KPA 2018 Legislative Priorities

At the state level:

Support state funding and legislation that increases access to behavioral health services and supports a positive climate for psychological providers.

<u>Rationale/examples:</u> Require uniform credentialing and prompt payment by Medicaid MCOs and other insurers; Support expanded services to address the Commonwealth's opioid crisis; Provide financial help to sustain CMHCs' operations as part of the state's retirement system.

Support legislation maintaining psychologists' role in licensing, regulating, and overseeing the practice of psychology.

<u>Rationale/examples:</u> Maintain the autonomous functioning of the KY Board of Examiners of Psychology.

Uphold public protection by opposing legislation allowing non-psychologists to deliver services which are clearly defined as the practice of psychology.

<u>Rationale/examples</u>: Seek revision of bill language which, if not modified, would infringe on the practice of psychology by those seeking licensure in another field.

Increase psychology's voice in decisions affecting behavioral health.

<u>Rationale/examples:</u> Establish a Palliative Care Interdisciplinary Advisory Council within the Cabinet for Health and Family Services with one or more psychologists on the council.

Support legislation that improves health equity for historically underserved populations.

<u>Rationale/examples:</u> Add health supports to reduce gaps in health services; Reimburse peer support specialists in both the mental health and substance use disorder arenas; Take actions to decrease social isolation in vulnerable populations which erodes health quality; Create community health workers to link Kentuckians with appropriate health care services.

Support legislation designed to improve population health outcomes in Kentucky.

<u>Rationale/examples:</u> Support anti-smoking measures; Fund health literacy programs across the state.

Maintain Medicaid coverage to all Kentuckians below 138% of the federal poverty level with full benefits and without barriers.

<u>Rationale/examples:</u> Protect coverage of the approximately 440,000 Kentuckians on the Medicaid rolls under the Medicaid Expansion, many of whom access substance abuse services.

Support legislative priorities adopted by the KY Mental Health Coalition.

<u>Rationale/examples</u>: Biennial budget which at a minimum maintains current funding for health and education; protects SMI individuals from the death penalty; assures access to prescribed medications; protects victim's right

At the federal level:

Require all health plans to:

- maintain Essential Health Benefits, including coverage of mental health and substance use disorder services and behavioral health treatment
- apply parity requirements under the Mental Health Parity and Addiction Equity Act (MHPAEA) to Medicaid and Medicare and to all plans in the individual, small and large group markets
- establish an array of basic insurance protections, including prohibiting pre-existing condition exclusions, annual/lifetime coverage limits, discrimination based on health status
- require guaranteed renewal of coverage, network adequacy, age and gender rating restrictions, an effective appeals processes

Extend Medicaid coverage to all Americans below 138% of the federal poverty level with maximum benefits and minimum barriers.

Support the Medicare Mental Health Access Act, H.R. 1173/S.448, which would add psychologists to Medicare's "physician" definition and remove physician oversight and referral requirements under Medicare that would make it easier for patients to access behavioral health services.