

.....  
(Original Signature of Member)

119TH CONGRESS  
1ST SESSION

**H. R.** \_\_\_\_\_

To amend titles XVIII and XIX of the Social Security Act to adjust coverage and payment for certified community behavioral health clinic services under the Medicare and Medicaid programs, and for other purposes.

\_\_\_\_\_  
IN THE HOUSE OF REPRESENTATIVES

Ms. MATSUI introduced the following bill; which was referred to the Committee on \_\_\_\_\_

\_\_\_\_\_  
**A BILL**

To amend titles XVIII and XIX of the Social Security Act to adjust coverage and payment for certified community behavioral health clinic services under the Medicare and Medicaid programs, 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 “Ensuring Excellence  
5 in Mental Health Act”.

6 **SEC. 2. TABLE OF CONTENTS.**

7 The table of contents for this Act is as follows:

- Sec. 1. Short title.
- Sec. 2. Table of contents.

**TITLE I—STRENGTHENING AND PROVIDING COST-RELATED PAYMENT FOR CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS UNDER THE MEDICAID PROGRAM**

- Sec. 101. Coordination of Medicaid certified community behavioral health clinic services with CCBHC operating grant program; CCBHC accreditation option.
- Sec. 102. Establishing a prospective payment system for certified community behavioral health clinics.
- Sec. 103. Expanding CCBHC services within Medicaid demonstration program.
- Sec. 104. Expanding scope of CCBHC services covered under the Medicaid program.

**TITLE II—COVERAGE OF CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC SERVICES UNDER THE MEDICARE PROGRAM**

- Sec. 201. Coverage of certified community behavioral health clinic services under the medicare program.
- Sec. 202. Payment for certified community behavioral health clinic services under the medicare program.
- Sec. 203. Non-application of Medicare part B deductible for CCBHC services.
- Sec. 204. Right to seek review of cost reports from Provider Reimbursement Review Board.
- Sec. 205. Extending safe harbor under Anti-Kickback Statute to waivers of CCBHC coinsurance.
- Sec. 206. Effective date.

**TITLE III—COMMUNITY BEHAVIORAL HEALTH CLINIC GRANTS**

- Sec. 301. Operating grants, technical assistance, data infrastructure, and accreditation for community behavioral health clinics.

**TITLE IV—LIABILITY PROTECTION FOR CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC CLINICIANS**

- Sec. 401. Conferring protection under the Federal Tort Claims Act to clinicians in certified community behavioral health clinics.

1 **TITLE I—STRENGTHENING AND**  
2 **PROVIDING COST-RELATED**  
3 **PAYMENT FOR CERTIFIED**  
4 **COMMUNITY BEHAVIORAL**  
5 **HEALTH CLINICS UNDER THE**  
6 **MEDICAID PROGRAM**

7 **SECTION 101. COORDINATION OF MEDICAID CERTIFIED**  
8 **COMMUNITY BEHAVIORAL HEALTH CLINIC**  
9 **SERVICES WITH CCBHC OPERATING GRANT**  
10 **PROGRAM; CCBHC ACCREDITATION OPTION.**

11 Section 1905(jj)(2) of the Social Security Act (42  
12 U.S.C. 1396d(jj)(2)) is amended—

13 (1) in subparagraph (B)—

14 (A) by inserting “(or providing or referring  
15 through formal relationships, as applicable)”  
16 after “furnishing”;

17 (B) by striking “described in paragraph  
18 (1)” and inserting “described in paragraph  
19 (1)(B)”; and

20 (C) by striking “and” at the end;

21 (2) in subparagraph (C), by striking the period  
22 at the end and inserting “, and including any such  
23 data as the State, by agreement with the Secretary,  
24 shall access via the system described in section  
25 340J–3 of the Public Health Service Act; and”; and

1           (3) by adding at the end the following new sub-  
2 paragraph:

3           “(D) beginning January 1, 2026, at the  
4 option of the State, has received accreditation  
5 by an accreditation body approved under sec-  
6 tion 340J-4 of the Public Health Service Act.”.

