

*Massachusetts  
Association of  
Behavioral  
Health Systems*

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**Public Comment to the Health Policy Commission  
Re: Proposed Accountable Care Organization (ACO) Certification Standards  
Submitted by: David Matteodo, Executive Director  
Massachusetts Association of Behavioral Health Systems  
January 29, 2016**

**Attn: Catherine Harrison, Health Policy Commission**

On behalf of the Massachusetts Association of Behavioral Health Systems (MABHS), I appreciate the opportunity to offer these comments to the Health Policy Commission on the proposed ACO Certification Standards. The MABHS represents 44 inpatient mental health and substance abuse facilities in the Commonwealth, which collectively admit over 50,000 patients annually. Our hospitals provide the overwhelming majority of inpatient hospital mental health and substance abuse services in the Commonwealth. I also represent MABHS on the HPC Advisory Committee.

Overall, the MABHS is very pleased that the proposed Certification Standards have a strong emphasis on incorporating behavioral health, including both addiction and mental health as mandatory criteria for any ACO in Massachusetts. When Chapter 224 was being debated in the Legislature, MABHS strongly advocated for language which would direct that Behavioral Health be included in any ACO models. Fortunately such language was included in Chapter 224 and we are pleased that the Health Policy Commission has recognized it in these Certification Standards. For too long Behavioral Health has been treated separately by the health care system and this has resulted in numerous shortfalls that have plagued patients, providers, and payers. Hopefully, as we move towards new delivery models, there will be continued attention to full integration of Behavioral Health. There must be continued recognition and leadership from the HPC in the inclusion of Behavioral Health as you finalize the Certification Standards.

As the HPC moves forward we would suggest four areas for your consideration:

- ACOs should not duplicate the current Behavioral Health provider system but rather try to use as much as possible the current delivery system. For example, before any new mental health or substance abuse units are developed, the ACOs should be directed to utilize the existing system to meet demands. Only if the delivery system is not able to meet patient demands should the ACO develop new units.
- Patient Protection: As the HPC knows, Behavioral Health conditions are by far the most appealed conditions that come before the Office of Patient Protection. We were pleased that the Mandatory Criteria require compliance with OPPs processes. It is vital that these protections remain in place as you finalize the Criteria.

- The requirement to participate in MassHealth APMs should be reconsidered by HPC. To our knowledge these models have not been developed or approved yet by the Federal Government. Until there is more information, it appears premature to include this requirement.
  
- Administrative simplification is imperative. HPC should revisit all the reporting and documentation requirements in the Criteria to determine if they are absolutely necessary. There already are so many reporting requirements health providers and payers have to make to the government that HPC should ensure a rigorous review of all the suggested reporting requirements before the Criteria are finalized.

In summary, we believe the HPCs strong emphasis on the incorporation of Behavioral Health is an important step forward in the development of ACO models. Going forward, we urge the HPC to continue this emphasis in the final Criteria.

Thank you for the opportunity to offer these comments. Please do not hesitate to contact me should you have any questions.