



Pilot Proposal Would Extend EHR Incentives to Psych Hospitals

By Alex Ruoff | March 11, 2016 5:17PM ET
Amendment to Mental Health Reform Act

Development: Senator to introduce amendment to mental health reform bill to extend EHR incentive payments to psychologists and psychiatric hospitals as a pilot program.

Next Steps: Markup of Mental Health Reform Act set for March 16.

March 11 (BNA) -- Advocates for extending federal electronic health record incentive payments to psychologists and psychiatric hospitals are hoping to find success as part of Congress's effort to reform mental health services.

Sen. Sheldon Whitehouse (D-R.I.) is expected to offer an amendment to a Senate mental health reform bill that would create a \$250 million pilot program offering incentive payments to mental health providers that adopt electronic health records, Alfonso Guida, coordinator of the Behavioral Health IT Coalition, told Bloomberg BNA. Whitehouse is expected to offer the amendment to the Mental Health Reform Act ahead of the bill's March 16 markup by the Senate HELP Committee.

Concerns over the cost of the pilot program could prevent the amendment from passing, Guida said.

However, ongoing efforts to bolster mental health services by both chambers of Congress still present the best opportunity for extending federal Medicare and Medicaid EHR incentives to behavioral health providers, who are currently excluded from participating in the federal meaningful use program, he said.

"There's an emerging consensus that a policy error was made here and it's time to correct it," Guida said. Guida lobbies on behalf of NetSmart, a Kansas-based IT company that makes EHRs designed for behavioral health providers, and the National Council for Behavioral Health (NCBH).

Broader Changes

Guida said he hopes lawmakers will consider a broader, more expensive, amendment to the bill if the Senate Health, Education, Labor and Pensions Committee's mental health legislation comes to the Senate floor later this year.

He said he's hoping lawmakers will allow behavioral health providers to participate in the federal meaningful use program, which has already given more than \$30 billion to physicians and hospitals that adopted EHR systems. Guida said Whitehouse's amendment doesn't call for altering the meaningful use program because the Senate HELP Committee doesn't have jurisdiction over Medicare spending. Program spending is under the jurisdiction of the Senate Finance Committee.

However, extending Medicare and Medicaid meaningful use program incentive payments to behavioral health providers could cost more than \$5 billion over the next 10 years, according to the Department of Health and Human Services.

The HHS estimated in its proposed FY2017 budget that extending meaningful use program incentive payments to behavioral health providers would add \$760 million in new Medicare costs and \$4.44 billion in new

Medicaid costs over the next 10 years.

The HHS warned in its proposed budget that psychiatric hospitals, community mental health centers and substance abuse treatment clinics were lagging behind their peers in adopting EHRs systems. The HHS is worried that behavioral health-care providers can't easily access the health records of the people they treat without EHR systems.

Support for New Incentives

NetSmart, the NCBH, the American Psychological Association and other groups sent a letter to the Senate HELP Committee March 10 supporting Whitehouse's amendment.

Extending meaningful use incentive payments to behavioral health providers has bipartisan support in both the House and Senate, the groups said in their letter. The Behavioral Health IT Act of 2013 (H.R. 2957, S. 1517), introduced by Rep. Tim Murphy (R-Pa.) in the House and Whitehouse in the Senate, had 60 co-sponsors altogether. However, neither bill was considered by a committee.

The Senate HELP Committee March 16 will host a markup session for five bills, including the Mental Health Reform Act of 2016. A draft version of the bill was released March 8, revealing lawmakers' interest in reforming the state mental health grant system and addressing provider workforce shortages.

However, the Mental Health Reform Act will be combined with efforts from two other Senate committees in order to address how to pay for the legislation's provisions (see related article).

