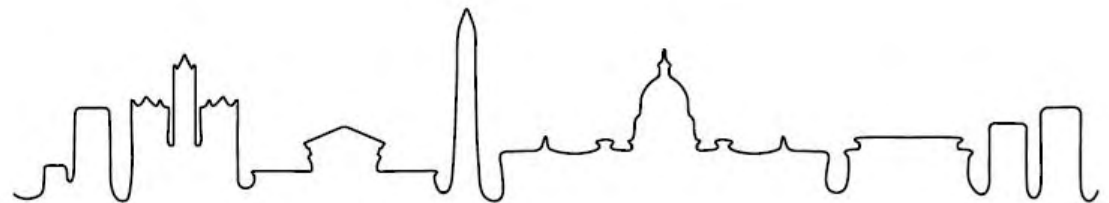


American Association of
Child & Adolescent
Psychiatry

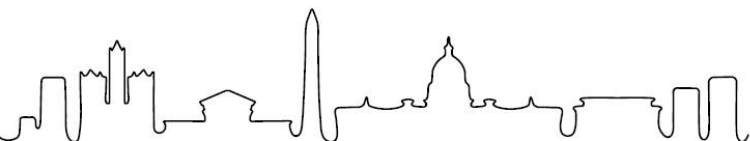
AACAP 2023 LEGISLATIVE CONFERENCE

MAY 1, 2023
VIRTUAL TRAINING



Agenda

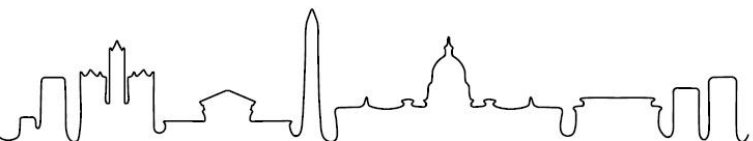
- Welcome and Introductions
 - Karen Pierce, MD, AACAP Advocacy Committee Co-Chair
 - Laura Willing, MD, AACAP Advocacy Committee Co-Chair
 - Warren Ng, MD, AACAP President
- Political Landscape Overview
 - Julie Allen, Powers Pyles Sutter Verville PC
- AACAP Policy Priority Review
 - Alexis Geier Horan, AACAP Chief of Advocacy and Practice Transformation
- Congressional Meeting Tips & Logistics
 - Christopher Kush, CEO, Soapbox Consulting
- State Room Breakouts
 - Ben Melano, AACAP Deputy Director of Federal Affairs



Introductions

Advocacy Committee Members

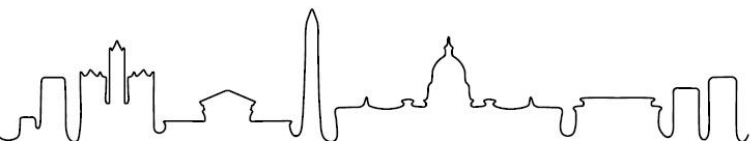
- William Arroyo, MD (CA)
- Avanti Bergquist, MD (WA)
- Clarence Chou, MD (WI)
- Suzanne Don, MD (AZ)
- Jennifer Dorr, DO (MD)
- Sandra Fritsch, MD (CO)
- Robert Holloway, MD (CA)
- Brian Keyes, MD (CT)
- Melvin Oatis, MD (NY)
- Karen Pierce, MD (IL) *Co-chair*
- Chris Rogers, MD (CO)
- Justin Schreiber, DO (PA) *liaison*
- Adam Sagot, DO (NJ)
- Laura Willing, MD (MD) *Co-chair*



Introductions

AACAP Government Affairs Staff

- Alexis Geier Horan
Chief of Advocacy & Practice Transformation
- Ben Melano
Deputy Director of Federal Affairs
- Karen Ferguson
Deputy Director of Clinical Practice
- Emily Rohlffs
State Advocacy & ROCAP Engagement Manager





