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.

IN THE HOUSE OF REPRESENTATIVES

Mr. __________ 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.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Medicaid Institutes for Mental Disease Are Decisive in Delivering Inpatient Treatment for Individuals but Opportunities for Needed Access are Limited without Information Needed about Fa-
cility Obligations Act” or the “Medicaid IMD ADDITIONAL INFO Act”.

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

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

(1) A description of such institutions for mental disease in each such State, including at a minimum—

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

(B) the facility type of such institutions in the State;
(C) such services provided at such institutions;

(D) any coverage limitations under such State plan (or waiver) on scope, duration, or frequency of such services;

(E) the number of beds for each such institution in the State; and

(F) the average cost per patient in such an institution per day.

(2) A description of—

(A) any Federal waiver that such State has for such institutions and the Federal statutory authority for such waiver; and

(B) any other Medicaid funding sources used by the State for funding such institutions, such as supplemental payments.

(3) A summary of requirements (such as certification, licensure, and accreditation) applied by each such State to such institutions in order for such institutions to receive payment under the State plan (or waiver) and how each such State determines if such requirements have been met.

(4) A summary of standards (such as quality standards, clinical standards, and facility standards) 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.

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

(6) A summary of institutions for mental disease requirements, standards, and oversight that are considered best practices for other States to consider.

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

(b) Stakeholder Input.—In carrying out subsection (a), the Medicaid and CHIP Payment and Access Commission shall seek input from State Medicaid directors and stakeholders, including at a minimum the Substance Abuse and Mental Health Services Administration, Centers for Medicare & Medicaid Services, State Medicaid officials, State mental health authorities, Medicaid beneficiary advocates, and health care providers.

(c) Definitions.—In this section:
(1) **Representative sample of states.**—The term “representative sample of States” means a non-probability sample in which the States are selected based on the knowledge and professional judgment on the selector.

(2) **State.**—The term “State” means each of the 50 States, the District of Columbia, and any commonwealth or territory of the United States.

(3) **Institution for mental disease.**—The term “institution for mental disease” has the meaning given such term in section 435.1009 of title 42 of the Code of Federal Regulations, or any successor regulation.