

105<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

# S. 794

To amend the Public Health Service Act to revise and extend the grant program for services for children of substance abusers.

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IN THE SENATE OF THE UNITED STATES

MAY 22, 1997

Mr. DODD introduced the following bill; which was read twice and referred to the Committee on Labor and Human Resources

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## A BILL

To amend the Public Health Service Act to revise and extend the grant program for services for children of substance abusers.

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 “Services for Children  
5        of Substance Abusers Reauthorization Act”.

6        **SEC. 2. AMENDMENTS TO PUBLIC HEALTH SERVICE ACT.**

7        (a) ADMINISTRATION AND ACTIVITIES.—

8                (1) ADMINISTRATION.—Section 399D(a) of the  
9        Public Health Service Act (42 U.S.C. 280d(a)(1)) is  
10        amended—

1 (A) in paragraph (1), by striking “Admin-  
2 istrator” and all that follows through “Adminis-  
3 tration” and insert “Director of the Substance  
4 Abuse and Mental Health Services Administra-  
5 tion”; and

6 (B) in paragraph (2), by striking “Admin-  
7 istrator of the Substance Abuse and Mental  
8 Health Services Administration” and inserting  
9 “Administrator of the Health Resources and  
10 Services Administration”.

11 (2) ACTIVITIES.—Section 399D(a)(1) of the  
12 Public Health Service Act (42 U.S.C. 280d(a)(1)) is  
13 amended—

14 (A) in subparagraph (B), by striking  
15 “and” at the end;

16 (B) in subparagraph (C), by striking the  
17 period and inserting the following: “through  
18 family social services; child protective services;  
19 child care providers (including Head Start,  
20 schools, and early childhood development pro-  
21 grams); community-based family resource and  
22 support centers; the criminal justice system;  
23 health and mental health providers through  
24 screenings conducted during regular childhood  
25 examinations and other examinations; self and

1 family member referrals; treatment services;  
2 and other service providers and agencies serving  
3 children and families; and”;

4 (C) by adding at the end the following:

5 “(D) to provide education and training to  
6 health care professionals, child welfare provid-  
7 ers, and the personnel or such providers who  
8 provide services to children and families.”.

9 (3) IDENTIFICATION OF CERTAIN CHILDREN.—

10 Section 399D(a)(3)(A) of the Public Health Service  
11 Act (42 U.S.C. 280d(a)(3)(A)) is amended—

12 (A) in clause (i), by striking “(i) the en-  
13 tity” and inserting “(i)(I) the entity”;

14 (B) in clause (ii)—

15 (i) by striking “(ii) the entity” and in-  
16 serting “(II) the entity”; and

17 (ii) by striking the period and insert-  
18 ing “; and”; and

19 (C) by adding at the end the following:

20 “(iii) the entity will identify children  
21 who may be eligible for medical assistance  
22 under a State program under title XIX of  
23 the Social Security Act.”.

1 (b) SERVICES FOR CHILDREN.—Section 399D(b) of  
2 the Public Health Service Act (42 U.S.C. 280d(b)) is  
3 amended—

4 (1) in paragraph (1), by inserting “alcohol and  
5 drug,” after “psychological,”; and

6 (2) by striking paragraph (5) and inserting the  
7 following:

8 “(5) Drug and alcohol treatment and preven-  
9 tion services.”.

10 (c) SERVICES FOR AFFECTED FAMILIES.—Section  
11 399D(c) of the Public Health Service Act (42 U.S.C.  
12 280d(c)) is amended—

13 (1) in paragraph (1)—

14 (A) in the matter preceding subparagraph  
15 (A), by inserting before the semicolon the fol-  
16 lowing: “, or through an entity that meets ap-  
17 plicable State licensure or certification require-  
18 ments regarding the services involved”; and

19 (B) by adding at the end the following:

20 “(D) Aggressive outreach to family mem-  
21 bers with substance abuse problems.

22 “(E) Inclusion of consumer in the develop-  
23 ment, implementation, and monitoring of Fam-  
24 ily Services Plan.”; and

25 (2) in paragraph (2)—

1 (A) by striking subparagraph (A) and in-  
2 serting the following:

3 “(A) Alcohol and drug treatment services,  
4 including screening and assessment, diagnosis,  
5 detoxification, individual, group and family  
6 counseling, relapse prevention, and case man-  
7 agement.”;

8 (B) by striking subparagraph (C) and in-  
9 serting the following:

10 “(C) Pre- and post-pregnancy family plan-  
11 ning services and counseling on the human  
12 immunodeficiency virus and acquired immune  
13 deficiency syndrome.”;

14 (C) in subparagraph (D), by striking “con-  
15 flict and”; and

16 (D) in subparagraph (E), by striking “Re-  
17 medial” and inserting “Career planning and”.

18 (d) ELIGIBLE ENTITIES.—Section 399D(d) of the  
19 Public Health Service Act (42 U.S.C. 280d(d)) is amend-  
20 ed—

21 (1) by striking the matter preceding paragraph  
22 (1) and inserting:

23 “(d) ELIGIBLE ENTITIES.—The Secretary shall dis-  
24 tribute the grants through the following types of entities:”;

1           (2) in paragraph (1), by inserting “or preven-  
2           tion” after “drug treatment”; and

3           (3) in paragraph (2)—

4                 (A) in subparagraph (A), by striking “;  
5                 and” and inserting “; or”; and

6                 (B) in subparagraph (B), by inserting “or  
7                 pediatric health or mental health providers and  
8                 family mental health providers” before the pe-  
9                 riod.

