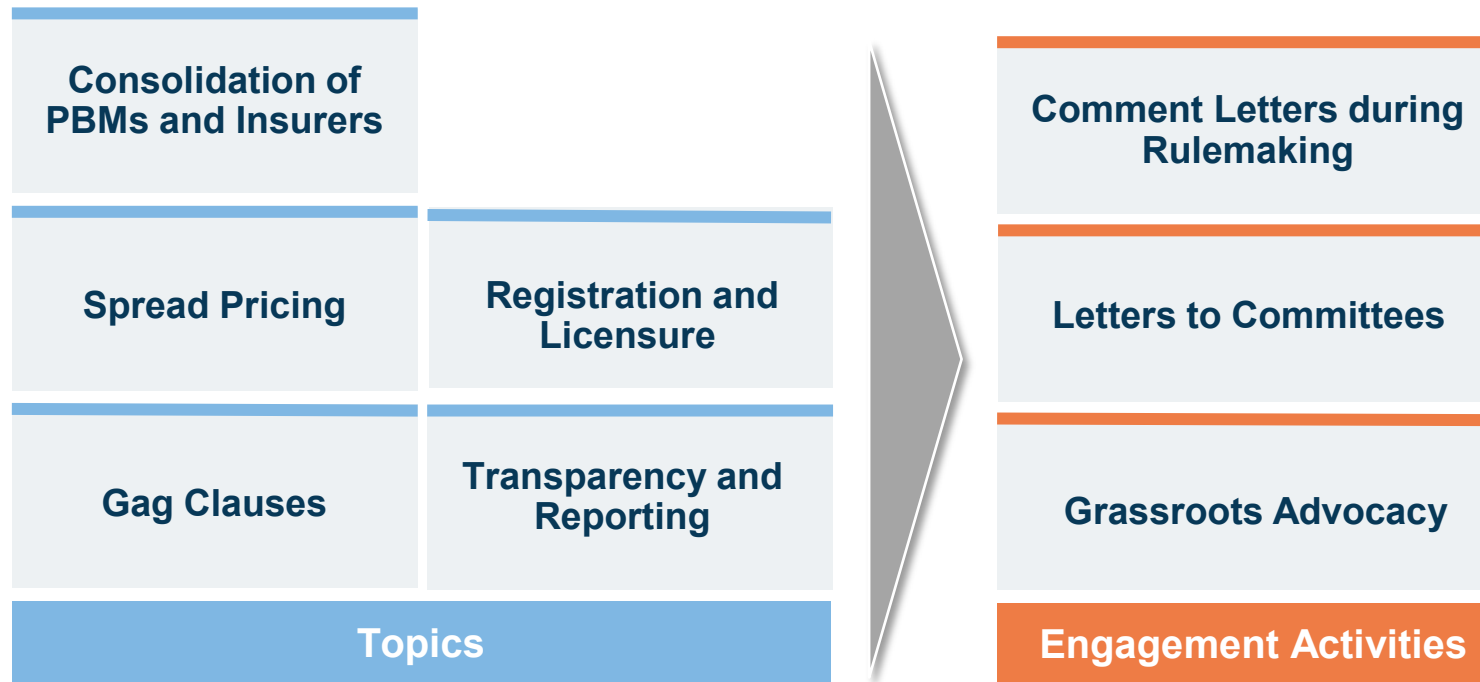
Federal PBM Reform Has Both Executive and Bipartisan Interest



Sources: PBM Transparency Act. Available [here](#); FTC Rebates and Fees Policy Report. Available [here](#); Medicaid MCO PBM Pricing. Available [here](#).
PBM: Pharmacy Benefit Manager; FTC: Federal Trade Commission; HHS: Health and Human Services; OIG: Office of the Inspector General; MCO: Managed Care Organization



States Also Play a Leading Role in PBM Reform



Leverage vs Lead



Patient groups can **leverage** existing PBM reform momentum to illustrate the impact to patients and advocate for additional reform

PBM: Pharmacy Benefit Manager



Behavioral Health Access is a Priority at the Federal Level

MedPAC

At Congress's request, MedPAC is preparing a chapter on the utilization and availability of behavioral health services among Medicare beneficiaries for its June report

Medicare/Medicaid

In recent rulemaking, CMS has put forward mechanisms to strengthen network adequacy, increase utilization, and introduce quality measures within Medicare and Medicaid for behavioral health services

ACA

The proposed NBPP for PY 2024 aims to expand behavioral health services by enlarging the network of ECPs to include Substance Use Disorder (SUD) Treatment Centers



Source: MedPAC. January 2023 Public Meeting. Available [here](#).

MedPAC: Medicare Payment Advisory Commission; CMS: Centers for Medicare & Medicaid Services; ACA: Affordable Care Act; NBPP: Notice of Benefit and Payment Parameters; ECP: Essential Community Provider; SUD: Substance Use Disorder



Unaddressed Gaps in Behavioral Health Stymies Patient Access and Experience



Leverage vs Lead



Patient advocacy groups can **leverage** existing momentum around behavioral health reform to close remaining gaps



POC: Person of Color



Government Recognizes Telehealth Is Now Part of the Health Care Landscape

Past and Upcoming Telehealth Actions (Legislative or Regulatory)

Past Actions

- Advancing Telehealth Beyond COVID–19 Act of 2021¹
- CONNECT for Health Act²
- Consolidated Appropriations Act of 2022³
- Removal of in-person requirements for abortion medications⁴

Upcoming Actions

- Expiration of flexibilities (beginning in 2025)
- DEA^{5,6}
 - Ryan Haight waiver
 - Removal of in-person requirement for Schedule 3, 4, 5 drugs
- HHS⁶
 - Proposal to permanently allow telemedicine buprenorphine prescriptions

Sources: 1. Congress.gov. Advancing Telehealth Beyond COVID–19 Act of 2021. Available [here](#); 2. Congress.gov. CONNECT for Health Act of 2021. Available [here](#). 3. Congress.gov. Consolidated Appropriations Act, 2022. Available [here](#). 4. FDA. Information about Mifepristone for Medical Termination of Pregnancy Through Ten Weeks Gestation. Available [here](#); 5. HHS. Medications for the Treatment of Opioid Use Disorder. Available [here](#); 6. Samhsa.gov. Proposes Update to Federal Rules to Expand Access to OUD Treatment. Available [here](#).
DEA: Drug Enforcement Agency; HHS: Department of Health and Human Services; OUD: Opioid Use Disorder



Patients, Providers, & Payers Face Barriers for Telehealth Services

Patients

- Lack of access to high-speed internet
- Digital literacy
- Data security

Providers

- Reimbursement changes post PHE
- Licenses to practice across state lines
- Health care professionals' bandwidths

Payers

- Integrating hybrid telehealth models
- Inconsistent parity regulation
- Measuring quality

Leverage vs Lead



Patient advocacy groups can **leverage** patient experiences and momentum from prior reform to advocate for better telehealth patient experiences



PHE: Public Health Emergency



2023 Outlook: Leverage or Lead



How will you and your team leverage or lead in 2023?



Thank You!

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Questions?