7 **SEC. 102. ESTABLISHING A PROSPECTIVE PAYMENT SYS-**  
8 **TEM FOR CERTIFIED COMMUNITY BEHAV-**  
9 **IORAL HEALTH CLINICS.**

10       (a) IN GENERAL.—Section 1902 of the Social Secu-  
11 rity Act (42 U.S.C. 1396a) is amended by adding at the  
12 end the following new subsection:

13       “(yy) PAYMENT FOR SERVICES PROVIDED BY CER-  
14 TIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS.—

15       “(1) IN GENERAL.—Beginning with fiscal year  
16 2026 with respect to services furnished on or after  
17 January 1, 2026, and for each succeeding fiscal  
18 year, if a State elects to make medical assistance  
19 available for certified community behavioral health  
20 clinic services under section 1905(a)(31), the State  
21 plan shall provide for payment for such services fur-  
22 nished by (or under arrangement with) a certified  
23 community behavioral health clinic described in sec-  
24 tion 1905(jj)(2) (in this subsection referred to as a

1 ‘clinic’) in accordance with the provisions of this  
2 subsection.

3 “(2) PROSPECTIVE PAYMENT SYSTEM.—

4 “(A) IN GENERAL.—Subject to paragraph  
5 (4), a State shall provide for payment for cer-  
6 tified community behavioral health clinic serv-  
7 ices furnished by (or under arrangement with)  
8 a clinic in the first fiscal year (or portion of a  
9 fiscal year) described in paragraph (1) for  
10 which a State elects to provide medical assist-  
11 ance for such services under section  
12 1905(a)(31) under a prospective payment sys-  
13 tem developed by the State in accordance with  
14 this paragraph.

15 “(B) UNIT OF PAYMENT.—In establishing  
16 the system under subparagraph (A), the State  
17 shall apply as the unit of service—

18 “(i) daily visits; or

19 “(ii) monthly visits (excluding repeat  
20 visits from the same individual).

21 “(C) SYSTEM DESIGN.—Under the system  
22 under subparagraph (A), the State may, con-  
23 sistent with the methodology described in guid-  
24 ance issued under section 223(b) of the Pro-  
25 tecting Access to Medicare Act of 2014—

1 “(i) establish separate prospective  
2 payment system rates for special popu-  
3 lations;

4 “(ii) use a system of outlier payments  
5 for a portion of costs of furnishing cer-  
6 tified community behavioral health clinic  
7 services; or

8 “(iii) with respect to certified commu-  
9 nity behavioral health clinic services that  
10 are crisis services—

11 “(I) require that each cost report  
12 of a clinic segregate costs relating to  
13 mobile crisis teams, emergency crisis  
14 intervention services, or crisis sta-  
15 bilization from other components of  
16 the services described in section  
17 1905(a)(31); and

18 “(II) provide for a prospective  
19 payment system rate for any or all of  
20 such crisis services that is distinct  
21 from the rate encompassing the re-  
22 mainder of the services described in  
23 section 1905(a)(31).

24 “(D) PAYMENT BASIS.—Subject to sub-  
25 paragraph (E), the State shall provide for com-

1           putation of a prospective payment amount for  
2           an individual certified community behavioral  
3           health clinic under the system under subpara-  
4           graph (A) as follows:

5                   “(i) For the first fiscal year (or por-  
6                   tion of a fiscal year) for which a State  
7                   elects to provide medical assistance for  
8                   such services under section 1905(a)(31),  
9                   such amount—

10                           “(I) in the case of a State that  
11                           did not operate a demonstration pro-  
12                           gram under section 223 of the Pro-  
13                           tecting Access to Medicare Act of  
14                           2014 during a base year cor-  
15                           responding to the fiscal year imme-  
16                           diately preceding such first fiscal year  
17                           (or portion of a fiscal year), shall be  
18                           equal to 100 percent of the costs of  
19                           the clinic which are reasonable and re-  
20                           lated to the furnishing of such serv-  
21                           ices during such base year; and

22                           “(II) in the case of a State that  
23                           did operate a demonstration program  
24                           under section 223 of the Protecting  
25                           Access to Medicare Act of 2014 dur-

1                   ing such base year, shall be equal to,  
2                   at the option of the State—

3                               “(aa) the amount described  
4                               in subclause (I); or

5                               “(bb) the amount that would  
6                               have otherwise applied with re-  
7                               spect to such services under such  
8                               demonstration.

