

115TH CONGRESS  
1ST SESSION

# H. R. 2047

To amend title XIX of the Social Security Act to provide for behavioral health infrastructure improvements under the Medicaid program.

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 6, 2017

Mr. BEN RAY LUJÁN of New Mexico (for himself, Mr. KENNEDY, Ms. CLARKE of New York, and Mrs. NAPOLITANO) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend title XIX of the Social Security Act to provide for behavioral health infrastructure improvements under the Medicaid program.

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 “Behavioral Health In-  
5 frastructure Improvement Act”.

6 **SEC. 2. BEHAVIORAL HEALTH INFRASTRUCTURE IMPROVE-**  
7 **MENTS.**

8 (a) ENHANCED FMAP FOR INFRASTRUCTURE IM-  
9 PROVEMENTS.—

1           (1) IN GENERAL.—Section 1903(a)(3) of the  
2 Social Security Act (42 U.S.C. 1396b(a)(3)) is  
3 amended by adding at the end the following:

4           “(I) for calendar quarters beginning during the  
5 5-year period beginning on or after the date of the  
6 enactment of this subparagraph, 90 percent of the  
7 sums expended during the quarter as are attrib-  
8 utable to the design, development, implementation,  
9 or improvement of infrastructure and systems car-  
10 ried out for purposes of, with respect to behavioral  
11 health services and substance abuse treatment serv-  
12 ices, providing for enhanced data collection and re-  
13 porting to the Secretary and tracking and ensuring  
14 access to such services by individuals eligible to re-  
15 ceive medical assistance under the State plan under  
16 this title (or under a waiver of the plan); plus”.

17           (2) REPORTS.—For each year during which  
18 subparagraph (I) of section 1903(a)(3) of the Social  
19 Security Act (42 U.S.C. 1396b(a)(3)), as added by  
20 paragraph (1), applies, the Secretary of Health and  
21 Human Services shall submit to Congress a report  
22 on the affects of such subparagraph, including best  
23 practices for States receiving reimbursement for ex-  
24 penditures under such subparagraph and the effec-  
25 tiveness of such expenditures made by such States.

1 (b) BEHAVIORAL HEALTH INFORMATION FOR MED-  
2 ICAID BENEFICIARIES.—Title XIX of the Social Security  
3 Act (42 U.S.C. 1396 et seq.) is amended by adding at  
4 the end the following:

5 **“SEC. 1947. BEHAVIORAL HEALTH INFORMATION FOR MED-**  
6 **ICAID BENEFICIARIES.**

7 “(a) IN GENERAL.—The Secretary shall award  
8 grants to States to enable such States to establish, ex-  
9 pand, or provide support for—

10 “(1) offices of behavioral health assistance that  
11 provide assistance to individuals eligible to receive  
12 medical assistance under this title; or

13 “(2) behavioral health ombudsman programs  
14 that are independent of any State agency,

15 in a manner that ensures coordination with other relevant  
16 programs of the State for assisting individuals receiving  
17 medical assistance under this title who have a broad range  
18 of health concerns, including relating to behavioral health  
19 and substance abuse treatment.

20 “(b) ELIGIBILITY.—

21 “(1) IN GENERAL.—To be eligible to receive a  
22 grant, a State shall designate an independent office  
23 of behavioral health assistance described in para-  
24 graph (1) of subsection (a), or an ombudsman de-  
25 scribed in paragraph (2) of such subsection, that—

1           “(A) has specialized knowledge of behav-  
2           ioral health and substance abuse and experience  
3           resolving inquiries and complaints described in  
4           subparagraph (B); and

5           “(B) directly or in coordination with State  
6           Medicaid agencies, departments of insurance,  
7           and consumer assistance organizations, receives  
8           and responds to inquiries and complaints con-  
9           cerning access to behavioral health services and  
10          substance abuse treatment services.

11          “(2) CRITERIA.—A State that receives a grant  
12          under this section shall comply with criteria estab-  
13          lished by the Secretary for carrying out activities  
14          under such grant.

15          “(3) ADDITIONAL REQUIREMENT.—A State  
16          that receives a grant under this section, with respect  
17          to an office described in subsection (a)(1) or a be-  
18          havioral health ombudsman program described in  
19          subsection (a)(2), shall coordinate such office or pro-  
20          gram with other programs of such State that serve  
21          individuals receiving medical assistance under this  
22          title, such as a consumer assistance program, long-  
23          term care ombudsman program, aging and disability  
24          resource center, a Medicaid managed care ombuds-

1 man program, or a mental health ombudsman pro-  
2 gram.

3 “(4) CLARIFICATION.—A grant provided to a  
4 State under subsection (a) may be used by the State  
5 to expand a program of such State that services in-  
6 dividuals receiving medical assistance, such as a pro-  
7 gram described in paragraph (3), to include an office  
8 or program described in subsection (a) or a division  
9 that would provide for the functions that such an of-  
10 fice or program would otherwise provide.

11 “(c) DUTIES.—The office of behavioral health assist-  
12 ance described in paragraph (1) of subsection (a), or an  
13 ombudsman referred to in paragraph (2) of such sub-  
14 section shall—

15 “(1) collect, track, and quantify problems and  
16 inquiries encountered by individuals eligible for med-  
17 ical assistance under this title with respect to access  
18 to behavioral health services and substance abuse  
19 treatment services;

20 “(2) educate such individuals on the rights and  
21 responsibilities of such individuals with respect to  
22 such access and assist such individuals in the en-  
23 forcement of such rights with respects to such ac-  
24 cess; and

1           “(3) assist such individuals with accessing be-  
2           havioral health services and substance abuse treat-  
3           ment services by providing information, referral,  
4           care coordination, and other assistance.

5           “(d) DATA COLLECTION.—As a condition of receiving  
6 a grant under subsection (a), an office of behavioral health  
7 assistance described in paragraph (1) of subsection (a),  
8 or an ombudsman described in paragraph (2) of such sub-  
9 section shall be required to collect and report data to the  
10 Secretary, State legislature, relevant State agencies, in-  
11 cluding the departments of insurance and the State attor-  
12 ney general, on the types of problems and inquiries en-  
13 countered by individuals with respect to access to behav-  
14 ioral health services and substance abuse treatment serv-  
15 ices.

16           “(e) REPORT TO CONGRESS.—Not later than two  
17 years after the date of the enactment of this section, the  
18 Secretary shall submit to Congress a report on the data  
19 collected under subsection (d).

20           “(f) FUNDING.—

21           “(1) INITIAL FUNDING.—There is hereby ap-  
22           propriated to the Secretary, out of any funds in the  
23           Treasury not otherwise appropriated, \$30,000,000  
24           for the first fiscal year for which this section applies

1 to carry out this section. Such amount shall remain  
2 available without fiscal year limitation.

3 “(2) AUTHORIZATION FOR SUBSEQUENT  
4 YEARS.—There is authorized to be appropriated to  
5 the Secretary for each fiscal year following the fiscal  
6 year described in paragraph (1), such sums as may  
7 be necessary to carry out this section.

8 “(g) STATE MEDICAID AGENCY.—In this section, the  
9 term ‘State Medicaid agency’ means the State agency ad-  
10 ministering the State plan under this title (or a waiver  
11 of such plan).”.

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