



Policy Brief

September 17, 2021



White House Mandates Vaccination for Health Care Workforce

President Biden has [announced](#) that Medicare and Medicaid-participating health care facilities will be required to vaccinate employees against COVID-19, with allowances for exemptions based on disabilities or religious objections. As communities continue to combat high infection rates, the Administration hopes that the move will spur the 17 million health care workers across the nation to seek vaccination. While supporters anticipate that the requirement will protect patients from becoming infected when presenting at health care facilities, opponents fear mandating vaccination will only erode an [already-dwindling](#) health care workforce. Keep reading for more on the mandate, who it will impact, and what to expect in the upcoming weeks.

Who will be impacted by the Administration's announcement?

Hospitals and other health care facilities that receive Medicare or Medicaid reimbursement will fall under the announced mandate. Despite employers already encouraging vaccination against COVID-19, particularly for staff with direct patient contact, [about half](#) of all health care workers still remain unvaccinated—something the new mandate hopes to change. In addition, the Occupational Safety and Health Administration [plans to issue](#) an accompanying emergency rule to require that employers with more than 100 employees either have workers vaccinated or test them weekly for COVID-19.

How are state and local policymakers responding?

Mandated vaccination is actually not a new concept; many states—[like Mississippi](#)—already have strong requirements for vaccination against communicable diseases. Historically, using public

policy to protect public health has been [widely accepted](#) on both sides of the aisle, however, the politicized nature of the COVID-19 pandemic has made the idea of mandates more polarizing. Dr. Ashish Jha, Dean of Brown University's School of Public Health, [reminds](#) the health care community that, "Republicans care about getting beyond this pandemic every bit as much as Democrats do," but also predicts more political opposition to mandated vaccination. Indeed, many governors in Republican-led states have already promised to file lawsuits against the Biden Administration—as has the [Republican National Committee](#).

What should health systems expect?

The Centers for Medicare and Medicaid Services (CMS) plans to issue a regulation in the upcoming weeks implementing the new requirement. The forthcoming interim final rule is expected in mid-to-late October and will become effective immediately. This means that health providers will know the final details of the policy in October, which will include a timeline for full compliance with the requirements, and not that all employees must be vaccinated immediately. CMS urges health systems to begin the process of proactively vaccinating employees prior to the rule's release.



Telehealth Rises to Meet Behavioral Health Needs

Last Friday was [World Suicide Prevention Day](#), a day observed by the health care community to raise awareness, promote healthy behaviors and help those suffering from mental health issues. Suicide rates have seen a 33% [increase](#) since 1990, making it the 10th leading cause of death in the U.S. The COVID-19 pandemic has only exacerbated the problem, with hospitals across the country reporting a 24% increase in mental health [emergency visits](#) by children ages 5-11 years old and a 31% increase for students ages 12-17 between March and May 2020. As the U.S. comes to terms with the mental health crisis, it is vital to be aware of key legislation spearheading behavioral health reform.

Why Telehealth Works for Behavioral Health

The COVID-19 pandemic helped to usher in the widespread adoption of telehealth. While telehealth was initially a temporary tool being used to prevent the spread of COVID-19, it might have found a permanent home in delivering behavioral health care services. Findings show that telehealth services were highly utilized for behavioral health during the first months of the Public Health Emergency. Advantages to using telehealth to meet behavioral health care needs [include](#):

- **Helping to reduce barriers caused by the negative stigma surrounding behavioral health.** The shame associated with acknowledging mental illness can deter individuals from receiving help. Telehealth offers an effective alternative to in-office visits and helps reduce anxiety.
- **Alleviating the shortage-of-care dilemma.** Approximately 111 million Americans live in areas [reported](#) to have mental health professional shortages. Roughly half of all counties in the U.S. do not have access to a single psychiatrist.

While delivering care via telehealth has had many benefits for patients, the services offered by telehealth cannot be utilized if mechanisms are not in place for funding and reimbursement.

The SUPPORT Act

Before 2018, federal Medicaid law did not dictate any specification for the delivery or reimbursement of telehealth services. This changed with the [SUPPORT Act](#), which allowed for limited telehealth services and loosened reimbursement restrictions for treating individuals with Substance Use Disorders (SUD) and other mental health needs. While the SUPPORT Act allowed patients, for the first time, to receive SUD telehealth services from their home, it still kept many of Medicare's geographic restrictions.

The CARES Act

The Public Health Emergency (PHE) brought about an emergency declaration [blanket waiver](#) for health care providers that allowed for the use of interactive telecommunications systems to furnish telehealth services. The Consolidated Appropriations Act [extended](#) and created several flexibilities for telehealth. Under the law, individuals under Medicare will be able to utilize telehealth for purposes of diagnosis, treatment or evaluation of mental health disorders without the geographic restrictions. The rule will become permanent after the PHE.



COVID-19's Impact on the Current Job Landscape

Despite a record-number of job openings, millions of Americans remain [unemployed](#) throughout the COVID-19 pandemic. This is largely due to a mismatch in the economy; workers do not want to return to the industries with the largest job openings, such as leisure, hospitality and retail, instead seeking better working conditions and career paths. The federal government rolled out additional unemployment benefits as part of COVID-19 relief measures. This extra money has kept workers afloat, preventing food insecurity from growing over the pandemic and very likely giving workers more of an ability to choose where they work. The job landscape may soon change, as federal unemployment benefits [dropped](#) this past week by more than \$300 a week.

