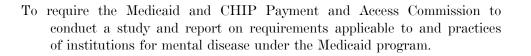
[DISCUSSION DRAFT]

H.R.

115th CONGRESS 2D Session



IN THE HOUSE OF REPRESENTATIVES

M____ introduced the following bill; which was referred to the Committee on _____

A BILL

- To require the Medicaid and CHIP Payment and Access Commission to conduct a study and report on requirements applicable to and practices of institutions for mental disease 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 "Medicaid Institutes
5 for Mental Disease Are Decisive in Delivering Inpatient
6 Treatment for Individuals but Opportunities for Needed
7 Access are Limited without Information Needed about Fa-

cility Obligations Act" or the "Medicaid IMD ADDI TIONAL INFO Act".

3 SEC. 2. MACPAC STUDY AND REPORT ON INSTITUTIONS 4 FOR MENTAL DISEASE REQUIREMENTS AND 5 PRACTICES UNDER MEDICAID.

6 (a) IN GENERAL.—Not later than January 1, 2020, 7 the Medicaid and CHIP Payment and Access Commission 8 established under section 1900 of the Social Security Act 9 (42 U.S.C. 1396) shall conduct a study, using data from 10 a representative sample of States, and submit to Congress a report on at least the following information, with respect 11 to services furnished to individuals enrolled under State 12 13 plans under the Medicaid program under title XIX of such Act (42 U.S.C. 1396 et seq.) (or waivers of such plans) 14 15 who are patients in institutions for mental disease and for which payment is made through fee-for-service or man-16 17 aged care arrangements under such State plan (or waiv-18 er):

19 (1) A description of such institutions for mental
20 disease in each such State, including at a min21 imum—

22 (A) the number of such institutions in the23 State,

24 (B) the facility type of such institutions in
25 the State;

3

1	(C) such services provided at such institu-
2	tions;
3	(D) any coverage limitations under such
4	State plan (or wavier) on scope, duration, or
5	frequency of such services;
6	(E) the number of beds for each such in-
7	stitution in the State; and
8	(F) the average cost per patient in such an
9	institution per day.
10	(2) A description of—
11	(A) any Federal waiver that such State
12	has for such institutions and the Federal statu-
13	tory authority for such waiver; and
14	(B) any other Medicaid funding sources
15	used by the State for funding such institutions,
16	such as supplemental payments.
17	(3) A summary of requirements (such as certifi-
18	cation, licensure, and accreditation) applied by each
19	such State to such institutions in order for such in-
20	stitutions to receive payment under the State plan
21	(or waiver) and how each such State determines if
22	such requirements have been met.
23	(4) A summary of standards (such as quality
24	standards, clinical standards, and facility standards)
25	that such institutions must meet to receive payment

under the State plans (or waivers) and how each
 such State determines if such standards have been
 met.

4 (5) A summary of each such State's oversight
5 activities conducted in the past 5 years that focus on
6 institutions for mental disease and a summary of the
7 findings from such activities.

8 (6) A summary of institutions for mental dis-9 ease requirements, standards, and oversight that are 10 considered best practices for other States to con-11 sider.

12 (7) Recommendations for actions by Congress
13 and the Centers for Medicare & Medicaid Services
14 with respect to how State Medicaid programs may
15 improve care, standardization, and oversight in insti16 tutions for mental disease.

17 (b) STAKEHOLDER INPUT.—In carrying out subsection (a), the Medicaid and CHIP Payment and Access 18 19 Commission shall seek input from State Medicaid directors and stakeholders, including at a minimum the Sub-20 stance Abuse and Mental Health Services Administration, 21 22 Centers for Medicare & Medicaid Services, State Medicaid 23 officials, State mental health authorities, Medicaid bene-24 ficiary advocates, and health care providers.

25 (c) DEFINITIONS.—In this section:

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1 (1) Representative sample of states.— 2 The term "representative sample of States" means 3 a non-probability sample in which the States are se-4 lected based on the knowledge and professional judg-5 ment on the selector. (2) STATE.—The term "State" means each of 6 7 the 50 States, the District of Columbia, and any commonwealth or territory of the United States. 8 9 (3) INSTITUTION FOR MENTAL DISEASE.—The term "institution for mental disease" has the mean-10 11 ing given such term in section 435.1009 of title 42 of the Code of Federal Regulations, or any successor 12 13 regulation.