

## **Streamlined and Effective Community Engagement Implementation:**

### ***Key Considerations for Mental Health and Substance Use Care***

The National Council for Mental Wellbeing (National Council) appreciates CMS' dedication, time, effort, and critical role in implementing Medicaid changes under H.R.1. The National Council looks forward to the opportunity to work with CMS and stands ready to serve as a conduit between policy changes at the federal level and the thousands of mental health and substance use providers across our country.

Based on the input of the over 3,200 providers we represent, we ask CMS to consider the following recommendations intended to ensure individuals with mental health and substance use disorder get the health care they need to thrive.

#### **Recommendation 1: Establish clear guidelines while providing states with flexibility to tailor solutions, definitions, and processes to the people that they serve.**

- Providing guidance, implementation support, and a “policy floor” will support states in establishing their operating definitions and processes to implement community engagement requirements. For example, the statutory language under H.R.1 for the term “disabling mental disorder” under “medically frail” recognizes Congress’s intent to provide states flexibility to best serve their population.

#### **Recommendation 2: Create pathways for states to leverage existing claims and pharmacy data.**

- Effective use of ex parte verification will enable states to identify individuals eligible for community engagement exemptions, minimizing unnecessary redeterminations and avoiding coverage losses that could interrupt access to care, which could in turn become more costly for states and local communities down the road.
- Any known existing lags in data sharing should be recognized, addressed, and mitigated to deter any interruption to an individual accessing needed care.
- Integrated technology systems will be essential to reducing both patient and provider administrative burden, while also ensuring any third-party tech complies with all data privacy requirements for patients. Using existing claims data effectively and efficiently leverages existing resources.

#### **Recommendation 3: Establish a simple process for clinicians to certify community engagement exemptions, as part of medical provider decision making, while allowing state flexibility.**

- Given the mental health and substance use workforce shortages across the country, particularly in rural communities, individuals can face significant delays to getting needed care. Such delays can result in individuals not receiving a diagnosis, and new beneficiaries who need an exemption may not have yet gotten appropriate treatment that may be needed for them to qualify for an exemption to the community engagement requirements in their state based on claims data or other criteria.
- We suggest allowing flexibility for providers to use their medical decision-making expertise and discretion to certify that someone has met the requirements for an exemption in their state, in the least administratively burdensome manner.