

AMENDMENT BY H.R. 7233
OFFERED BY MR. BURGESS OF TEXAS

Add at the end the following:

1 **SEC. ____ . REMOVAL OF INMATE LIMITATION ON BENEFITS**
2 **UNDER MEDICAID.**

3 (a) IN GENERAL.—The subdivision (A) of section
4 1905(a) of the Social Security Act (42 U.S.C. 1396d(a))
5 following paragraph (31) of such section is amended by
6 inserting “or, at the option of the State, while in custody
7 pending disposition of charges” after “patient in a medical
8 institution”.

9 (b) EFFECTIVE DATE.—The amendment made by
10 subsection (a) shall take effect on the 1st day of the 1st
11 calendar quarter that begins after the date that is 60 days
12 after the date of the enactment of this Act and shall apply
13 to items and services furnished for periods beginning on
14 or after such date.

15 **SEC. ____ . PLANNING GRANTS.**

16 (a) IN GENERAL.—The Secretary shall award plan-
17 ning grants to at least 10 States to support providing
18 medical assistance under the State Medicaid program to
19 individuals who are eligible for such assistance as a result
20 of the amendment made by section 2(a). The grants shall

1 be used to prepare an application that meets the require-
2 ments of subsection (b).

3 (b) APPLICATION REQUIREMENTS.—In order to be
4 awarded a planning grant under this section, a State shall
5 submit an application to the Secretary at such time and
6 in such form and manner as the Secretary shall require,
7 that includes the following information along with such
8 additional information, provisions, and assurances, as the
9 Secretary may require:

10 (1) A proposed process for carrying out each of
11 the activities described in subsection (c) in the State.

12 (2) A review of State policies regarding the
13 population of individuals who are eligible for medical
14 assistance under the State Medicaid program as a
15 result of the amendment made by section 2(a) with
16 respect to whether such policies may create barriers
17 to increasing the number of health care providers
18 who can provide items and services for that popu-
19 lation.

20 (3) The development of a plan, taking into ac-
21 count activities described in subsection (c)(2), that
22 will ensure a sustainable number of Medicaid-en-
23 rolled providers under the State Medicaid program
24 that can offer a full array of treatment and services

1 to the patient population described in paragraph (2)
2 as needed. Such plan shall include the following:

3 (A) Specific activities to increase the num-
4 ber of providers that will offer physical health
5 treatment, as well as services related to behav-
6 ioral health treatment, including substance use
7 disorder treatment, recovery, or support serv-
8 ices (including short-term detoxification serv-
9 ices, outpatient substance use disorder services,
10 and evidence-based peer recovery services).

11 (B) Milestones and timeliness for imple-
12 menting activities set forth in the plan.

13 (C) Specific measurable targets for in-
14 creasing the number of providers under the
15 State Medicaid program who will treat the pa-
16 tient population described in paragraph (2).

17 (4) An assurance that the State consulted with
18 relevant stakeholders, including the State agency re-
19 sponsible for administering the State Medicaid pro-
20 gram, Medicaid managed care plans, health care
21 providers, law enforcement personnel, officials from
22 jails, and Medicaid beneficiary advocates, with re-
23 spect to the preparation and completion of the appli-
24 cation and a description of such consultation.

1 (c) ACTIVITIES DESCRIBED.—For purposes of sub-
2 section (b)(1), the activities described in this subsection
3 are the following:

4 (1) Activities that support the development of
5 an initial assessment of the health treatment needs
6 of patients who are in custody pending disposition of
7 charges to determine the extent to which providers
8 are needed (including the types of such providers
9 and geographic area of need) to improve the number
10 of providers that will treat patients in custody pend-
11 ing disposition of charges under the State Medicaid
12 program, including the following:

13 (A) An estimate of the number of individ-
14 uals enrolled under the State Medicaid program
15 who are in custody pending disposition of
16 charges.

17 (B) Information on the capacity of pro-
18 viders to provide treatment or services to such
19 individuals enrolled under the State Medicaid
20 program, including information on providers
21 who provide such services and their participa-
22 tion under the State Medicaid program.

23 (C) Information on the health care services
24 provided under programs other than the State

1 Medicaid program in jails to individuals who
2 are in custody pending disposition of charges.

3 (2) Activities that, taking into account the re-
4 sults of the assessment described in paragraph (1)
5 with respect to the provision of treatment or services
6 under the State Medicaid program, support the de-
7 velopment of State infrastructure to recruit or con-
8 tract with prospective health care providers, provide
9 training and technical assistance to such providers,
10 and secure a process for an electronic health record
11 system for billing to reimburse for services provided
12 by the correctional facility, outpatient providers,
13 medical vendors, and contracted telehealth service
14 providers to patients who are in custody pending dis-
15 position of charges that are compliant with applica-
16 ble requirements and regulations for State Medicaid
17 programs.

18 (3) Activities that ensure the quality of care for
19 patients who are in custody pending disposition of
20 charges, including formal reporting mechanisms for
21 patient outcomes, and activities that promote par-
22 ticipation in learning collaboratives among providers
23 treating this population.

1 (d) GEOGRAPHIC DIVERSITY.—The Secretary shall
2 select States for planning grants under this section in a
3 manner that ensures geographic diversity.

4 (e) FUNDING.—Out of any money in the Treasury
5 not otherwise appropriated, there are appropriated to the
6 Secretary to carry out this section, \$50,000,000, to re-
7 main available until expended.

8 (f) DEFINITION.—In this section:

9 (1) MEDICAID PROGRAM.—The term “Medicaid
10 program” means, with respect to a State, the State
11 program under title XIX of the Social Security Act
12 (42 U.S.C. 1396 et seq.) including any waiver or
13 demonstration under such title or under section
14 1115 of such Act (42 U.S.C. 1315) relating to such
15 title.

16 (2) SECRETARY.—The term “Secretary” means
17 the Secretary of Health and Human Services.

18 (3) STATE.—The term “State” has the mean-
19 ing given that term for purposes of title XIX of the
20 Social Security Act (42 U.S.C. 1396 et seq.) in sec-
21 tion 1101(a)(1) of such Act (42 U.S.C. 1301(a)(1)).

