To amend title XIX of the Social Security Act to allow States to provide under Medicaid services for certain individuals with substance use disorders in institutions for mental diseases.

IN THE HOUSE OF REPRESENTATIVES

M_. __________ introduced the following bill; which was referred to the
Committee on __________

A BILL

To amend title XIX of the Social Security Act to allow States to provide under Medicaid services for certain individuals with substance use disorders in institutions for mental diseases.

1  Be it enacted by the Senate and House of Representa-
2  tives of the United States of America in Congress assembled,
SECTION 1. MEDICAID STATE PLAN OPTION TO PROVIDE SERVICES FOR CERTAIN INDIVIDUALS WITH SUBSTANCE USE DISORDERS IN INSTITUTIONS FOR MENTAL DISEASES.

Section 1915 of the Social Security Act (42 U.S.C. 1396n) is amended by adding at the end the following new subsection:

“(l) State Plan Option To Provide Services for Certain Individuals in Institutions for Mental Diseases.—

“(1) In General.—With respect to calendar quarters beginning during the period beginning October 1, 2018, and ending September 30, 2023, a State may elect, through a State plan amendment, to, notwithstanding section 1905(a), provide medical assistance for services furnished in institutions for mental diseases to eligible individuals with substance use disorders, in accordance with the requirements of this subsection.

“(2) Payments.—

“(A) In General.—Amounts expended under a State plan amendment under paragraph (1) for services described in such paragraph furnished, with respect to a 12-month period, in an institution for mental diseases to an eligible individual with a substance use disorder
shall be treated as medical assistance for which
payment is made under section 1903(a) but
only to the extent that, subject to subparagraph
(B), such services are furnished for not more
than a period of 90 days (whether or not con-
secutive) during such 12-month period.

“(B) LIMITATIONS.—Payment for expendi-
tures described in subparagraph (A), with re-
spect to services described in paragraph (1) fur-
nished in an institution for mental diseases to
an eligible individual with a substance use dis-
order during a 12-month period, shall not be
made under section 1903(a) with respect to
such services furnished during any period ex-
ceeding 30 consecutive days during such 12-
month period unless—

“(i) after such 30-day period (and, in
addition, in the case of such services fur-
nished during any period exceeding 60 con-
secutive days, after such 60-day period), a
qualified health care provider treating the
individual in the institution for mental dis-
ases assesses the individual and deter-
mines the individual continues to medically
need the treatment and services furnished
(ii) the State requires under the State plan amendment continued medically necessary treatment during the entire period for which such services are furnished and for which payment is made pursuant to this paragraph in order to promote recovery, stable transition to ongoing treatment, and discharge.

"(C) CLARIFICATION.—Payment made under this paragraph for expenditures under a State plan amendment under this subsection with respect to services described in paragraph (1) furnished to an eligible individual with a substance use disorder shall not affect payment that would otherwise be made under section 1903(a) for expenditures under the State plan (or waiver of such plan) for medical assistance for such individual.

"(3) MAINTENANCE OF EFFORT AND OTHER CONDITIONS.—
“(A) In general.—As a condition for a State including as medical assistance pursuant to this subsection services furnished in institutions for mental diseases to eligible individuals with substance use disorders, the State shall—

“(i) during the period in which it so furnished such medical assistance through a State plan amendment under this subsection, maintain at least the number of licensed beds at institutions for mental diseases owned, operated, or contracted for by the State that were being maintained as of the date of the enactment of this subsection or, if higher, as of the date the State applies to the Secretary to include such medical assistance under the State plan amendment pursuant to this subsection;

“(ii) during the period in which it so furnished such medical assistance through a State plan amendment under this subsection, maintain on an annual basis a level of funding expended by the State (and political subdivisions thereof) other
than under this title from non-Federal funds—

“(I) for inpatient services in an institution for mental diseases, and for active psychiatric care and treatment provided on an outpatient basis, that is not less than the level of such funding for such services and care as of the date of the enactment of this subsection or, if higher, as of the date the State applies to the Secretary to include such medical assistance under the State plan amendment pursuant to this subsection; and

“(II) for specified non-IMD services described in subparagraph (B) that is not less than the level of such funding for such services as of the date of the enactment of this subsection or, if higher, as of the date the State applies to the Secretary to include such medical assistance under the State plan amendment pursuant to this subsection; and
“(iii) notify the Secretary of how the State plan amendment under this subsection ensures an appropriate clinical screening of eligible individuals with a substance use disorder, including assessments to determine level of care and length of stay recommendations based upon the multidimensional assessment criteria of the American Society of Addiction Medicine.

“(B) SPECIFIED NON-IMD SERVICES DESCRIBED.—For purposes of subparagraph (A)(ii)(II), specified non-IMD services described in this subparagraph are the following:

“(i) Inpatient services, other than such services described in subparagraph (A)(ii)(I).

“(ii) Outpatient and community-based services for eligible individuals with a substance use disorder, such as—

“(I) substance use disorder treatment;

“(II) evidence-based recovery and support services, including short-term detoxification services;
“(III) clinically-directed therapeutic treatment to facilitate recovery skills, relapse prevention, and emotional coping strategies;

“(IV) addiction pharmacotherapy and drug screening;

“(V) counseling and clinical monitoring;

“(VI) withdrawal management and related treatment designed to alleviate acute emotional, behavioral, cognitive, or biomedical distress resulting from, or occurring with, an individual’s use of alcohol and other drugs; and

“(VII) routine monitoring of the medication adherence of such individuals.

“(4) DEFINITIONS.—In this subsection:

“(A) ELIGIBLE INDIVIDUAL WITH A SUBSTANCE USE DISORDER.—The term ‘eligible individual with a substance use disorder’ means an individual who—
“(i) with respect to a State, is enrolled for medical assistance under the State plan (or a waiver of such plan);

“(ii) is at least 21 years of age;

“(iii) has not attained 65 years of age; and

“(iv) has been diagnosed with at least one substance use disorder.

“(B) INSTITUTION FOR MENTAL DISEASES.—The term ‘institution for mental diseases’ has the meaning given such term in section 1905(i).”