2015-2017 Massachusetts Legislative/Regulatory/Advocacy Priorities
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(not in order of priority)

MPA will seek legislative and/or regulatory changes that have the following goals:

1. Consumer Access to Psychological Services

   General Access to Behavioral Services MPA will work to improve access to behavioral, mental health and substance abuse services and to ensure that laws and regulations to protect consumer access to mental and behavioral health assessment and treatment services are fully implemented.

   a. Ensuring that new and existing laws and regulations ensure access to all licensed behavioral provider types and services.

   i. Rescind regulations that prohibit psychologists (and other providers) from providing treatment under Masshealth (non-managed) plans.

   ii. Service Coverage: Payers and Health plans shall be required to cover the full range of assessment and treatment procedural services.

   iii. Medicaid Autism Legislative Fix

      1. New Autism Bill allows payment under Medicaid to ABA providers, but not Psychologists for behavioral health services. Seek legislative change to fix.

   b. Increasing access to effective, ethical and otherwise professionally appropriate and acceptable behavioral health prevention, assessment, consultation, and treatment services integrated in primary care and other healthcare entities.

   c. Medical Necessity Criteria Transparency

      i. Seek full and appropriate implementation of current state and federal transparency laws in Massachusetts.
ii. Expand Transparency of Medical Necessity to include mandating information about how criteria are developed, by whom, specific role (i.e. approve vs. consultation), paid, etc.

iii. Expand and improve processes to challenge medical necessity criteria on individual case and global basis.

d. Prohibit Variable Copayments, Co-Insurance and Deductibles for all services (assessment and treatment) provided by behavioral health providers based on diagnosis (psychiatric vs. non-psychiatric) or procedure type (treatment vs. assessment).

e. BH Service Rate Setting Transparency:
   i. Seek transparency in how rates are set for behavioral health services.

f. Relative Reimbursements rates for BH services must be reflective of the relative value of services provided.
   i. Health plans shall reimburse behavioral providers in a manner that reflects the relative work value for each service and shall not use reimbursement policies as a way to undermine consumer protections related to utilization management for services. (e.g., THP: paying the same thing for psychotherapy vs. psychotherapy crises). Consider basing on relative values established by CMS.

g. Requiring health plans to systematically report the number and percent of adverse determinations specific to each behavioral health CPT procedure code.

h. Telehealth: support legislation and regulation that supports consumer access to ethical and properly funded behavioral health services provided by otherwise appropriate video transmission.

i. State Rate Setting: Seek modification of state set rates for psychological services to ensure that rates are most consistent with market conditions and reflective of the training and other costs associated with providing the services.

2. Consumer Protection (other)
   a. Restricting the terms psychotherapy and psychotherapist to only licensed professionals with psychotherapy in their scope of practice and blocking creation of new licensure types that license types of treatment in contrast to professions, as a means to circumvent these restrictions.

   b. Guardian ad Litem/Court Appointed Evaluator protections: Support extension of pseudo-judicial immunity for GALs and psychologists providing court appointment evaluations or assessments. (supporting ongoing efforts by MAGAL and others if continuing)

3. Scope of Practice Issues
a. MPA will work to identify and change laws and regulations in which the scope of practice for psychologists is unfairly restricted and prevents access for consumers to the most appropriate psychological services.
   i. Continue to seek amendment to nurse practice act to allow psychologists to give appropriate orders to nurses.

4. Training:
   a. Increasing funding for psychology training.
      i. Including health plan/payer coverage for psychology interns similar to policies used now by MBHP and in other states (e.g. Colorado & Minnesota).