POWERS

POWERS PYLES SUTTER & VERVILLE PC
ATTORNEYS AT LAW

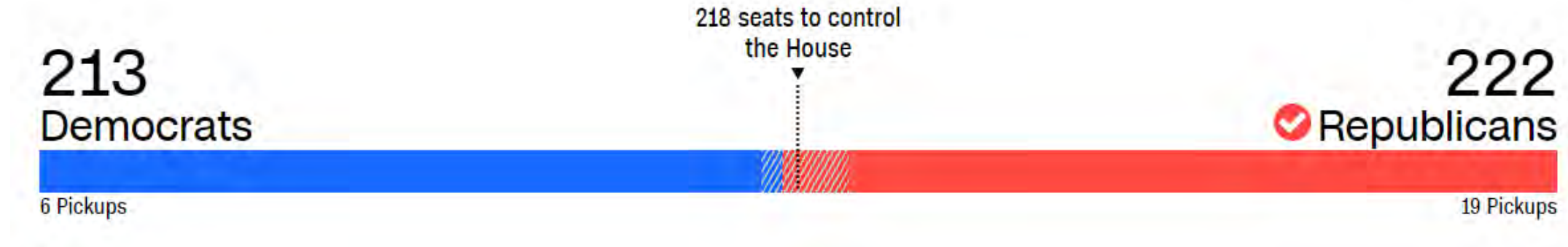
Political Landscape 2023

American Association of Child and
Adolescent Psychiatry

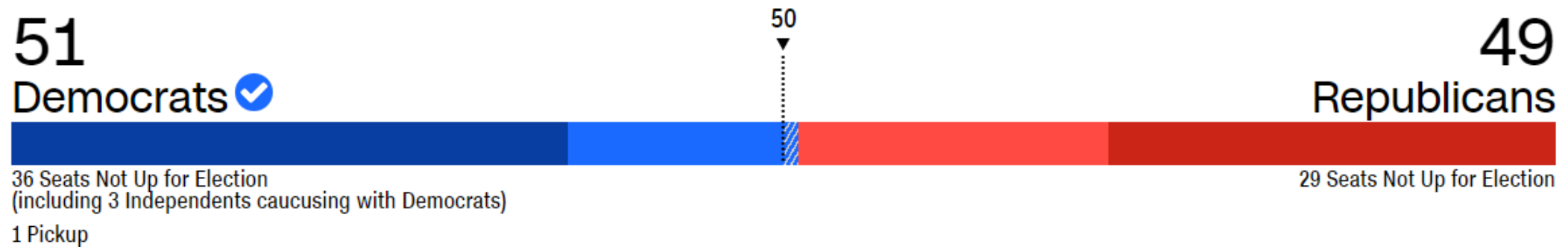
Presented by Julie Allen

Congress: Balance of Power

HOUSE



SENATE



Senate Leadership

**Majority Leader Chuck
Schumer (D-NY)**

**Minority Leader Mitch
McConnell (R-KY)**



House Leadership

**Speaker Kevin
McCarthy (R-CA)**

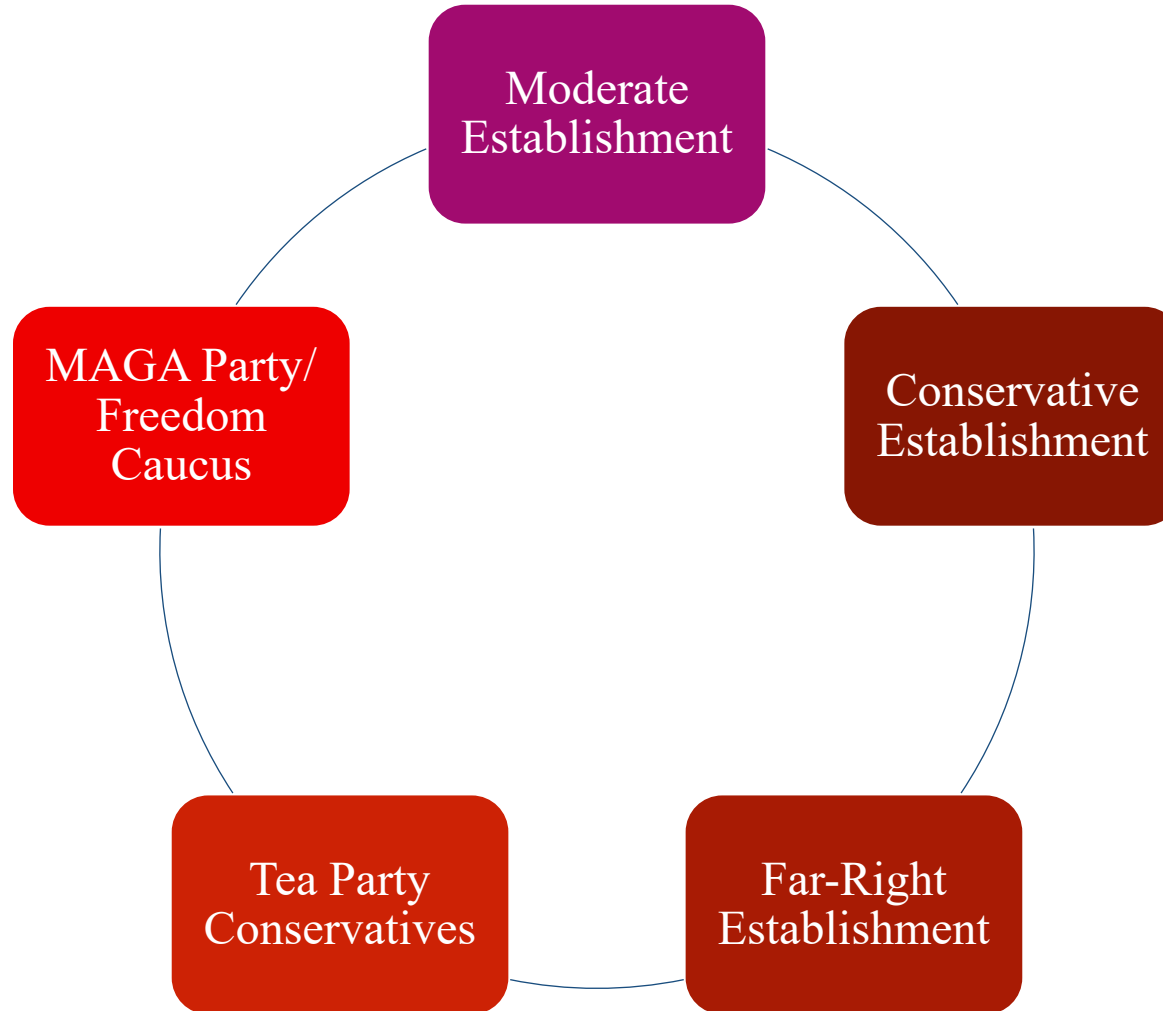
**Minority Leader
Hakeem Jeffries
(D-NY)**





Minority Leader Hakeem Jeffries (D-NY) hands the gavel to newly elected Speaker of the House Kevin McCarthy (R-CA) after 15 rounds of voting

Republican Party Factions



Debt Ceiling – 2023 Politicking

“

Offer a plan, not speeches.
[referring to MAGA/Freedom
Caucus proposal]

President Biden, April 2023

”



First All-Female Four Corners of Appropriations

House Appropriations

Chair Kay Granger (R-TX)



Ranking Member Rose DeLauro (D-CT)



Senate Appropriations

Chair Patty Murray (D-WA)



Ranking Member Susan Collins (R-ME)



Health Committee Leadership

Senate Health Committees

Finance Committee

- Chair Ron Wyden (D-OR)
- Ranking Member Mike Crapo (R-ID)

HELP Committee

- Chair Bernie Sanders (I-VT)
- Ranking Member Bill Cassidy, MD (R-LA)

Appropriations Committee

- Chair Patty Murray (D-WA)
- Ranking Susan Collins (R-ME)

House Health Committees

Ways & Means Committee

- Chair Jason Smith (R-MO)
- Ranking Member Richard Neal (D-MA)

