



ABH Committee Meetings

ABH will continue to hold check-in calls with our services committees to hear questions and feedback that you have, answer as many questions as we can and seek answers to those we cannot. These calls are for ABH members only.

If you are not a member of one of our Committees but you would like to join, ABH invites you as a member to participate.

Please review the [Committee Descriptions](#), identify which ABH Committees you would like to join, and contact Meg Socha, Member Engagement and Event Coordinator at msocha@abhmass.org.

Please note that the Children's Services CEO Leadership Committee, Senior Leadership Committee on Partnering with Underserved Populations, and ACCS Policy Committee are for CEOs and their direct reports only.

To join one of these committees, please contact us directly.

ABH Commitment to Act to End Racism

ABH stands with the victims of injustice and violence. We extend our deepest condolences to the families of George Floyd, Breonna Taylor, Ahmaud Arbery, as well as the many others whose names we know and do not know. We stand united against racism and hate.

The impact of systemic racism on mental health is well-established and we must do better to acknowledge this and incorporate this knowledge into treatment access and delivery.

A growing body of evidence demonstrates that racial discrimination has significant health impacts. A 2017 Lancet article reported that “[t]he strongest evidence in the scientific literature is for adverse effects [due to racism and interpersonal discrimination] on psychological wellbeing, mental health and associated health practices [including use of tobacco, alcohol and drugs].” In 2019, researchers reporting on Institutes of Medicine findings stated that “...across virtually every type of therapeutic intervention in the U.S, ranging from high technology interventions to the most basic forms of diagnostic and treatment interventions, blacks and other minorities, receive fewer procedures and poorer quality medical care than whites.”

ABH stands in solidarity with those who are working to change the system. We want to turn our emotion into action. As Martin Luther King Jr. once said, “The time is always right to do what is right”. The time is right for ABH to do the right thing.

ABH's Senior Leadership Committee on Partnering with Underserved Populations has met to strengthen our agenda to bring about meaningful change. We will report back to members in the near future.

Sincerely,

Lydia Conley
President/CEO

Updates to the Public Charge Rule

MassHealth has shared the following update to the Public Charge Rule: As of February 24, 2020, the federal government considers applications for and/or receipt of public benefits, such as certain types of MassHealth coverage, in determining whether a person is likely to become a public charge for federal immigration purposes.

The public charge rules are complicated and may impact an individual's immigration status. If you work with individuals that have questions about whether public charge applies to them or their family, we recommend the individual speak to an immigration expert.

The recent changes allow more types of public benefits to be considered when making public charge determinations. Benefits considered will now include:

- Certain MassHealth benefits;
- Supplemental Nutrition Assistance Program (SNAP); and
- Rental assistance under Section 8 housing vouchers, and public housing.

There are health benefits that are not taken into account in a public charge determination, including: emergency Medicaid (MassHealth Limited), MassHealth coverage for pregnant women or children under age 21, and coverage through the Massachusetts Health Connector (including Advance Premium Tax Credits (APTCs) and ConnectorCare), Health Safety Net, and unsubsidized health insurance.

In addition, U.S. Citizenship and Immigration Services (USCIS) has issued guidance that it will not consider testing, treatment, or preventive care related to COVID-19 as part of a public charge inadmissibility determination, even if Medicaid or another public benefits program pays for it.

Many immigrants are not subject to public charge determinations. The revised public charge rule says that the following immigrant statuses are not subject to the public charge rule:

- Green card holders who do not leave the country for more than 6 months (180 days)
- Refugees
- Asylees
- Survivors of trafficking, domestic violence or other serious crimes (T or U visa applicants/holders)
- Special immigrant juveniles
- Certain people paroled into the U.S.
- Violence Against Women Act (VAWA) self-petitioners
- Active duty service-members

The new rule does not change whether or not a person is eligible for MassHealth or insurance through the Massachusetts Health Connector.

If you are applying for financial help through mahealthconnector.org, even if you only intend to apply for Connector benefits, eligibility for MassHealth will be checked at the same time.

COVID-19 Massachusetts Testing Site Map

The Massachusetts Department of Public Health (DPH) has released an interactive [map](#) that provides an easy way to locate a COVID-19 test site near you. All of those experiencing symptoms or those who have been in close contact recently with a COVID positive individual should seek testing.

