

113TH CONGRESS
2D SESSION

H. R. 4016

To amend title XIX of the Social Security Act to provide a standard definition of therapeutic foster care services in Medicaid.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 6, 2014

Ms. DELAURO (for herself, Mr. COLE, Ms. BASS, and Mr. BUTTERFIELD) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend title XIX of the Social Security Act to provide a standard definition of therapeutic foster care services in Medicaid.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Quality Foster Care
5 Services Act of 2014”.

6 **SEC. 2. INCLUSION OF THERAPEUTIC FOSTER CARE AS**
7 **MEDICAL ASSISTANCE.**

8 (a) IN GENERAL.—Section 1905 of the Social Secu-
9 rity Act (42 U.S.C. 1396d) is amended—

1 (1) in subsection (a)—

2 (A) in paragraph (28), by striking “and”
3 at the end;

4 (B) by redesignating paragraph (29) as
5 paragraph (30); and

6 (C) by inserting after paragraph (28) the
7 following new paragraph:

8 “(29) therapeutic foster care services described
9 in subsection (ee); and”; and

10 (2) by adding at the end the following new sub-
11 section:

12 “(ee)(1) For purposes of subsection (a)(29), subject
13 to subparagraph (C), therapeutic foster care services de-
14 scribed in this subsection are services provided for children
15 who have not attained age 21, and who, as a result of
16 mental illness, other emotional or behavioral disorders,
17 medically fragile conditions, or developmental disabilities,
18 need the level of care provided in an institution (including
19 a psychiatric residential treatment facility) or nursing fa-
20 cility the cost of which could be reimbursed under the
21 State plan but who can be cared for or maintained in a
22 community placement, through a qualified therapeutic fos-
23 ter care program described in paragraph (2).

24 “(2) A qualified therapeutic foster care program de-
25 scribed in this paragraph is a program that—

1 “(A) is licensed by the State and accredited by
2 the Joint Commission on Accreditation of Health-
3 care Organizations, the Commission on Accreditation
4 of Rehabilitation Facilities, the Council on Accredi-
5 tation, or by another equivalent accreditation agency
6 (or agencies) as the Secretary may recognize;

7 “(B) provides structured daily activities, includ-
8 ing the development, improvement, monitoring, and
9 reinforcing of age-appropriate social, communication
10 and behavioral skills, trauma-informed and gender-
11 responsive services, crisis intervention and crisis sup-
12 port services, medication monitoring, counseling, and
13 case management, and may furnish other intensive
14 community services; and

15 “(C) provides foster care parents with special-
16 ized training and consultation in the management of
17 children with mental illness, trauma, other emotional
18 or behavioral disorders, medically fragile conditions,
19 or developmental disabilities, and specific additional
20 training on the needs of each child provided such
21 services.

22 “(3) In making coverage determinations under para-
23 graph (1), a State may employ medical necessity criteria
24 that are similar to the medical necessity criteria applied

1 to coverage determinations for other services and supports
2 under this title.

3 “(4) The services described in this subsection do not
4 include the training referred to in paragraph (2)(C).”.

5 (b) EFFECTIVE DATE.—The amendments made by
6 subsection (a) shall apply to calendar quarters beginning
7 on or after the date of enactment of this Act.

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