9                               “(ii) For each subsequent fiscal year  
10                              for which a State elects to provide medical  
11                              assistance for such services under section  
12                              1905(a)(31), such amount shall be, subject  
13                              to subparagraph (F), the amount cal-  
14                              culated under this subparagraph for the  
15                              preceding fiscal year—

16                              “(I) increased by the percentage  
17                              increase described in section  
18                              1834(aa)(3)(C) for the calendar year  
19                              in which such preceding fiscal year  
20                              began; and

21                              “(II) adjusted to take into ac-  
22                              count any increase or decrease in the  
23                              scope of such services furnished by  
24                              the clinic during the fiscal year in-  
25                              volved.

1           “(E) ESTABLISHMENT OF INITIAL FISCAL  
2           YEAR PAYMENT FOR NEW CLINICS.—For pur-  
3           poses of subparagraph (D)—

4                   “(i) in the case of a certified commu-  
5                   nity behavioral health clinic that does not  
6                   have available complete actual cost data  
7                   representing the provision of all certified  
8                   community behavioral health clinic services  
9                   provided in the base year described in  
10                  clause (i)(I) of such subparagraph, the  
11                  State may use estimated or projected data  
12                  relating to specific services for which the  
13                  clinics lack cost experience; and

14                   “(ii) in the case of an entity that first  
15                   enrolls under this title as a certified com-  
16                   munity behavioral health clinic in a year  
17                   after the first fiscal year in which the  
18                   State first provides for payment for the  
19                   services described in section 1905(a)(31)  
20                  in accordance with paragraph (1)—

21                   “(I) for the first fiscal year in  
22                   which the clinic furnishes such serv-  
23                   ices, the amount determined by the  
24                  State for such clinic shall be—

1           “(aa) determined on the  
2 basis of the amounts established  
3 under this paragraph for other  
4 such clinics located in the same  
5 or adjacent area (as defined by  
6 the Secretary) with a similar case  
7 load; or

8           “(bb) in the absence of any  
9 such clinic, based on the reason-  
10 able projected costs per visit of  
11 the clinic;

12           “(II) for the second fiscal year in  
13 which the clinic furnishes such serv-  
14 ices, the amount determined by the  
15 State for such clinic shall be deter-  
16 mined under clause (i)(I) of such sub-  
17 paragraph on the basis of the reason-  
18 able and related costs and visits from  
19 the clinic’s first fiscal year of oper-  
20 ation; and

21           “(III) for the third and each sub-  
22 sequent fiscal year in which the clinic  
23 furnishes such services, the amount  
24 determined by the State for such clin-

1                   ic shall be determined under clause  
2                   (ii) of such subparagraph.

3                   “(F) REBASING.—A State may periodically  
4                   (but no less frequently than every third fiscal  
5                   year after the first fiscal year described in sub-  
6                   paragraph (D)) rebase the prospective payment  
7                   amount determined under subparagraph (D)  
8                   such that costs from the fiscal year preceding  
9                   the rebasing year, rather than costs from the  
10                  base year described in clause (i)(I) of such sub-  
11                  paragraph, shall be used in establishing a new  
12                  cost-related rate for each clinic. Such rebasing  
13                  shall include those clinics with initial rates de-  
14                  termined under subparagraph (E).

15                  “(3) ADMINISTRATION IN THE CASE OF MAN-  
16                  AGED CARE.—

17                  “(A) IN GENERAL.—In the case of services  
18                  furnished by a certified community behavioral  
19                  health clinic pursuant to a contract between the  
20                  clinic and a managed care entity (as defined in  
21                  section 1932(a)(1)(B)) or other specified entity  
22                  (as defined in 1903(m)(9)(D)(iii)), the State  
23                  shall provide for payment to the clinic by the  
24                  State of a supplemental payment equal to the  
25                  amount (if any) by which the amount deter-

1           mined under the preceding paragraphs of this  
2           subsection (or paragraph (4), as applicable) ex-  
3           ceeds the amount of payments provided under  
4           the contract. Such supplemental payment shall  
5           be made pursuant to a payment schedule  
6           agreed to by the State and the clinic, but in no  
7           case less frequently than every 4 months.

8           “(B) OPTION TO DELEGATE PPS PAYMENT  
9           TO MANAGED CARE ENTITIES THROUGH AN AL-  
10          TERNATIVE PAYMENT METHODOLOGY.—Not-  
11          withstanding subparagraph (A), nothing in this  
12          subsection shall be interpreted to preclude a  
13          State from amending its State plan to provide  
14          for an alternative payment methodology under  
15          paragraph (4), under which the State may dele-  
16          gate to a managed care entity, as defined in  
17          section 1932(a)(1)(B), the responsibility to pay  
18          the clinic at least the rate determined under the  
19          preceding subparagraphs (or paragraph (4), as  
20          applicable), provided that the State shall meet  
21          all requirements described in paragraph (4),  
22          and shall use oversight processes to ensure that  
23          each clinic is paid at least the amounts required  
24          under the preceding paragraphs of this sub-  
25          section.

