

**Keywords:** behavioral health

**Problem:** Many people have difficulty accessing holistic behavioral health services. Additionally, the demand for these services is growing exponentially. These factors drive healthcare leaders to consider innovative ways to close the gap.

**Solution:** Legislation and policy changes aim to make BH services accessible and equitable. This article discusses the changes in CMS's behavioral health policies.

## Policy Changes: Making Behavioral Health Accessible & Equitable

*The impacts of COVID-19 linger, affecting the mental health of people of all ages. According to the Centers for Medicare & Medicaid Services (CMS), older Americans report worsening depression and anxiety. Many turn to substances like opioids and alcohol for relief. These individuals need behavioral health (BH) services but often do not know how to get help.*

*Accessing behavioral health services can be challenging, especially in underserved and rural communities. Additionally, the demand for these resources is growing exponentially. These factors drive healthcare leaders to find innovative ways to make behavioral health services accessible and equitable. Congress has responded to the apparent need with legislation and policy changes. Keep reading to learn about CMS's latest behavioral health policy changes.*

### Key Takeaways

- President Biden's Unity Agenda aims to de-stigmatize behavioral health needs and improve access to mental health resources nationwide. This strategy focuses on developing the mental health workforce, connecting Americans to resources, and forming a continuum of support.
- Marriage and family therapists and mental health counselors can enroll as Medicare providers. This change aims to bolster the behavioral health workforce.
- Medicare now covers intensive outpatient programs. These resources deliver high-intensity services without hospitalization.
- CMS allows BH providers serving in federally qualified health centers to work independently. This adjustment increases cognitive behavioral and counseling services in underserved and rural communities.
- Behavioral health providers, especially those delivering crisis care, will receive increased reimbursements. PCPs focused on promoting mental health will also receive additional reimbursements.

## Tackling the mental health crisis

President Biden's Unity Agenda includes a comprehensive strategy to revolutionize behavioral health services. The agenda addresses how people understand mental health needs and access care. It also **promotes the integration of mental health services in various healthcare settings**. This strategy has three key objectives:

- Develop the mental health workforce
- Connect more Americans to behavioral health resources
- Form a continuum of support

Tackling the mental health crisis begins by adjusting preconceived notions and biases. As a nation, we must think differently about mental health. Treatment works, and healing is possible with improved access to behavioral health services.

## Bolstering the behavioral health workforce

CMS recognizes the need for an "all-hands-on-deck approach" to behavioral health services. Marriage and family therapists and mental health counselors provide essential services like group therapy and psychotherapy. Historically, these clinicians could not enroll as Medicare providers. However, recent congressional action changed that. Now, more than 400,000 practitioners can independently serve people with Medicare.

Medicare Advantage has also seen modifications. Its recipients can now access behavioral health services from newly enrolled providers. CMS also requires Medicare Advantage to expand its network of behavioral health facilities. By increasing available options, more people can access the following services:

- Marriage and family therapy
- Mental health counseling
- Opioid treatment
- Substance use disorder interventions

Peer support specialists are individuals with firsthand experience and substance use disorder knowledge. These individuals play a vital role in improving mental health. New payment policies support these workers who meet social needs like the following:

- Food
- Housing
- Transportation

These barriers often interfere with health care. Community health workers and peer support specialists understand the tensions and needs. They fight health disparities daily by promoting social and mental wellness. **CMS aims to expand the BH workforce by revising enrollment policies and recognizing professionals who promote mental wellness.**

## Closing gaps and improving access

Access to BH services improves outcomes, patient experience and cost savings. Historically, Medicare covered psychiatric hospitalization for acute needs, partial hospitalizations and outpatient therapy. However, research indicates gaps in behavioral health interventions.

### Intensive outpatient programs

Medicare now covers intensive outpatient programs (IOP). These programs provide patients with **high-level therapies without hospitalization**. Treatments last several hours a day, and patients return home in the evenings. IOPs are helpful for patients transitioning from acute hospitalization to traditional outpatient therapy.

### Adjusting supervision levels

Congress adjusted supervision levels in federally qualified health centers or rural health clinics. Behavioral health providers serving in these facilities can now work independently. CMS **no longer requires an on-site doctor, physician assistant or nurse practitioner**. This policy makes cognitive behavioral therapy and counseling more available in rural or underserved communities. Additionally, practitioners providing opioid treatment programs can periodically utilize telehealth technology.

## Payment changes for BH services

CMS aims to value and pay for behavioral health services more accurately. Crisis service will receive increased reimbursement. Crisis service providers deliver care to patients wherever they are. Patients are not required to come into the office. This service has proven essential and effective. Consequently, **payment reimbursement rose to 150% of the usual physician fee schedule rate**. This upsurge *reflects the cost and risk* associated with providing crisis services. Other payment reimbursement changes relate to the following:

1. Specific timed services, like psychotherapy
2. In-office substance use disorder treatment

PCPs are at the frontline of many health crises, and mental health is no different. Additional reimbursements for PCPs aim to encourage mental health mindfulness and promote referrals.

## Behavioral health changes that promote mental wellness

CMS recognizes the growing need for BH practitioners. Congressional policy changes aim to make behavioral health services accessible and equitable. CMS strives to promote mental wellness nationwide by supporting providers and expanding enrollment options.

We understand that accessible, equitable behavioral health services are vital for community wellness. We also know that primary care providers are bombarded with mental health conditions. That is why we want to be your partner in care. Click the "Refer" button to get started.

## Resources

“Important New Changes to Improve Access to Behavioral Health in Medicare.” Centers for Medicaid and Medicare Services, 2023, Important New Changes to Improve Access to Behavioral Health in Medicare | CMS.

“Fact Sheet: Biden-Harris Administration Announces New Actions to Tackle Nation’s Mental Health Crisis.” The White House: Briefing Room | Statements and Releases, 2023, Fact Sheet: Biden-Harris Administration Announces New Actions to Tackle Nation’s Mental Health Crisis | The White House.