This week’s highlights include:

- Mobilizing for The Equality Act Vote
- Medical Military Personnel Letter
- APA Achieves Major Wins in the Fiscal Year 2020 House Labor-HHS-Education Funding Bill
- APA Takes Bipartisan Approach to Preserve the Public Service Loan Forgiveness Program
- APA Advances Health Disparities and Workforce Priorities with New Members
- APA Comments to FDA on Youth Tobacco Cessation
- Pain Management Best Practices Inter-Agency Task Force Finalizes Report

Equality Act

- Preparing for the Equality Act to come to the House floor next week, APA advocacy staff met with the House LGBT Equality Caucus to review advocacy strategy. As a result of that meeting, APA was invited to join the “war room” as the bill is debated next week in order to contribute scientific messaging to combat unfriendly amendments. This is a big coup in the policy arena to be in the “room where it happens.” On Thursday, May 9th, APA staff hosted a virtual town hall meeting for APA members to hear how they could join us in support passage of the Equality Act. Speakers provided an overview of the bill’s provisions, explained why psychology is relevant, reviewed APA’s advocacy strategy, and provided practical tips for contacting Congress before next week’s vote in the House. The Equality Act would add sexual orientation and gender identity as protected categories to federal civil rights laws. An action alert for the full APA membership is being launched on Monday to support the passage of this critical civil rights legislation.

APA Spurs Dear Colleague Letter on Military Medical Personnel Issue

- Learning that DoD is quietly planning on eliminating over 17,000 billets for uniformed medical personnel on October 1, 2019, including military psychologists, APA sought Congressional help to interrupt this decision. The cut to military medical personnel staffing could have a dramatic impact on the wellbeing of military personnel and their families, particularly in remote and medically underserved areas. This week we were successful in getting a bipartisan “Dear Colleague letter” circulated in the House, spearheaded by military veteran Reps. Tulsi Gabbard (D-HI) and Brian Mast (R-FL). Gabbard and Mast are seeking co-signers on a letter, drafted
largely by APA staff and our Division 19 colleagues, demanding answers from the Vice Admiral in charge of the Defense Health Agency about the proposed elimination.

**APA Achieves Major Wins in the Fiscal Year 2020 House Labor-HHS-Education Funding Bill**

On Wednesday, the House Appropriations Committee, approved the Fiscal Year 2020 Appropriations bill for the Departments of Labor, Health and Human Services and Education. APA worked closely with House Subcommittee Chair Rosa DeLauro (D-CT) in advancing many of our priorities. APA sent her a [thank you letter](#) today expressing our appreciation for her leadership over this important funding bill. As reported last week, APA advocacy staff achieved increases for many of APA’s priority programs across a broad science, education and public health areas. A summary of the FY 2020 Labor-HHS bill can be found [here](#). The text of the bill is [here](#), and the report is [here](#).

Here are just a few of the highlights:

- **After successful advocacy from APA and members visits with key appropriators, APA staff secured $18 million for the Graduate Psychology Education Program, the primary federal program that focuses solely on interprofessional doctoral training in health service psychology, as well as a $10 million increase for the Behavioral Health Workforce Education and Training Program within the Health Resources and Services Administration (HRSA). To address the substance use disorder epidemic, APA advocated for health service psychology programs be eligible for a new $10 million demonstration program in mental health and substance use disorder workforce training and secured $25 million in new funds for a loan repayment program to support the substance use disorder workforce.**
- **APA leads a Minority Fellowship Coalition to increase funding for the number of health service psychologists and other health professionals to provide culturally-competent integrated mental and behavioral health services. This funding is key to reducing health disparities and improving health care outcomes for high-need, underserved populations in rural and urban communities. As a result of APA staff’s work, the House Appropriations Committee included a $2 million increase from last year’s funding. Should the Senate and President approve such funding, the program would rise to the $15.2 million mark. In July, APA will host a Hill day to continue to pursue funding and explain the importance of this program.**
- **The House bill includes $41.1 billion for the National Institutes of Health, a $2 billion increase, for which APA advocated in coalitions and in individual meetings. The report accompanying the bill encourages NIH to provide an increase for the NIH Office of Behavioral and Social Sciences Research commensurate with the increases provided to the institutes and centers. OBSSR’s budget, along with those of other offices in the Office of the Director, has not kept pace with those of the institutes.**
- **$50 million was included in funding for firearm injury and mortality prevention research at the Centers for Disease Control and Prevention and the National Institutes of Health. The Committee also increased support for the National Violent Death Reporting System to enhance efforts to characterize all manner of violent deaths to help inform and assess prevention efforts.**
APA Takes Bipartisan Approach to Preserve the Public Service Loan Forgiveness Program

