

## CMS Proposes Updated Hospital Price Transparency Requirements and New Behavioral Health Program in 2024 Outpatient Rule

On July 14, the Centers for Medicare & Medicaid Services (CMS) released its proposed 2024 Outpatient Perspective Payment System (OPPS) Rule with an overall 2.8% payment increase.

Among the most significant proposals in the rule are changes to the price transparency rule requirements for hospitals and updates to Medicare's coverage of behavioral health services.



In its proposal to update price transparency requirements, CMS says it is seeking more uniformity in how hospitals post machine-readable files. It proposes requiring hospitals to use one of several templates in posting such files as well as requiring them to encode all applicable information in a manner CMS specifies. Hospitals would be required to attest to the completeness and accuracy of these files.

The agency also would beef up its oversight and enforcement process in line with comments it had made in front of congressional committees earlier in the year. This includes how hospital websites would be required to display public-facing information as well as how CMS would get in contact with hospital and health system leadership to make them aware of warnings, violations, and actions taken against hospitals. Lastly, CMS is seeking comments on how to better align hospital price transparency requirements with health insurer Transparency in Coverage requirements.

CMS is also proposing a new behavioral health program as a Medicare benefit that it says is intended to increase access to behavioral health. This Intensive Outpatient Program (IOP) could be furnished in a hospital outpatient department, community mental health center, federally qualified health center or rural health clinic. Eligible patients would need to be determined by a physician as needing a minimum of nine hours of treatment per week.

Separate from this IOP, CMS also proposes other Medicare behavioral health updates, including:

- A new payment code for remote group psychotherapy
- Delaying the in-person visit requirement for remote outpatient mental health services until the end of 2024
- Expanding and revising the payment structure for Medicare's Partial Hospitalization Program Services
- Updating the Conditions of Participation for Community Mental Health Centers

WHA will continue analyzing the [nearly 1,000-page rule](#) in anticipation of the Sept. 11 comment deadline. Contact WHA Vice President of Federal and State Relations [Jon Hoelter](#) with questions.

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