

111<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

# H. R. 5636

To establish Federally Qualified Behavioral Health Centers and to require  
Medicaid coverage for services provided by such Centers.

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IN THE HOUSE OF REPRESENTATIVES

JUNE 29, 2010

Ms. MATSUI (for herself and Mr. ENGEL) introduced the following bill; which  
was referred to the Committee on Energy and Commerce

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## A BILL

To establish Federally Qualified Behavioral Health Centers  
and to require Medicaid coverage for services provided  
by such Centers.

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 “Community Mental  
5 Health and Addiction Safety Net Equity Act of 2010”.

6       **SEC. 2. FEDERALLY QUALIFIED BEHAVIORAL HEALTH CEN-**  
7       **TERS.**

8       Section 1913 of the Public Health Service Act (42  
9 U.S.C. 300x–3) is amended—

1           (1) in subsection (a)(2)(A), by striking “com-  
2           munity mental health services” and inserting “be-  
3           havioral health services (of the type offered by feder-  
4           ally qualified behavioral health centers consistent  
5           with subsection (c)(3))”;

6           (2) in subsection (b)—

7                   (A) by striking paragraph (1) and insert-  
8           ing the following:

9           “(1) services under the plan will be provided  
10          only through appropriate, qualified community pro-  
11          grams (which may include federally qualified behav-  
12          ioral health centers, child mental health programs,  
13          psychosocial rehabilitation programs, mental health  
14          peer-support programs, and mental health primary  
15          consumer-directed programs); and”;

16                   (B) in paragraph (2), by striking “commu-  
17          nity mental health centers” and inserting “fed-  
18          erally qualified behavioral health centers”; and

19           (3) by striking subsection (c) and inserting the  
20          following:

21          “(c) CRITERIA FOR FEDERALLY QUALIFIED BEHAV-  
22          IORAL HEALTH CENTERS.—

23                   “(1) IN GENERAL.—The Administrator shall  
24          certify, and recertify at least every 5 years, federally

1 qualified behavioral health centers as meeting the  
2 criteria specified in this subsection.

3 “(2) REGULATIONS.—Not later than 18 months  
4 after the date of the enactment of the Community  
5 Mental Health and Addiction Safety Net Equity Act  
6 of 2010, the Administrator shall issue final regula-  
7 tions for certifying non-profit or local government  
8 centers as centers under paragraph (1).

9 “(3) CRITERIA.—The criteria referred to in  
10 subsection (b)(2) are that the center performs each  
11 of the following:

12 “(A) Provide services in locations that en-  
13 sure services will be available and accessible  
14 promptly and in a manner which preserves  
15 human dignity and assures continuity of care.

16 “(B) Provide services in a mode of service  
17 delivery appropriate for the target population.

18 “(C) Provide individuals with a choice of  
19 service options where there is more than one ef-  
20 ficacious treatment.

21 “(D) Employ a core staff of clinical staff  
22 that is multidisciplinary and culturally and lin-  
23 guistically competent.

24 “(E) Provide services, within the limits of  
25 the capacities of the center, to any individual

1           residing or employed in the service area of the  
2           center, regardless of the ability of the individual  
3           to pay.

4           “(F) Provide, directly or through contract,  
5           to the extent covered for adults in the State  
6           Medicaid plan under title XIX of the Social Se-  
7           curity Act and for children in accordance with  
8           section 1905(r) of such Act regarding early and  
9           periodic screening, diagnosis, and treatment,  
10          each of the following services:

11                   “(i) Screening, assessment, and diag-  
12                   nosis, including risk assessment.

13                   “(ii) Person-centered treatment plan-  
14                   ning or similar processes, including risk as-  
15                   sessment and crisis planning.

16                   “(iii) Outpatient clinic mental health  
17                   services, including screening, assessment,  
18                   diagnosis, psychotherapy, substance abuse  
19                   counseling, medication management, and  
20                   integrated treatment for mental illness and  
21                   substance abuse which shall be evidence-  
22                   based (including cognitive behavioral ther-  
23                   apy and other such therapies which are  
24                   evidence-based).

1           “(iv) Outpatient clinic primary care  
2 services, including screening and moni-  
3 toring of key health indicators and health  
4 risk (including screening for diabetes, hy-  
5 pertension, and cardiovascular disease and  
6 monitoring of weight, height, body mass  
7 index (BMI), blood pressure, blood glucose  
8 or HbA1C, and lipid profile).

9           “(v) Crisis mental health services, in-  
10 cluding 24-hour mobile crisis teams, emer-  
11 gency crisis intervention services, and cri-  
12 sis stabilization.