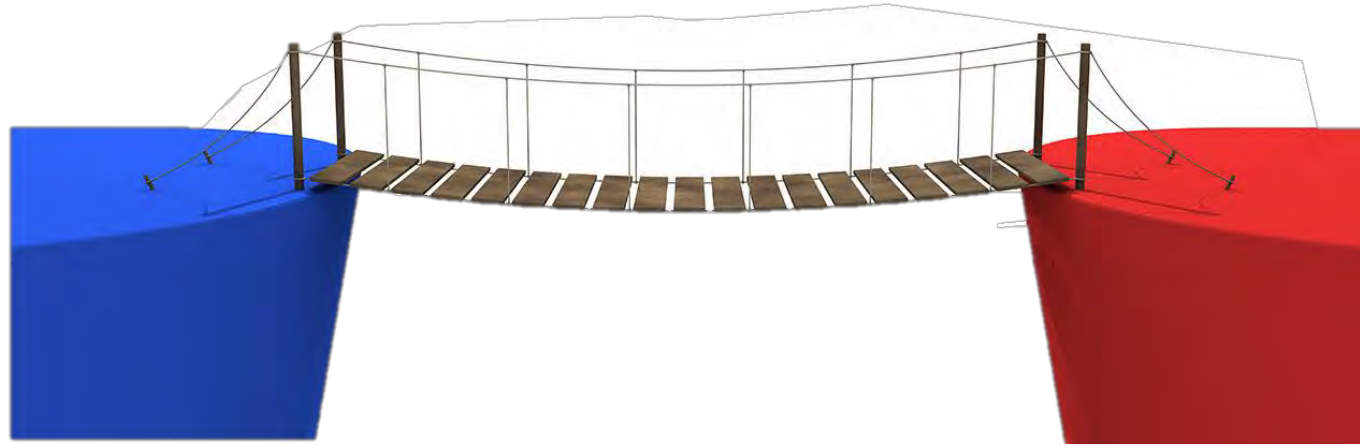
Energy & Commerce Committee

- Chair Cathy McMorris Rodgers (R-WA)
- Ranking Member Frank Pallone (D-NJ)

Appropriations Committee

- Chair Kay Granger (R-TX)
- Ranking Member Rosa DeLauro (D-CT)

Bipartisanship Needed: 118th Dynamics



- **Divided Government ...**

- Republicans must keep factions in line to prioritize and pass legislation in the House
 - Uptick in investigations and oversight of the Biden Administration
- Biden Administration likely to shift to nearly all executive action
- Presidential election legislative posturing to begin early
- Early committee activities to outline shared interests and opposition ... Case and Point: Where do Senators Bernie Sanders and Bill Cassidy, MD [Senate HELP] come to agreement ... Workforce??

Leading Health Care Priorities – Republicans vs Democrats

REPUBLICAN PRIORITIES

- Limiting entitlement spending
- Investigations into COVID origins and response
- Investigations into Medicaid spending during COVID
- Addressing workforce concerns

DEMOCRAT PRIORITIES

- Protecting entitlement spending
- Protections during the unwinding of the public health emergency (Medicaid-eligibility adjustments)
- Addressing health workforce needs/health care deserts with less costly providers



JULY 2023

MON	TUE	WED	THUR	FRI	SAT	SUN
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	
29	30	31				

Advancing AACAP Interests – Bipartisanship & Play to Political Interests

SUPPORT EXISTS:

- Bipartisan support for mental health reforms – (but lack of clarity on unified principles)
- Bipartisan support to address health care workforce concerns
- Bipartisan interest in demonstration programs to explore ways to achieve access to care and reduce health care costs

UPHILL BATTLES:

- Republican scrutiny over discretionary funding and risk of cuts, freezes at 2022 levels, and no new spending
- Republican concerns about mandates on companies (including insurance co's)
- Republican opposition to gender reassignment surgery and other LGBTQI policy opposition

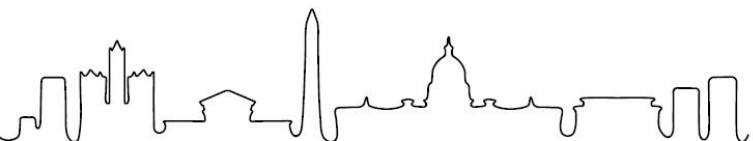
POWERS
POWERS PYLES SUTTER & VERVILLE PC
ATTORNEYS AT LAW

**Thank
You**

www.powerslaw.com

2023 AACAP Policy Priorities

- Access: Improve access to children's mental health care
- Workforce: Increase the child and adolescent psychiatry workforce
- Equity: Improve equity in access to children's mental health



Improve Access to Children's Behavioral Mental Health Care

State the Issue

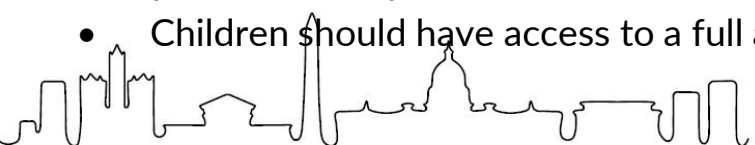
Children and their families do not have sufficient adequate access to high-quality specialty child and adolescent behavioral health care.

