



Regional Employer-Stakeholder Engagement Team Action Plan for The Path Forward for Mental Health and Substance Use August 2022

The Florida Alliance for Healthcare Value (the Florida Alliance) was selected to lead efforts in Florida to improve mental health and substance use treatment as part of a national transformative initiative called The Path Forward for Mental Health and Substance Use (The Path Forward) led by the National Alliance of Healthcare Purchaser Coalitions, the American Psychiatric Association, the American Psychiatric Association Foundation Center for Workplace Mental Health, The American Health Policy Institute, the HR Policy Association, the Meadows Mental Health Policy Institute, The Bowen Foundation, and The JED Foundation.

Our efforts are focused on achieving measurable improvements in five priority areas – the five “pillars” of The Path Forward:

- Improving Network Adequacy by increasing capacity and improving access to “in-network” mental health/substance use (MH/SU) treatment specialists
- Expanding use of the Collaborative Care Model to integrate MH/SU care into primary care
- Implementing Measurement-Based Care in both primary care and MH/SU care to improve quality and outcomes
- Expanding High-Value Tele-Behavioral Health
- Ensuring Mental Health Parity compliance

The Florida Alliance is leading one of eight Regional Employer-Stakeholder Engagement Teams (RESETs) in the United States focused on these reform efforts. We are leveraging the influence of our employer and healthcare purchaser members to work with Florida’s health plans, medical and MH/SU treatment providers, consultants, and brokers to transform the current system and achieve meaningful outcomes. The five pillars of The Path Forward do not currently operate interdependently in employer benefits plans. The Florida Alliance will engage multiple stakeholders to understand and identify strategies and actions for full integration.

We are engaging a diverse mix of Florida Alliance employer members, mental health/substance use practitioners, innovators, health plans, policy makers, and other key stakeholders for a 12-month MH/SU Employer Learning Collaborative. The participants will review the draft action plan outlined below, make needed adjustments, and hear updates on the progress in each area of focus, once approved.

Our employer learning collaborative format results in bi-directional learning. Not only will our employer members learn about how to improve the system of care for their plan members, but the content experts and other stakeholders will learn about the obstacles standing in the way of employers improving the system of care and bring these learnings to colleagues, policy makers, and The Path Forward National Steering Committee. Implementation insights and policy positions developed will provide a blueprint for systemic change to MH/SU treatment in health benefits plans that include evidence-based best practice, improved access, improved patient experience, true transparency of cost and quality, and encouragement of innovation. We will bring in content experts to address each topic.

Our Learning Collaboratives are structured to take our employer members and other key stakeholders through a process that leads to results:

Education -> Awareness -> Intent -> Action -> Results

The kick-off meeting in August will provide an overview of The Path Forward and the learning collaborative process as well as an overview of the action plan for their consideration and input. The agendas for the subsequent monthly meetings will address key issues in each focus area and the associated Path Forward Employer/Plan Sponsor Recommendations which are explained below:

- **SEPTEMBER MEETING:** This meeting will focus on the tele-behavioral health pillar of The Path Forward. We will present our updated *Employer Guide to High-Value Tele-Behavioral Health (TBH)*. We will discuss policy issues to consider weighing in on that impact the delivery of TBH. Additionally, the employers will be educated on why The Path Forward feels they should reimburse audio-only and audio-video MH/SU treatment sessions at the same level as in-person visits. We will explain the rationale for this position. We hope to engage in an interactive discussion with all attendees about this recommendation and determine who is interested in making this change, and what is needed to implement the recommendation.
- **OCTOBER MEETING:** This meeting will focus on the network adequacy pillar of The Path Forward. The employers will be encouraged to ask their third-party administrator (TPA), their solution provider if MH/SU services are carved out, and Employee Assistance Program provider to provide data to evaluate the adequacy of the network of MH/SU treatment providers. The TPA's provider network should include sufficient numbers and availability of MH/SU treatment providers so that plan members seeking care can obtain timely in-network appointments. We will explain the data to be requested and what an acceptable response should look like, provide the detailed data form, and the rationale for asking for the information. As above, we will discuss the recommendation and learn about any concerns, and what is needed to move forward with implementing the recommendation.
- **NOVEMBER MEETING:** This meeting will not focus on one particular pillar of The Path Forward but will instead look at innovative programs and tools for increasing awareness of MH/SU, the awareness of available treatment programs, and new approaches to treating MH/SU. At this month's meeting we will demonstrate how employers and their employees can use the ATLAS (Addiction Treatment Locator, Assessment, and Standards) platform for Florida developed by Florida Blue and Shatterproof to find high quality treatment. We will also bring in solution providers/innovators in the MH/SU awareness and treatment space, including workplace awareness trainings and prescription digital therapeutics for addiction recovery to explain how their products work and discuss reimbursement/coverage approaches.