ABH COVID-19 Landing Page

ABH has created a COVID-19 resource page where we are collecting the guidance most relevant to ABH members:

<https://www.abhmass.org/newsroom/announcements/guidance-on-covid-19.html>.

State Budget Updates

FY21 Interim Budget

Governor Baker signed an interim FY21 budget ([H. 4806](#)) into law on Thursday, June 25. The bill, known as a 1/12 budget, provides interim funding (\$5.25 billion) for the first month of FY21 to allow the Commonwealth to continue operations while the legislature develops a full budget for the upcoming fiscal year.

FY20 Supplemental Budget

The House and Senate have each passed their own versions of a supplemental budget for FY20. This bill would appropriate \$1.1 billion for a number of COVID-19 related expenses, including previously committed-to supplemental payments to Chapter 257 providers under an agreement negotiated by the Collaborative. The House and Senate must resolve the differences between the two bills and vote on it in each chamber one more time before it heads to the Governor for his approval.

Family Support & Training and Therapeutic Mentoring

The Division of Insurance and the Department of Mental Health recently approved a request from ABH and the insurance carriers to delay the start date for Family Support and Training and Therapeutic Mentoring to January 1, 2021.

In addition, DMH has determined that Family Partners and Therapeutic Mentors must complete the [Community Health Worker Certification](#). DMH and DPH's Bureau of Health Professions Licensure have created a [webinar](#) to explain the Community Health Worker Certification requirements and process. In addition, there are also [cross-walk](#) documents to help family partners, therapeutic mentors, their supervisors and program managers understand the standards. As a reminder, the "work hours only" certification pathway is the only one currently available and is due to expire on June 30, 2021.

If you have any questions, please don't hesitate to contact Megan Thompson at mthompson@abhmass.org.

PPE Available at Reduced Rates

To help you help others safely, the National Council for Behavioral Health has partnered with [Panacea Life](#) to deliver a variety of PPE at reduced rates.

To take advantage of this opportunity, visit [Panacea Life's online store](#), where you will find a variety of PPE for purchasing. For information on each item, including shipping information, please click on the item. This store will be regularly updated based on available inventory. You do not have to be a National Council member to purchase from the website.

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Senate Healthcare Bill

The Massachusetts Senate debated and passed [S.2769, An Act Putting Patients First](#). This bill was brought forth by the Senate Committee on Ways and Means and proposed a number of healthcare reforms that have gained attention in response to COVID-19. This legislation focused heavily on supporting the rapid expansion of Telehealth to meet the healthcare demand during the pandemic.

The bill included numerous provisions that supported the expansion of telehealth as a modality for delivering care. ABH was pleased to see the bill's key provisions, including:

- Defining telehealth to include audio-only telephone;
- Requiring rate parity between services delivered in-person and the same service delivered via telehealth through July 31, 2022; and
- Requiring payers (including MassHealth, GIC, HMOs, Preferred Provider Arrangements, Accident & Sickness Policies, Hospital Services Corporations and Medical Services Corporations) to utilize the same processes and standards for utilization review (including preauthorization), network adequacy, cost sharing that are in use for in-person services.

The legislation also expands the scope of practice of advanced practice registered nurses (nurse practitioners, nurse anesthetists, psychiatric nurse mental health clinical specialists), creates consumer protections related to out-of-network billing also known as "surprise billing", and directs the Center for Health Information Analysis to study and report on the use of telehealth, including associated costs to the Commonwealth.

The Senate passed S.2769 by a vote of 38-0. This bill will next be referred to the House of Representatives for further consideration. ABH will follow its progress and continue to advocate for its passage in the House.

U.S. Census 2020

U.S. Census 2020 is restarting its activities after being suspended due to the COVID-19 pandemic. We hope that you can encourage your staff and clients to complete the 2020 census. Click [here](#) for a toolkit to help guide your organization's efforts to engage and educate clients and staff on the importance of completing the 2020 U.S. Census.

Interesting Reads:

- [‘Cries for Help’: Drug Overdoses are Soaring during the Coronavirus Pandemic.](#) *The Washington Post.*
- [Barriers to Addiction Care Fell Because of COVID-19. Now the Challenge is Keeping Them Down.](#) *Michigan Health Lab.*
- [Telehealth is Working, Let's Keep it That Way.](#) *CommonWealth (opinion)*