Define the Problem

- 13-20% of U.S. children have been diagnosed with a mental health disorder; only 15-25% of U.S. children with a psychiatric disorder receive specialty care.
- Over 80% of states and 90% of counties in the U.S. have a severe shortage of child and adolescent psychiatrists.
- Child and adolescent psychiatrists (CAPs) are physicians uniquely trained to identify and treat complex relationships between physical illness and mental and behavioral health disorders over the lifespan of a patient and across diverse care delivery settings.
- Psychiatrists typically receive lower in-network reimbursement than non-psychiatrist medical doctors for many of the same services.

Offer Solutions

- Public and private insurance programs should provide behavioral healthcare at parity with physical health care services
- Public and private insurance programs should adequately reimbursing child and adolescent psychiatrists to provide that care.
- Integrated care models and CAP consultation models facilitate timely and convenient access to behavioral health specialty care for children and youth who may need mental and behavioral health services.
- Children should have access to a full array of prevention, early intervention, and treatment options within all child-facing systems of care.



Improve Access to Children's Behavioral Mental Health Care

CONGRESSIONAL REQUEST: *Support integration of pediatric behavioral health care in all child-facing systems of care and parity for behavioral health services in Medicare Advantage, Medicare Part D, Medicaid, and CHIP.*

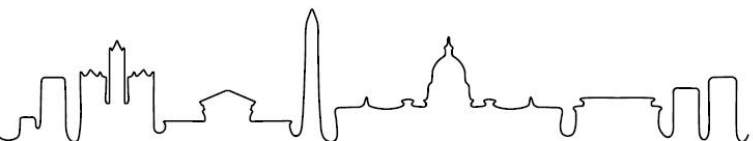
HOUSE: Support H.R. 2412, "Helping Kids Cope Act," introduced by Reps. Lisa Blunt Rochester (D-DE) and Brian Fitzpatrick (R-PA).

This legislation would:

- Integrate pediatric behavioral health care across a wide range of child-facing systems/settings of care; and
- Recruit and retain a diverse, evidence-informed pediatric mental health workforce.

SENATE: Support S. 923, "Better Mental Health Care for Americans Act," introduced by Sens. Michael Bennet (D-CO) and Ron Wyden (D-OR). This legislation would:

- Require parity for mental and behavioral health services in Medicare Advantage, Medicare Part D, and Medicaid;
- Encourage mental and behavioral health integration with physical care by increasing reimbursement rates for Medicare and Medicaid;
- Establish a demonstration project to increase access to integrated mental and behavioral health care for children across different setting, like schools; and
- Increase accountability and oversight of integrated mental and behavioral health care under Medicare, Medicaid, and private health insurance plans.



Increasing the Child and Adolescent Psychiatry Workforce

State the Issue

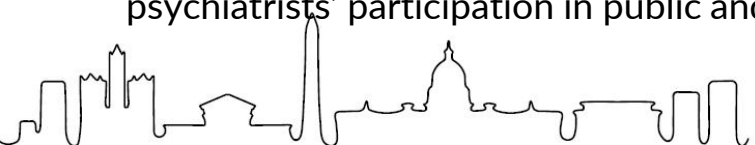
There are not enough child and adolescent psychiatrists to meet the growing demand for mental health subspecialty care for child and adolescents in the U.S.

Define the Problem

- There are 14 child and adolescent psychiatrists for every 100,000 children in the U.S.; estimated need is 47 child and adolescent psychiatrists for every 100,000 children in the U.S.
- 91% of U.S. counties have a severe shortage of child and adolescent psychiatrists.
- Child and adolescent psychiatrists complete four years of medical school, three years of residency in general psychiatry, and a two-year fellowship in child and adolescent psychiatry, often incurring up to \$300,000 in student loan debt.
- International medical graduates (IMGs) make up about 29% of all psychiatrists practicing in the United States.

Offer Solutions

- Student loan debt relief could encourage more medical students and psychiatry residents to pursue careers in child and adolescent psychiatry.
- Student loan debt relief could enable child and adolescent psychiatrists to practice in areas underserved by subspecialty physicians.
- IMGs can bolster the CAP workforce
- Reimbursement parity between child and adolescent psychiatrists and their non psychiatrist physician peers could increase child and adolescent psychiatrists' participation in public and private insurance networks.