APA Advocacy staff, working with PSLF Coalition partners, spent the week targeting Freshmen House Republicans to educate these new members of Congress about the importance of the Public Service Loan Forgiveness (PSLF) Programs. APA Advocacy staff also presented at the PSLF Coalition’s Congressional staff training on Managing Educational Loan Debt. This program, entitled, “How PSLF Works for You” was developed to help Congressional staff navigate the PSLF for themselves and to better assist their constituents who have questions about the PSLF process. The bipartisan PSLF Caucus intends to host additional workshops for congressional staff.

APA Advances Health Disparities and Workforce Priorities with New Members

APA advocacy staff participated in a breakfast meeting hosted by the Black Women’s Health Imperative with Representatives Robin Kelly (D-IL) and Freshmen Members Lucy McBeth (D-GA) and Lauren Underwood (D-IL). The broader program focused on reducing health disparities, particularly for maternal mortality. APA advocacy staff spoke with each of these members about a range of APA’s priorities, including reducing mental health disparities by diversifying the workforce, supporting equitable reimbursement for mental health providers and addressing gun violence as a public health issue. As Representatives McBath and Underwood are now serving on the House Education and Labor Committee, APA staff further raised awareness of the need to diversify the mental health workforce through support of graduate study and federal financial aid assistance, including loan forgiveness programs.

APA Comments to FDA on Youth Tobacco Cessation

APA worked with the College on Problems of Drug Dependence to prepare comments in advance of an FDA Workshop entitled “Youth Tobacco Cessation: Science and Treatment Strategies” that will be held May 15th. The comments focused on identifying ways to maintain abstinence; achieve a better understanding of the pattern of youth use of other tobacco products, including electronic cigarettes, considering the psychosocial factors and pharmacological factors and product characteristics that facilitate their uptake and continued use; achieve a better understanding of what motivates a quit attempt in youth and how to stimulate this motivation; develop innovative and appealing treatments that involve both novel psychosocial and pharmacological interventions; and establish the best means of communicating the benefits of treatment(s) that don’t undermine prevention programs.

Pain Management Best Practices Inter-Agency Task Force Finalizes Report

The Pain Management Best Practices Inter-Agency Task Force, led by the U.S. Department of Health and Human Services (HHS) in coordination with the Department of Veterans Affairs (VA) and the Department of Defense (DoD), released its final draft report on pain management best practices this week. After submitting comments in March to its draft report during the 90-day public comment period, APA and the Society for Health Psychology (Division 38) strengthened support in the report for a multidisciplinary approach that recognizes the biopsychosocial nature of pain and the need to incentivize and expand access to behavioral health approaches to pain management. In its comments, APA and Division 38 offered several recommendations for ways to improve access to multidisciplinary pain management. Some of these recommendations made it into the final report, including:
That CMS and private payers should investigate and implement innovative payment models that recognize and reimburse holistic, integrated, multimodal pain management, including behavioral health – including a recommendation that "a CPT code should be developed for pain care coordination as well as team and group conferences to enable multidisciplinary care" (Recommendation 4a under 3.4); and

That in accounting for patient variability in experiences of acute pain, explicit reference was made to psychosocial characteristics in addition to comorbidities, severity of conditions, surgical variability, geographic considerations, and community/hospital resources that were outlined in the original draft.

As noted in its comments, APA commends the inclusion of sections in the final report devoted to both behavioral approaches to pain management and the needs of particularly disadvantaged and neglected populations, including children, adolescents, aging adults, and veterans and service members. However, there still exists the need to cement psychological interventions as standard operating procedure for pain patients throughout health care systems, as opposed to having those interventions provided primarily through alternative treatment delivery. As such, APA continues to advocate for the inclusion and emphasis of psychological and other non-pharmacological interventions in the government’s formulation of pain management best practices.