1           “(4) ALTERNATIVE PAYMENT METHODOLO-  
2           GIES.—Notwithstanding any other provision of this  
3           subsection, the State plan may provide for payment  
4           in any fiscal year to a certified community behav-  
5           ioral health clinic for services described in paragraph  
6           (31) of section 1905(a) in an amount which is deter-  
7           mined under an alternative payment methodology  
8           that—

9                   “(A) is agreed to by the State and the clin-  
10           ic; and

11                   “(B) results in payment to the clinic of an  
12           amount which is not less than the amount oth-  
13           erwise required to be paid to the clinic under  
14           this subsection.”.

15           (b) REQUIREMENT TO USE PROSPECTIVE PAYMENT  
16           SYSTEM UNDER BENCHMARK OR BENCHMARK EQUIVA-  
17           LENT COVERAGE.—Section 1937(b)(4) of the Social Secu-  
18           rity Act (42 U.S.C. 1396u–7(b)(4)) is amended—

19                   (1) in the paragraph heading, by inserting “;  
20           COVERAGE OF CCBHC SERVICES” after “FQHC  
21           SERVICES”;

22                   (2) by redesignating subparagraphs (A) and  
23           (B) as clauses (i) and (ii), respectively, and adjust-  
24           ing the margins accordingly;

1 (3) by striking “this section, a State” and in-  
2 serting: “this section—

3 “(A) a State”; and

4 (4) by adding at the end the following new sub-  
5 paragraph:

6 “(B) in the case that a State provides for  
7 medical assistance for certified community be-  
8 havioral health clinic services (as defined in sec-  
9 tion 1905(jj)(1)) through enrollment of an indi-  
10 vidual with benchmark coverage or benchmark  
11 equivalent coverage under this section, payment  
12 for such services shall be made in accordance  
13 with the requirements of section 1902(yy).”.

14 **SEC. 103. EXPANDING CCBHC SERVICES WITHIN MEDICAID**  
15 **DEMONSTRATION PROGRAM.**

16 (a) **ADDITIONAL SERVICES WITHIN DEMONSTRATION**  
17 **PROGRAM.**—Section 223 of the Protecting Access to Medi-  
18 care Act of 2014 (42 U.S.C. 1396a note) is amended—

19 (1) in section (a)(2)(D)—

20 (A) by redesignating clauses (i) through  
21 (ix) as subclauses (I) through (IX), respectively,  
22 and adjusting the margins accordingly;

23 (B) by striking “Provision” and all that  
24 follows through “relationships with other pro-  
25 viders:” and inserting:

1                   “(i) IN GENERAL.—Provision (in a  
2                   manner reflecting person-centered care)  
3                   of—

4                               “(I) the required CCBHC serv-  
5                               ices (as defined in clause (ii)); and

6                               “(II) the additional CCBHC  
7                               services (as defined in clause (iii)).

8                   “(ii) REQUIRED CCBHC SERVICES.—  
9                   For purposes of clause (i), the term ‘re-  
10                   quired CCBHC services’ means any of the  
11                   following services which, if not available di-  
12                   rectly through the certified community be-  
13                   havioral health clinic, are provided or re-  
14                   ferred through formal relationships with  
15                   other providers.”; and

16                   (C) by adding at the end the following new  
17                   clause:

18                               “(iii) ADDITIONAL CCBHC SERV-  
19                               ICES.—For purposes of clause (i), the term  
20                               ‘additional CCBHC services’ means serv-  
21                               ices available directly through the certified  
22                               community behavioral health clinic—

23                               “(I) that are not required  
24                               CCBHC services (as defined in clause  
25                               (ii));

1                   “(II) that are appropriate to  
2                   meet the health needs of the popu-  
3                   lation served; and

4                   “(III) which may include any of  
5                   the primary health services defined in  
6                   section 330 (b)(1)(A) of the Public  
7                   Health Service Act.”;