10          (e)    SUBMISSION    OF    INFORMATION.—Section  
11   399D(h) of the Public Health Service Act (42 U.S.C.  
12   280d(h)) is amended—

13           (1) in paragraph (2)—

14                 (A) by inserting “including maternal and  
15                 child health” before “mental”;

16                 (B) by striking “treatment programs”; and

17                 (C) by striking “and the State agency re-  
18                 sponsible for administering public maternal and  
19                 child health services” and inserting “, the State  
20                 agency responsible for administering alcohol  
21                 and drug programs, the State lead agency, and  
22                 the State Interagency Coordinating Council  
23                 under part H of the Individuals with Disabil-  
24                 ities Education Act”; and

1           (2) in paragraph (3)(B), by inserting before the  
2           semicolon the following: “when the child can be  
3           cared for at home without endangering the child’s  
4           safety”.

5           (f) REPORTS.—Section 399D(i)(6) of the Public  
6           Health Service Act (42 U.S.C. 280d(k)(6)) is amended—

7           (1) in subparagraph (D), by striking “and” at  
8           the end;

9           (2) in subparagraph (E), by adding “and” after  
10          the semicolon; and

11          (3) by adding at the end the following:

12                   “(F) the number of children described in  
13                   subparagraph (C) for whom the permanent plan  
14                   is other than family reunification;”.

15          (g) EVALUATIONS.—Section 399D(l) of the Public  
16          Health Service Act (42 U.S.C. 280d(l)) is amended—

17          (1) in paragraph (4), by inserting before the  
18          semicolon the following: “, including increased par-  
19          ticipation in work or employment-related activities  
20          and decreased participation in welfare programs”;

21          (2) in paragraph (5), by striking “children  
22          whose” and inserting “children who can be cared for  
23          at home without endangering their safety and  
24          whose”; and

1           (3) in paragraph (6), by inserting before the  
2           semicolon the following: “if the reunification would  
3           not endanger the child”.

4           (h) REPORT TO CONGRESS.—Section 399D(m) of the  
5           Public Health Service Act (42 U.S.C. 280d(m)) is amend-  
6           ed—

7           (1) in paragraph (2), by adding “and” at the  
8           end;

9           (2) in paragraph (3), by striking the semicolon  
10          at the end and inserting a period; and

11          (3) by striking paragraphs (4) and (5).

12          (i) DATA COLLECTION.—Section 399D(n) of the  
13          Public Health Service Act (42 U.S.C. 280d(n)) is amend-  
14          ed by adding at the end the following: “The periodic report  
15          shall include a quantitative estimate of the prevalence of  
16          alcohol and drug problems in families involved in the child  
17          welfare system, the barriers to treatment and prevention  
18          services facing these families, and policy recommendations  
19          for removing the identified barriers, including training for  
20          child welfare workers.”.

21          (j) DEFINITION.—Section 399D(o)(2)(B) of the Pub-  
22          lic Health Service Act (42 U.S.C. 280d(o)(2)(B)) is  
23          amended by striking “dangerous”.

1 (k) AUTHORIZATION OF APPROPRIATIONS.—Section  
 2 399D(p) of the Public Health Service Act (42 U.S.C.  
 3 280d(p)) is amended to read as follows:

4 “(p) AUTHORIZATION OF APPROPRIATIONS.—For the  
 5 purpose of carrying out this section, there are authorized  
 6 to be appropriated \$50,000,000 for fiscal year 1998, and  
 7 such sums as may be necessary for fiscal year 1999.”.

8 (l) GRANTS FOR TRAINING AND CONFORMING  
 9 AMENDMENTS.—Section 399D of the Public Health Serv-  
 10 ice Act (42 U.S.C. 280d) is amended—

11 (1) by striking subsection (f);

12 (2) by striking subsection (k);

13 (3) by redesignating subsections (d), (e), (g),  
 14 (h), (i), (j), (l), (m), (n), (o), and (p) as subsections  
 15 (e) through (o), respectively;

16 (4) by inserting after subsection (c), the follow-  
 17 ing:

18 “(d) TRAINING FOR HEALTH CARE PROFESSIONALS,  
 19 CHILD WELFARE PROVIDERS, AND OTHER PERSON-  
 20 NEL.—The Secretary may make a grant under subsection  
 21 (a) for the training of health care professionals, child wel-  
 22 fare providers, and other personnel who provide services  
 23 to vulnerable children and families. Such training shall be  
 24 to assist professionals in recognizing the drug and alcohol  
 25 problems of their clients and to enhance their skills in

1 identifying and obtaining substance abuse prevention and  
2 treatment resources.”;

3           (5) in subsection (k)(2) (as so redesignated), by  
4 striking “(h)” and inserting “(i)”; and

5           (6) in paragraphs (3)(E) and (5) of subsection  
6 (m) (as so redesignated), by striking “(d)” and in-  
7 sserting “(e)”.

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