13           “(vi) Targeted case management  
14 (services to assist individuals gaining ac-  
15 cess to needed medical, social, educational,  
16 and other services and applying for income  
17 security and other benefits to which they  
18 may be entitled).

19           “(vii) Psychiatric rehabilitation serv-  
20 ices including skills training, assertive com-  
21 munity treatment, family psychoeducation,  
22 disability self-management, supported em-  
23 ployment, supported housing services,  
24 therapeutic foster care services, and such

1 other evidence-based practices as the Sec-  
2 retary may require.

3 “(viii) Peer support and counselor  
4 services and family supports.

5 “(G) Maintain linkages, and where possible  
6 enter into formal contracts with the following:

7 “(i) Inpatient psychiatric facilities and  
8 substance abuse detoxification and residen-  
9 tial programs.

10 “(ii) Adult and youth peer support  
11 and counselor services.

12 “(iii) Family support services for fam-  
13 ilies of children with serious mental dis-  
14 orders.

15 “(iv) Other community or regional  
16 services, supports, and providers, including  
17 schools, child welfare agencies, juvenile and  
18 criminal justice agencies and facilities,  
19 housing agencies and programs, employers,  
20 and other social services.

21 “(v) Onsite or offsite access to pri-  
22 mary care services.

23 “(vi) Enabling services, including out-  
24 reach, transportation, and translation.

1 “(vii) Health and wellness services, in-  
2 cluding services for tobacco cessation.”.

3 **SEC. 3. MEDICAID COVERAGE AND PAYMENT FOR FEDER-**  
4 **ALLY QUALIFIED BEHAVIORAL HEALTH CEN-**  
5 **TER SERVICES.**

6 (a) PAYMENT FOR SERVICES PROVIDED BY FEDER-  
7 ALLY QUALIFIED BEHAVIORAL HEALTH CENTERS.—Sec-  
8 tion 1902(bb) of the Social Security Act (42 U.S.C.  
9 1396a(bb)) is amended—

10 (1) in the heading, by striking “AND RURAL  
11 HEALTH CLINICS” and inserting “, FEDERALLY  
12 QUALIFIED BEHAVIORAL HEALTH CENTERS, AND  
13 RURAL HEALTH CLINICS”;

14 (2) in paragraph (1), by inserting “(and begin-  
15 ning with fiscal year 2011 with respect to services  
16 furnished on or after January 1, 2011, and each  
17 succeeding fiscal year, for services described in sec-  
18 tion 1905(a)(2)(D) furnished by a federally qualified  
19 behavioral health center)” after “by a rural health  
20 clinic”;

21 (3) in paragraph (2)—

22 (A) by striking the heading and inserting  
23 “INITIAL FISCAL YEAR”;

24 (B) by inserting “(or, in the case of serv-  
25 ices described in section 1905(a)(2)(D) fur-

1 nished by a federally qualified behavioral health  
2 center, for services furnished on and after Jan-  
3 uary 1, 2011, during fiscal year 2011)” after  
4 “January 1, 2001, during fiscal year 2001”;

5 (C) by inserting “(or, in the case of serv-  
6 ices described in section 1905(a)(2)(D) fur-  
7 nished by a federally qualified behavioral health  
8 center, during fiscal years 2009 and 2010)”  
9 after “1999 and 2000”; and

10 (D) by inserting “(or, in the case of serv-  
11 ices described in section 1905(a)(2)(D) fur-  
12 nished by a federally qualified behavioral health  
13 center, during fiscal year 2011)” before the pe-  
14 riod;

15 (4) in paragraph (3)—

16 (A) in the heading, by striking “FISCAL  
17 YEAR 2002 AND SUCCEEDING” and inserting  
18 “SUCCEEDING”; and

19 (B) by inserting “(or, in the case of serv-  
20 ices described in section 1905(a)(2)(D) fur-  
21 nished by a federally qualified behavioral health  
22 center, for services furnished during fiscal year  
23 2012 or a succeeding fiscal year)” after “2002  
24 or a succeeding fiscal year”;

25 (5) in paragraph (4)—

1 (A) by inserting “(or as a federally quali-  
2 fied behavioral health center after fiscal year  
3 2010)” after “or rural health clinic after fiscal  
4 year 2000”;

5 (B) by striking “furnished by the center  
6 or” and inserting “furnished by the federally  
7 qualified health center, services described in  
8 section 1905(a)(2)(D) furnished by the feder-  
9 ally qualified behavioral health center, or”;

10 (C) in the second sentence, by striking “or  
11 rural health clinic” and inserting “, federally  
12 qualified behavioral health center, or rural  
13 health clinic”;

14 (6) in paragraph (5), in each of subparagraphs  
15 (A) and (B), by striking “or rural health clinic” and  
16 inserting “, federally qualified behavioral health cen-  
17 ter, or rural health clinic”; and

18 (7) in paragraph (6), by striking “or to a rural  
19 health clinic” and inserting “, to a federally quali-  
20 fied behavioral health center for services described in  
21 section 1905(a)(2)(D), or to a rural health clinic”.