8                   (2) in subsection (b)(1), by striking “mental  
9                   health services” and inserting “certified community  
10                  behavioral health clinic services”; and

11                  (3) in subsection (e)—

12                   (A) by redesignating paragraphs (1)  
13                   through (4) as paragraphs (2) through (5), re-  
14                   spectively; and

15                   (B) by inserting before paragraph (2), as  
16                   so redesignated, the following new paragraph:

17                   “(1) CERTIFIED COMMUNITY BEHAVIORAL  
18                   HEALTH CLINIC SERVICES.—The term ‘certified  
19                   community behavioral health clinic services’ means—

20                   “(A) required CCBHC services (as defined  
21                   in subsection (a)(2)(D)(ii)); and

22                   “(B) additional CCBHC services (as de-  
23                   fined in subsection (a)(2)(D)(iii)), to the extent  
24                   that a certified community behavioral health  
25                   clinic elects to furnish any such services.”.

1 (b) EFFECTIVE DATE.—The amendments made by  
2 this section shall apply with respect to services furnished  
3 on or after October 1, 2026.

4 **SEC. 104. EXPANDING SCOPE OF CCBHC SERVICES COV-**  
5 **ERED UNDER THE MEDICAID PROGRAM.**

6 (a) ADDITIONAL SERVICES WITHIN CCBHC BEN-  
7 EFIT.—Section 1905(jj) of the Social Security Act (42  
8 U.S.C. 1396d(jj)) is amended—

9 (1) in the subsection heading, by inserting “;  
10 CERTIFIED COMMUNITY BEHAVIORAL HEALTH  
11 CLINIC” after “CERTIFIED COMMUNITY BEHAV-  
12 IORAL HEALTH CLINIC SERVICES”;

13 (2) in paragraph (1)—

14 (A) in the paragraph heading, by striking  
15 “IN GENERAL” and inserting “CERTIFIED COM-  
16 MUNITY BEHAVIORAL HEALTH CLINIC SERV-  
17 ICES”;

18 (B) by redesignating subparagraphs (A)  
19 through (I) as clauses (i) through (ix), respec-  
20 tively, and adjusting the margins accordingly;

21 (C) by striking “The term” and all that  
22 follows through “relationships with other pro-  
23 viders:” and inserting:

1           “(A) IN GENERAL.—The term ‘certified  
2 community behavioral health clinic services’  
3 means—

4           “(i) the required CCBHC services (as  
5 defined in subparagraph (B)); and

6           “(ii) the additional CCBHC services  
7 (as defined in subparagraph (C)).

8           “(B) REQUIRED CCBHC SERVICES.—For  
9 purposes of subparagraph (A), the term ‘re-  
10 quired CCBHC services’ means any of the fol-  
11 lowing services when furnished to an individual  
12 as a patient of a certified community behavioral  
13 health clinic (as defined in paragraph (2)), in a  
14 manner reflecting person-centered care and  
15 which, if not available directly through a cer-  
16 tified community behavioral health clinic, may  
17 be provided or referred through formal relation-  
18 ships with other providers.”; and

19           (D) by adding at the end the following new  
20 subparagraph:

21           “(C) ADDITIONAL CCBHC SERVICES.—For  
22 purposes of subparagraph (A), the term ‘addi-  
23 tional CCBHC services’ means services fur-  
24 nished to an individual as a patient of a cer-  
25 tified community behavioral health clinic (as de-

1           fined in paragraph (2)), in a manner reflecting  
2           person-centered care—

3                   “(i) that are not required CCBHC  
4                   services under subparagraph (B);

5                   “(ii) that are appropriate to meet the  
6                   health needs of the population served; and

7                   “(iii) which may include any of the  
8                   primary health services defined in section  
9                   330(b)(1) of the Public Health Service  
10                  Act.”.

11          (b) EFFECTIVE DATE.—The amendments made by  
12 this section shall apply with respect to services furnished  
13 on or after October 1, 2026.