Increasing the Child and Adolescent Psychiatry Workforce

CONGRESSIONAL REQUEST: *Support student loan repayment programs for pediatric mental health providers, including child and adolescent psychiatrists, and extend the Conrad 30 program to bolster the physician workforce with U.S.-trained international medical graduates.*

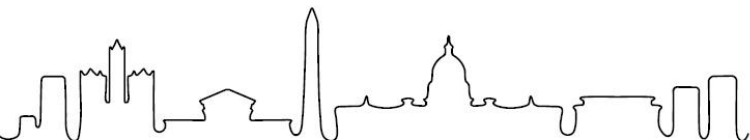
HOUSE: AACAP urges the House to introduce a companion bill to the Senate “Mental Health Professionals Workforce Shortage Loan Repayment Act of 2023.”

SENATE: Support S. 462, introduced by Sens. Tina Smith (D-MN), Lisa Murkowski (R-AK), and Maggie Hassan (D-NH), “Mental Health Professionals Workforce Shortage Loan Repayment Act of 2023.” This legislation would:

- Support an existing Health Resources and Services Administration (HRSA) student loan repayment program to repay up to \$250,000 in eligible student loan repayment for mental health professionals who work in mental health professional shortage areas.

SENATE: Support S. 665, introduced by Sens. Amy Klobuchar (D-MN), Susan Collins (R-ME), Jacky Rosen (D-NV), and Thom Tillis (R-NC), “Conrad State 30 and Physician Access Reauthorization Act.” This legislation would:

- Extend the Conrad 30 program for three years;
- Allow international doctors to remain in the U.S., if they work in federally designated shortage and underserved areas; and
- Increase state waiver allocations to 35 physicians from 30 per year with a path for states to gain additional waivers.



AACAP Workforce Map

Practicing Child and Adolescent Psychiatrists
State:
* Hover for Data Source
* Hover for Tips & Definitions

Total CAPs
10,597

Number of Children < 18
74,077,738

Number of CAPs/100k Children
14

Average CAP Age
52

State Map

Mostly Sufficient Supply (>=47) | High Shortage (18-46)* | Severe Shortage (1-17)* | No CAPs

County Map

Mostly Sufficient Supply (>=47) | High Shortage (18-46)* | Severe Shortage (1-17)* | No CAPs

Number of CAPs by Age Group

Breakdown by County

	Number of CAPs/100k Children	Number of Children < 18	Total CAPs
Abbeville County, SC	0	5,077	0
Acadia Parish, LA	0	16,352	0
Accomack County, VA	0	6,914	0
Ada County, ID	11	109,797	12
Adair County, IA	0	1,519	0
Adair County, KY	0	3,749	0
Adair County, MO	21	4,728	1
Adair County, OK	0	6,000	0
Adams County, CO	25	135,860	34
Adams County, IA	0	767	0
Adams County, ID	0	701	0
Adams County, IL	13	14,021	2
Adams County, IN	0	11,089	0
Adams County, MS	0	6,488	0



Improving Equity in Access to Child and Adolescent Psychiatry

State the Issue

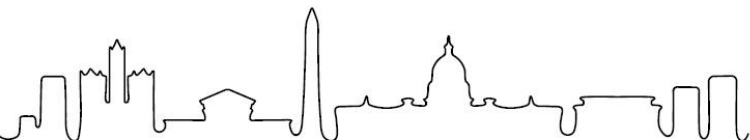
The current pediatric mental health care system does not serve the needs of racial and ethnic minority communities.

Define the Problem

- The COVID-19 pandemic amplified pre-existing mental health disparities in minority children and adolescents, including gaps in access to high quality mental health care.
- Emergency Department visits for pediatric mental health care have disproportionately increased among minority children.
- Minority youth are more likely to attempt suicide than their white peers and are less likely to receive adequate care for symptoms of anxiety, depression, and ADHD.
- Due to a long history of poor medical treatment, minority communities are less likely to trust the medical care system.
- Minority and rural communities are underrepresented in medicine, including in behavioral health care fields.

Offer Solutions

- Investments in the recruitment, training and broader distribution of a more diverse and representative physician workforce promotes a more diverse workforce.
- Investments in developing DEI core competencies in training programs for all behavioral health providers promotes a more culturally sensitive workforce.