22 (b) INCLUSION OF FEDERALLY QUALIFIED BEHAV-  
23 IORAL HEALTH CENTER SERVICES IN THE TERM MED-  
24 ICAL ASSISTANCE.—Section 1905(a)(2) of the Social Se-  
25 curity Act (42 U.S.C. 1396d(a)(2)) is amended—

1 (1) by striking “and” before “(C)”; and

2 (2) by inserting before the semicolon at the end  
3 the following: “, and (D) federally qualified behav-  
4 ioral health center services (as defined in subsection  
5 (l)(4))”.

6 (c) DEFINITION OF FEDERALLY QUALIFIED BEHAV-  
7 IORAL HEALTH CENTER SERVICES.—Section 1905(l) of  
8 the Social Security Act (42 U.S.C. 1396d(l)) is amended  
9 by adding at the end the following paragraph:

10 “(4)(A) The term ‘federally qualified behavioral  
11 health center services’ means services furnished to  
12 an individual at a federally qualified behavioral  
13 health center (as defined by subparagraph (B)).

14 “(B) The term ‘federally qualified behavioral  
15 health center’ means an entity that is certified under  
16 section 1913(c) of the Public Health Service Act as  
17 meeting the criteria described in paragraph (3) of  
18 such section.”.

19 **SEC. 4. MENTAL HEALTH AND ADDICTION SAFETY NET**  
20 **STUDIES.**

21 (a) PAPERWORK REDUCTION STUDY.—

22 (1) IN GENERAL.—Not later than 12 months  
23 after the date of the enactment of this Act, the In-  
24 stitute of Medicine shall submit to the appropriate  
25 committees of Congress a report that evaluates the

1 combined paperwork burden of federally qualified be-  
2 havioral health centers certified section 1913(c) of  
3 the Public Health Service Act, as inserted by section  
4 2.

5 (2) SCOPE.—In preparing the report under  
6 paragraph (1), the Institute of Medicine shall exam-  
7 ine licensing, certification, service definitions, claims  
8 payment, billing codes, and financial auditing re-  
9 quirements utilized by the Office of Management  
10 and Budget, the Centers for Medicare & Medicaid  
11 Services, the Health Resources and Services Admin-  
12 istration, the Substance Abuse and Mental Health  
13 Services Administration, the Office of the Inspector  
14 General, State Medicaid agencies, State departments  
15 of health, State departments of education, and State  
16 and local juvenile justice and social services agencies  
17 to—

18 (A) establish an estimate of the combined  
19 nationwide cost of complying with the require-  
20 ments described in this paragraph, in terms of  
21 both administrative funding and staff time;

22 (B) establish an estimate of the per capita  
23 cost to each federally qualified behavioral health  
24 center certified under section 1913(c) of the  
25 Public Health Service Act to comply with the

1 requirements described in this paragraph, in  
2 terms of both administrative funding and staff  
3 time; and

4 (C) make administrative and statutory rec-  
5 ommendations to Congress, which may include  
6 a uniform methodology, to reduce the paper-  
7 work burden experienced by such federally  
8 qualified behavioral health centers.

9 (3) AUTHORIZATION OF APPROPRIATIONS.—

10 There are authorized to be appropriated to carry out  
11 this subsection \$550,000 for each of the fiscal years  
12 2012 and 2013.

13 (b) WAGE STUDY.—

14 (1) IN GENERAL.—Not later than 12 months  
15 after the date of the enactment of this Act, the In-  
16 stitute of Medicine shall conduct a nationwide anal-  
17 ysis, and submit a report to the appropriate commit-  
18 tees of Congress, concerning the compensation struc-  
19 ture of professional and paraprofessional personnel  
20 employed by federally qualified behavioral health  
21 centers certified under section 1913(c) of the Public  
22 Health Service Act, as inserted by section 2, as com-  
23 pared with the compensation structure of com-  
24 parable health safety net providers and relevant pri-  
25 vate sector health care employers.

1           (2) SCOPE.—In preparing the report under  
2 paragraph (1), the Institute of Medicine shall exam-  
3 ine compensation disparities, if such disparities are  
4 determined to exist, by type of personnel, type of  
5 provider or private sector employer, and by geo-  
6 graphic region.

7           (3) AUTHORIZATION OF APPROPRIATIONS.—  
8 There are authorized to be appropriated to carry out  
9 this subsection, \$550,000 for each of the fiscal years  
10 2012 and 2013.

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