14 **TITLE II—COVERAGE OF CER-**  
15 **TIFIED COMMUNITY BEHAV-**  
16 **IORAL HEALTH CLINIC SERV-**  
17 **ICES UNDER THE MEDICARE**  
18 **PROGRAM**

19 **SEC. 201. COVERAGE OF CERTIFIED COMMUNITY BEHAV-**  
20 **IORAL HEALTH CLINIC SERVICES UNDER THE**  
21 **MEDICARE PROGRAM.**

22          (a) COVERAGE.—Section 1861(s)(2) of the Social Se-  
23 curity Act (42 U.S.C. 1395x(s)(2)) is amended—

24                  (1) in subparagraph (JJ), by adding “and” at  
25                  the end; and

1 (2) by adding at the end the following new sub-  
2 paragraph:

3 “(KK) certified community behavioral health  
4 clinic services (as defined in subsection (aa)(8)) fur-  
5 nished on or after January 1, 2027.”.

6 (b) DEFINITIONS.—Section 1861(aa) of the Social  
7 Security Act (42 U.S.C. 1395x) is amended—

8 (1) in the heading, by striking “AND FEDER-  
9 ALLY QUALIFIED HEALTH CENTER SERVICES” and  
10 inserting “, FEDERALLY QUALIFIED HEALTH CEN-  
11 TER SERVICES, AND CERTIFIED COMMUNITY BE-  
12 HAVIORAL HEALTH CLINIC SERVICES”; and

13 (2) by adding at the end the following new  
14 paragraph:

15 “(8) The terms ‘certified community behavioral  
16 health clinic services’ and ‘certified community behavioral  
17 health clinic’ have the meaning given each such term in  
18 section 1905(jj).”.

19 **SEC. 202. PAYMENT FOR CERTIFIED COMMUNITY BEHAV-**  
20 **IORAL HEALTH CLINIC SERVICES UNDER THE**  
21 **MEDICARE PROGRAM.**

22 (a) IN GENERAL.—Section 1833(a)(1) of the Social  
23 Security Act (42 U.S.C. 1395l(a)(1)) is amended—

24 (1) by striking “and (HH)” and inserting  
25 “(HH)”; and

1           (2) by inserting before the semicolon at the end  
2           the following: “, and (II) with respect to certified  
3           community behavioral health clinic services (as de-  
4           fined in section 1861(aa)(8)), the amounts paid shall  
5           be equal to 80 percent of the lesser of the actual  
6           charge or the amount determined under section  
7           1834(aa)”.

8           (b) DEVELOPMENT AND IMPLEMENTATION OF PRO-  
9           SPECTIVE PAYMENT SYSTEM.—Section 1834 of the Social  
10          Security Act (42 U.S.C. 1395m) is amended by adding  
11          at the end the following new subsection:

12          “(aa) DEVELOPMENT AND IMPLEMENTATION OF  
13          PROSPECTIVE PAYMENT SYSTEM FOR CERTIFIED COM-  
14          MUNITY BEHAVIORAL HEALTH CLINICS.—

15                 “(1) IN GENERAL.—The Secretary shall develop  
16          a prospective payment system for payment to cer-  
17          tified community behavioral health clinic services (as  
18          defined in section 1861(aa)(8)) furnished by cer-  
19          tified community behavioral health clinics (as de-  
20          fined in such section) under this title. In estab-  
21          lishing such system, the Secretary—

22                         “(A) shall take into account the type, in-  
23                         tensity, and duration of services furnished by  
24                         certified community behavioral health clinics;  
25                         and

1           “(B) may incorporate such adjustments,  
2           including geographic adjustments, as the Sec-  
3           retary determines appropriate.

4           “(2) UNIT OF PAYMENT.—In establishing a  
5           prospective payment amount under the system under  
6           this subsection, the Secretary shall consider an ap-  
7           propriate unit of service and a general system design  
8           that provides for continued access to quality serv-  
9           ices.

10          “(3) PAYMENT BASIS.—Under the system  
11          under this subsection, the Secretary shall provide for  
12          computation of a prospective payment amount for  
13          services furnished during a year as follows:

14                 “(A) For 2027, such amount shall be  
15                 based on the average costs of such clinics which  
16                 are reasonable (as determined without the ap-  
17                 plication of a per visit payment limit or produc-  
18                 tivity screen and prior to the application of sec-  
19                 tion 1866(a)(2)(A)(ii)) and related to the fur-  
20                 nishing of the services described in section  
21                 1905(jj)(1)(B), as determined on the basis of  
22                 the most current audited cost report data for 2  
23                 consecutive fiscal years available to the Sec-  
24                 retary. In the absence of complete actual cost  
25                 data representing the provision of such services

1           during the relevant fiscal years, certified com-  
2           munity behavioral health clinics may, at the  
3           Secretary's discretion, submit estimated or pro-  
4           jected data relating to specific services.

