

117TH CONGRESS  
2D SESSION

# S. 4306

To support behavioral health integration into primary care practices, and  
for other purposes.

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IN THE SENATE OF THE UNITED STATES

MAY 25, 2022

Ms. SMITH (for herself and Mr. MORAN) introduced the following bill; which  
was read twice and referred to the Committee on Health, Education,  
Labor, and Pensions

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## A BILL

To support behavioral health integration into primary care  
practices, and for other purposes.

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 “Improving Access to  
5 Behavioral Health Integration Act”.

6 **SEC. 2. PROGRAM TO SUPPORT BEHAVIORAL HEALTH IN-**  
7 **TEGRATION.**

8 Section 760 of the Public Health Service Act (42  
9 U.S.C. 294k) is amended—

1 (1) in the section heading, by striking “**TRAIN-**  
2 **ING DEMONSTRATION PROGRAM**” and inserting  
3 “**PROGRAM TO SUPPORT BEHAVIORAL HEALTH**  
4 **INTEGRATION**”;

5 (2) in subsection (a)—

6 (A) in paragraph (2), by striking “; and”  
7 and inserting a semicolon;

8 (B) in paragraph (3)(B), by striking the  
9 period and inserting “; and”; and

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

11 “(4) supporting primary care practices in im-  
12 plementing evidence-based behavioral health integra-  
13 tion programs that involve professionals whose pri-  
14 mary job function is the direct screening, diagnosis,  
15 treatment, or recovery support of patients with or in  
16 recovery from a behavioral health disorder, such as  
17 physicians, psychiatric nurses, social workers, mar-  
18 riage and family therapists, mental health coun-  
19 selors, occupational therapists, psychologists, and  
20 peer support specialists.”;

21 (3) by adding at the end of subsection (b) the  
22 following:

23 “(4) BEHAVIORAL HEALTH INTEGRATION PRO-  
24 GRAMS.—A recipient of a grant under subsection  
25 (a)(4) shall use the grant funds to—

1           “(A) hire physicians, psychiatric nurses,  
2           social workers, marriage and family therapists,  
3           mental health counselors, occupational thera-  
4           pists, psychologists, or peer support specialists  
5           to provide behavioral health services;

6           “(B) identify and enter into contractual re-  
7           lationships with health care providers or ven-  
8           dors offering care management and behavioral  
9           health consultation to facilitate the adoption of  
10          behavioral health integration models; or

11          “(C) for such other purposes as the Sec-  
12          retary determines appropriate.”;

13          (4) by adding at the end of subsection (c) the  
14          following:

15           “(4) BEHAVIORAL HEALTH INTEGRATION PRO-  
16           GRAMS.—To be eligible to receive a grant under sub-  
17           section (a)(4), an entity shall be a primary care  
18           practice, including adult primary care practices and  
19           pediatric primary care practices.”;

20          (5) by adding at the end of subsection (d) the  
21          following:

22           “(3) BEHAVIORAL HEALTH INTEGRATION PRO-  
23           GRAMS.—In awarding grants under subsection  
24           (a)(4), the Secretary shall give priority to eligible en-  
25           tities that—

1           “(A) demonstrate a pathway to financially  
2 sustain the behavioral health integration pro-  
3 gram beyond the initial grant period, such as  
4 participation in value-based behavioral health  
5 integration models;

6           “(B) have the capacity to expand access to  
7 mental health and substance use disorder serv-  
8 ices in areas with demonstrated need, as deter-  
9 mined by the Secretary, such as Tribal, rural,  
10 or other medically underserved communities; or

11           “(C) are practices that are eligible for  
12 technical assistance under section 1848(q)(11)  
13 of the Social Security Act on the basis of the  
14 number of professionals.”;

15 (6) in subsection (f)—

16           (A) by striking “demonstration program”  
17 each place such term appears and inserting  
18 “program”;

19           (B) in paragraph (2)—

20                 (i) in subparagraph (B), by striking “;  
21 and” and inserting a semicolon;

22                 (ii) by redesignating subparagraph  
23 (C) as subparagraph (D); and

24                 (iii) by inserting after subparagraph  
25 (B) the following:

1           “(C) an analysis of the uptake of behav-  
2           ioral health integration models in primary care  
3           practices; and”;

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

5           “(3) METRICS FOR MEASURING THE UPTAKE  
6           OF BEHAVIORAL HEALTH INTEGRATION MODELS.—  
7           For purposes of the reporting requirement under  
8           paragraph (2)(C), the Secretary shall develop evi-  
9           dence-based metrics and reporting requirements to  
10          measure the uptake of behavioral health integration  
11          models by primary care practices, including by meas-  
12          uring the increase in provider capacity, patient ac-  
13          cess to behavioral health care, and patient outcomes.  
14          The Secretary shall consult with primary care and  
15          behavioral health professionals, and patient advo-  
16          cates when developing measures and performance  
17          metrics.

18          “(4) PUBLICATION OF DATA.—The Secretary  
19          shall make public aggregate evaluation results col-  
20          lected through the study under paragraph (1) to fa-  
21          cilitate identifying best practices and promising  
22          models for scale with respect to behavioral health in-  
23          tegration programs.”;

24          (7) by amending subsection (g) to read as fol-  
25          lows:

1       “(g) AUTHORIZATION OF APPROPRIATIONS.—There  
2 are authorized to be appropriated, for each of fiscal years  
3 2023 through 2027—

4           “(1) to carry out the grant programs under  
5 paragraphs (1), (2), and (3) of subsection (a),  
6 \$10,000,000; and

7           “(2) to carry out the grant program under sub-  
8 section (a)(4), \$30,000,000.”.

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