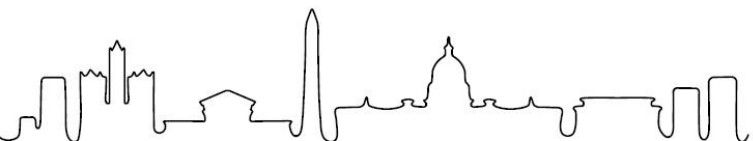
Improving Equity in Access to Child and Adolescent Psychiatry

CONGRESSIONAL REQUESTS: *Support research and training programs that address behavioral health disparities among racial and ethnic minority groups.*

HOUSE: Rep. Bonnie Watson Coleman (D-NJ) will be reintroducing the “Pursuing Equity in Mental Health Act” in May 2023. Please co-sponsor this bill. The legislation would:

- Improve the pipeline of culturally competent behavioral health providers by updating the Minority Fellowship Program to support the development of core competencies for addressing mental health disparities among racial and ethnic minority mental groups in training programs;
- Update the SAMHSA Promoting the Integration of Primary and Behavioral Health Care program to ensure special consideration is given to eligible entities serving a high proportion of racial and ethnic minority groups;
- Develop an outreach and education strategy to promote behavioral health and reduce stigma associated with behavioral health conditions among minority groups; and
- Authorize nearly \$900 million to support research to address and reduce mental health disparities among underserved and underrepresented youth.

SENATE: AACAP urges the Senate to introduce a companion bill to the updated House “Pursuing Equity in Mental Health Act.”



PREVIEW 2023

SCHEDULE



MOBILE TOOL



CHECK-IN



My responsibilities:

- ~~✗ Balance the Federal Budget.~~
- ~~✗ School them in the legislative process.~~
- ~~✗ Find a magic statistic that will immediately secure their support.~~
- ~~✗ Relay requests from family members, friends, and other organizations you belong to (as long as you're here).~~
- ~~✗ Shame or threaten them as a good way to build a relationship.~~
- ~~✗ Provide campaign messaging advice or feedback.~~

Your Capitol Hill To-Do List

Superhero

Human

Hook, Line, & Sinker:

3 parts of an effective legislative meeting

Hook

Introductions
(location, location, location)

Line

Story or Statistic
*(one personal story OR
one formal argument each)*

Sinker

Our Unified Request
*(clearly and consistently
stated)*

- Typical meeting length: 20 minutes
- Typical locations: offices, hallways, while walking
- Typical number of speakers: 3-5

DANGER! Never underestimate the power of staff.

WORKING TOGETHER

- Always come to town prepared to talk about what you do, who you help, and how you actively help contribute to your community.
- Prepare for each legislative meeting to be about 15 minutes .
- Your challenge is not to defend yourself, it is to establish relationship.
- Do not bring up other issues. It distracts from and dilutes our unified request.
- Follow-up is required for success. Establish an active communications link with staff by sending a Thank You email after the meeting.
- Be **FLEXIBLE, RESPECTFUL, PATIENT**, and **POLITE**. These characteristics pay dividends in a lengthy and complex process.

DANGER! Never underestimate the power of staff.

**** NOT an App ****

SOAPBOX MOBILE TOOL[®]

www.sboxmobile.com

TODAY . . .

Meeting Updates



Meeting Feedback



Thank You EMail



Zoom Links



The screenshot shows the Soapbox Consulting Feedback Form. At the top, the Soapbox Consulting logo is displayed. Below it is a header with a small image of a person holding a flag and the text "Feedback Form". A navigation bar contains links for HOME, SCHEDULE, and FEEDBACK. The main content area is titled "MEETING: 2:30 PM - Sen. Roy Blunt (MO-S-R) [Ldr]". It contains several text input fields with the following prompts: "With whom did you conference call?(Member/Staff/or both) If staffer, please give name", "What issues did you cover in the meeting?", "Did the Member (or staff) ask any questions? (Please note any questions to which HRC should respond)", "Were there any commitments made by you or the Congressional office? (Please note who made them & any dates for response)", and "What was the tone of the meeting? Were there any particular problems, information needs or advice that would help move this Member on the issues or help in future lobbying?". At the bottom, there is a file upload section for a meeting photo and a green "SUBMIT" button.

Breakout Rooms

- Please choose the room with your state
- Join the room, meet colleagues, and your state captain
- Come up with a 1-2 minute elevator “pitch” on “who is a CAP” and “what is AACAP” that you can use for Leg Con 2023
- Identify who will speak during the meetings
- Identify patient stories or practice stories you will bring to DC and share with your representatives
- Feel free to jump off at any time and we look forward to seeing you on May 8-9 for the 2023 AACAP Legislative Conference!