5           “(B) For 2028, such amount shall be  
6           equal to the amount determined under subpara-  
7           graph (A), increased by the percentage increase  
8           in the MEI (as defined in section 1842(i)(3))  
9           for the year involved.

10          “(C) For 2029 and each subsequent year,  
11          such amount shall be equal to the amount de-  
12          termined under this paragraph for the pre-  
13          ceding year, increased by the percentage in-  
14          crease in a market basket of certified commu-  
15          nity behavioral health clinic services designed  
16          by the Secretary (or, if such an index is not  
17          available, by the percentage increase in the fed-  
18          erally-qualified health center market basket (as  
19          described in section 1834(o)(2)(B)(ii)(II))) for  
20          the year involved.

21          “(4) PERIODIC REEVALUATION OF RATES.—  
22          The Secretary may, from time to time, adjust the  
23          amounts that would otherwise be applicable under  
24          paragraph (3) for a year by a percentage determined  
25          appropriate by the Secretary to reflect such factors

1 as changes in the intensity of services furnished  
2 within a unit of service, the average cost of pro-  
3 viding care per unit of service, and other factors  
4 that the Secretary considers to be relevant. Such ad-  
5 justment shall be made before the update under  
6 paragraph (2)(C) has been applied for the year.”.

7 **SEC. 203. NON-APPLICATION OF MEDICARE PART B DE-**  
8 **DUCTIBLE FOR CCBHC SERVICES.**

9 Section 1833(b)(4) of the Social Security Act (42  
10 U.S.C. 1395l(b)(4)) is amended by inserting “or certified  
11 community behavioral health clinic services” after “such  
12 deductible shall not apply to Federally qualified health  
13 center services”.

14 **SEC. 204. RIGHT TO SEEK REVIEW OF COST REPORTS FROM**  
15 **PROVIDER REIMBURSEMENT REVIEW BOARD.**

16 Section 1878(j) of the Social Security Act (42 U.S.C.  
17 1395oo(j)) is amended by striking “and a Federally quali-  
18 fied health center” and inserting “, a Federally qualified  
19 health center, and a certified community behavioral health  
20 clinic”.

21 **SEC. 205. EXTENDING SAFE HARBOR UNDER ANTI-KICK-**  
22 **BACK STATUTE TO WAIVERS OF CCBHC COIN-**  
23 **SURANCE.**

24 Section 1128B(b)(3)(D) of the Social Security Act  
25 (42 U.S.C. 1320a-7b(b)(3)(D)) is amended by inserting

1 “or a certified community behavioral health clinic” after  
2 “Federally qualified health care center”.

3 **SEC. 206. EFFECTIVE DATE.**

4 The amendments made by this title shall apply with  
5 respect to services furnished on or after January 1, 2026.

6 **TITLE III—COMMUNITY BEHAV-**  
7 **IORAL HEALTH CLINIC**  
8 **GRANTS**

9 **SEC. 301. OPERATING GRANTS, TECHNICAL ASSISTANCE,**  
10 **DATA INFRASTRUCTURE, AND ACCREDITA-**  
11 **TION FOR COMMUNITY BEHAVIORAL HEALTH**  
12 **CLINICS.**

13 Part D of title III of the Public Health Service Act  
14 (42 U.S.C. 254b et seq.) is amended by adding at the end  
15 the following new subpart:

16 **“Subpart XIII—Community Behavioral Health**  
17 **Clinics**

18 **“SEC. 340J. DEFINITIONS.**

19 “In this subpart:

20 “(1) **CERTIFIED COMMUNITY BEHAVIORAL**  
21 **HEALTH CLINIC.**—The term ‘certified community be-  
22 havioral health clinic’ has the meaning given such  
23 term in section 1905(jj)(2) of the Social Security  
24 Act.

1           “(2) CERTIFIED COMMUNITY BEHAVIORAL  
2 HEALTH CLINIC SERVICES.—The term ‘certified  
3 community behavioral health clinic services’ has the  
4 meaning given such term in section 1905(jj)(1) of  
5 the Social Security Act.