State of Unemployment

As income is the largest [predictor](#) of health outcomes, employment is an important factor for ensuring the health of a community. To protect the public as it deals with [layoff rates](#) not seen since the Great Depression, the federal government decided to expand unemployment benefits during the COVID-19 pandemic. This initiative has seen measures of success, such as [preventing](#) food insecurity and slowing the growth of poverty.

Job Transformation from COVID-19

With the economy slowly reopening, more than 10 million jobs have become available, yet [8.5 million people](#) are still actively seeking employment. People are also resigning at a 13% higher rate compared to pre-pandemic levels. Workers are more likely to choose jobs with better career paths and are [demanding](#) better working conditions, such as more flexibility, remote work and safer COVID-19 conditions. Some people are choosing not to return to work entirely, instead retiring early.

Filling the Gap

Whatever the reason, workers' resistance to fill current job openings may weaken as unemployment benefits are reduced. Alongside the reduction of federal unemployment benefits, many [states](#) have already scaled back their COVID-19 relief to jobless workers. Companies have already been taking measures to attract employees by [raising](#) wages and [increasing](#) benefits. Some sectors, such as [health care](#), have been able to get immigration visas prioritized to help find nurses overseas.

New CMS Proposed Rules Related to the No Surprises Act

This week, CMS released proposed rules implementing requirements related to the No Surprises Act. The rules are tasked with implementing provisions related to enforcement, air ambulance and transparency. The rules proposed a process for investigating complaints of violations of patient protections, including monetary penalties against both providers and issues.

[AHA Special Bulletin](#) | [CMS Fact Sheet](#) | [“No Surprises Act” FAQ](#)

Texas Passes “Heartbeat Bill”

Texas has signed [new legislation](#) into law that bars access to abortion services after a fetal heartbeat is detected, which often occurs as early as six weeks into a pregnancy. The signing of this bill has opened a new frontier in the discussion over reproductive rights, as the legislation could be used by other states as a road map to tighten control over access to abortion services. While the Supreme Court [declined](#) to stop Texas’ law, the majority of Justices said the decision is not based on any conclusion about its constitutionality and in no way limits the law being challenged in the future. The U.S. Department of Justice has filed a lawsuit stating the Act “injures the United States by depriving women in Texas of their constitutional rights.”

Updates to COVID-19 Regulations

AHPA continues to follow new COVID-19 regulations, guidance and other government actions. The updates below are the latest guidance and other developments since September 6th to help mitigate the impacts of COVID-19.

HRSA Announces New COVID-19 Relief Funding for Providers and Reporting Grace Period

HRSA [announced](#) \$25.5 billion in new funding that will be made available to health care providers to reimburse health care related expenses and revenue losses due to COVID-19. HRSA will make \$17 billion available through the Provider Relief Fund (PRF) and \$8.5 billion available to providers that serve rural patients through American Rescue Plan (ARP) funds. Providers will be able to apply for new funding starting September 29th.

Biden Administration Announces \$3 Billion contribution to Coronavirus Supply Chain

The Biden Administration is [committing](#) almost \$3 billion to the coronavirus vaccine supply chain as the White House aims to expand U.S. manufacturing of the doses.

HHS Extends PREP Act to Pharmacists Administering COVID-19 Therapies

HHS [amended](#) the Public Readiness and Emergency Preparedness (PREP) Act declaration to provide liability protection to licensed pharmacists, pharmacy technicians, and pharmacy interns to expand the number of providers who can administer COVID-19 therapeutics.



AHPA Resources

Join Us Today! AHPA will be hosting a webinar today, September 17th, on the FY 2022 IPPS final rule.

AHPA Webinar on the IPPS FY 2022 Final Rule

Friday, September 17, 2021

1:00PM – 2:00PM EDT | 10:00 AM – 11:00AM PDT

[Request a Calendar Invitation](#)

Issue Brief: [Housing, Health and Health Care](#)

LLUH Institute for Health Policy and Leadership

Regulatory Resources

Below is a list of the recent regulatory work that AHPA has conducted.

- OSHA ETS [AHPA Comment](#)
- Surprise Billing [Regulatory Summary](#) | [AHPA Comment](#) | [Comment Summaries](#)
- IPPS [Regulatory Summary](#) | [AHPA Comment](#) | [Comment Summaries](#)
- PFS [Regulatory Summary](#) | [AHPA Comment](#) | [Comment Summaries](#)

Missed an AHPA webinar lately? No problem!

Visit AHPA's [YouTube channel](#), where members can stream webinars on the latest health care regulations at their convenience.

- [Webinar: Highlights from the Latest IPPS Proposed Rule \(Video\)](#)
- [Webinar: Highlights from the OPFS and PFS Proposed Rules \(Video\)](#)

WHAT WE'RE READING...

[Special Enrollment for ACA Health Plans Attracts Nearly 3 Million Consumers](#) – Washington Post

[Advancing Maternal Health Equity in Next Reconciliation Package](#) – The Century Foundation

[Gov. Newsom Keeps His Seat as a Majority of California Voters Reject Recall](#) – NPR

[Health Equity and Value-Based Payment Systems: Moving Beyond Social Risk Adjustment](#) – Health Affairs

[HHS Secretary Becerra Remarks at White House's Newly Formed Competition Council](#) – White House