- **DECEMBER MEETING:** This meeting will not focus on one particular pillar of The Path Forward but will instead feature presentations from the Center for Workplace Mental Health. *Notice.Talk.Act. at Work* is an e-learning training module that supports leaders, managers, and supervisors to understand the impact of MH on employees and the organization and then to notice what may be signs of potential MH concerns, know how to talk with a person they may be concerned about, and be better equipped to act by connecting a person with services and support. This program has been developed by the Center for Workplace Mental Health of the American Psychiatric Association Foundation. We will also discuss federal and state policy considerations, looking at policy considerations being studied by the Center and also at Georgia's recently passed legislation on MH parity. We will talk about potential bills being introduced in Tallahassee and in Washington, DC in the new year and whether and how to support, express concern, weigh in, etc.
- **JANUARY MEETING:** This meeting will focus on the Collaborative Care Model pillar of The Path Forward. During this meeting, we will educate the participants on the Collaborative Care Model – integration of MH/SU screening and treatment into primary care. It is the Path Forward position that out-of-pocket expenses for the collaborative care model should be waived and there should be no limits on the use of code 99494. We will explain the rationale for this position. We will explain why making these changes will increase access and reduce future costs. As in earlier months, we will seek input from the participants on any concerns and challenges and determine what is needed to move forward with implementing this recommendation.
- **FEBRUARY MEETING:** This meeting will focus on the Measurement-Based Care pillar of The Path Forward. Related very closely to the Collaborative Care Model, is Measurement-Based Care (MBC). MBC provides a quantifiable means through which clinical progress can be tracked and adjusted if need be, to ensure optimal treatment effectiveness. At this meeting we will explain what it is and talk about the recommendation that employers should submit letters to accreditation agencies (e.g. URAC, PCMH) urging that use of MBC be a requirement for accreditation of all providers. We will get into more details during the ELC, but in some cases this is individual providers and in others, the organization. We hope to have a discussion at that meeting with the organizational providers, their clinical teams, and other key stakeholders to seek their reaction to this recommendation. At this meeting, we will also review where we stand on implementation of the recommendations presented and discussed in the first 6 months of the learning collaborative and determine whether we need to adjust our course, create additional guidance, etc.
- **MARCH MEETING:** This meeting will focus on the Mental Health Parity pillar of The Path Forward. At this meeting, we hope to have in hand the Department of Labor's long awaited draft regulations for Mental Health Parity Compliance to review and discuss. We will discuss the Path Forward recommendation that the TPA's provide additional indemnity to employers who are plan fiduciaries and are liable for noncompliance with parity (unless they have a waiver). Employers have little or no knowledge or influence over nonquantitative treatment limits (a key aspect of MH parity) for MH/SU treatment. We will share the Path Forward's recommendations for how to discuss this matter with the TPAs and determine what is needed to implement this recommendation.
- **APRIL, MAY, JUNE, and JULY MEETINGS:** During the remaining meetings of the learning collaborative, we will discuss progress towards implementation of each of the recommendations presented in previous meetings. We will also ask the employers to share with the participants

how they have progressed, what lessons have been learned, roadblocks encountered, and discuss how they can work together in various markets to effect change.

By the end of the learning collaborative, we will hope to have achieved the following outcomes:

- Learning collaborative work will provide action plan templates which other employers can model their initiatives after
- The Florida Alliance team will compile action plans, learnings, interviews, etc. for writing and publishing of white papers, checklists, and action briefs depending on funding
- The learning collaborative engagement will have built a network of employer champions and influencers
- Employers and their consultants will have the tools to design robust employer benefit plans and offerings, TPAs and providers will have begun work to embrace the Collaborative Care Model and MBC
- Employers and their consultants will be educated and understand the importance of having their TPA respond to the model data request form that measures network adequacy and capacity as well as having begun an assessment of how the provider network should be expanded to reduce barriers to care
- Employers and their consultants will understand why it is best practice to waive out of pocket expenses within the Collaborative Care Model and the benefits of doing so
- Employers and their consultants will have a greater appreciation for and rationale as to why CPT code 99494 usage should not have inherent limits and the impact it has on the continuum of care
- Employers will have a greater appreciation for employees who may be in greater distress and require more frequent follow-up visits.
- Employers will have considered working with their TPAs to submit letters to accreditation agencies to ensure MBC be a requirement for accreditation of all providers
- Employers will better understand how to determine whether they are in compliance regarding non-quantitative treatment limits and take necessary steps to ensure they achieve compliance
- Employers will have the tools necessary to require benefit plans to ensure reimbursement for audio-only and audio-video MH/SU treatment is on par with in-person visits
- Employers and other vested stakeholders will have the necessary tools to advocate for changes at the state and federal legislative level

We acknowledge that this action plan may appear to be aspirational, but it is actually very achievable. The Florida Alliance benefits from its role as a RESET by having access to The Path Forward Steering Committee experts as well as through our interactions with many passionate and committed Floridians working to fix the MH/SU treatment system of care. Our employer members have worked diligently, especially since the pandemic, to address the MH/SU needs of their employees. Coming together through the learning collaborative process will provide the energy needed to work collaboratively to achieve what we all want to see – a high quality, affordable and accessible system of care for MH/SU treatment in Florida.