6 **“SEC. 340J-1. OPERATING GRANTS FOR COMMUNITY BE-**  
7 **HAVORAL HEALTH CLINICS.**

8           “(a) IN GENERAL.—The Secretary shall establish a  
9 grant program under which the Secretary shall award  
10 grants to eligible community behavioral health clinics to  
11 provide (in a manner reflecting person-centered care) cer-  
12 tified community behavioral health clinic services that are  
13 required CCBHC services (as defined in section  
14 1905(jj)(1)(B) of the Social Security Act).

15           “(b) ELIGIBILITY; SELECTION.—

16           “(1) ELIGIBILITY.—An entity is eligible to re-  
17 ceive a grant under subsection (a) if such entity is—

18           “(A) a certified community behavioral  
19 health clinic; or

20           “(B) a community behavioral health clinic  
21 that indicates in the grant application that the  
22 clinic will use the grant funds to meet the cri-  
23 teria established by the Secretary under section  
24 223(a) of the Protecting Access to Medicare

1 Act of 2014 as of March 2023, and any subse-  
2 quent updates to such criteria.

3 “(2) SELECTION.—In selecting eligible entities  
4 to receive a grant under subsection (a), the Sec-  
5 retary—

6 “(A) may elect to impose as a condition for  
7 the receipt of a grant under this section that  
8 the entity be accredited, per section 340J–4(a);

9 “(B) may award a grant to an entity de-  
10 scribed in paragraph (1)(B) that specializes in  
11 providing services to children, youth, or vet-  
12 erans, if such entity demonstrates to the satis-  
13 faction of the Secretary that the entity can en-  
14 sure access to care for all individuals in the rel-  
15 evant community served by the entity through  
16 referral or other formal arrangements with  
17 other providers of services; and

18 “(C) may establish additional conditions  
19 for the receipt of a grant under this section  
20 to—

21 “(i) ensure improved geographic dis-  
22 tribution of community behavioral health  
23 clinics;

1                   “(ii) prioritize the awarding of grants  
2                   to eligible entities that serve communities  
3                   with elevated behavioral health needs;

4                   “(iii) prioritize eligible entities that  
5                   are prepared to offer all required CCBHC  
6                   services (as defined in section  
7                   1905(jj)(1)(B) of the Social Security Act);  
8                   and

9                   “(iv) ensure consistency in planning  
10                  with State CCBHC programs.

11               “(c) USE OF FUNDS.—An eligible entity that receives  
12 a grant under subsection (a)—

13               “(1) shall use the grant funds—

14               “(A) to provide certified community behav-  
15               ioral health clinic services; and

16               “(B) in the case of an entity described in  
17               subparagraph (B) of subsection (b)(1), to meet  
18               the criteria described in such subparagraph;  
19               and

20               “(2) may use the grant funds—

21               “(A) to carry out other activities that—

22               “(i) reduce costs associated with the  
23               provision of certified community behavioral  
24               health clinic services;

1           “(ii) improve access to, and avail-  
2           ability of, certified community behavioral  
3           health clinic services provided to individ-  
4           uals in the relevant community served by  
5           the community behavioral health clinic;

6           “(iii) enhance the quality and coordi-  
7           nation of certified community behavioral  
8           health clinic services; or

9           “(iv) otherwise improve the health  
10          status of communities; and

11         “(B) to pay for—

12           “(i) the costs of acquiring and leasing  
13           buildings and equipment (including the  
14           costs of amortizing the principal of, and  
15           paying interest on, loans);

16           “(ii) costs relating to the purchase or  
17           lease of equipment, including data and in-  
18           formation systems and behavioral health  
19           information technology to facilitate data  
20           reporting and other purposes;

21           “(iii) the costs of in-service staff  
22           training and other operational or infra-  
23           structure costs as the Secretary determines  
24           appropriate; or

1                   “(iv) costs associated with expanding  
2                   and modernizing existing buildings or con-  
3                   structing new buildings (including the  
4                   costs of amortizing the principal of, and  
5                   paying the interest on, loans), if such costs  
6                   are specifically allowed for in the grant op-  
7                   portunity published by the Secretary.

8           “(d) USE OF NONGRANT FUNDS.—Amounts de-  
9           scribed in subsection (g)(1)(B), including any such funds  
10          in excess of those estimated under such subsection, shall  
11          be used as permitted under this section, and may be used  
12          for such other purposes as are not specifically prohibited  
13          under this section if such use furthers the objectives of  
14          the grant.

15          “(e) TERM.—Grants awarded under subsection (a)  
16          shall be for a period of not more than 5 years.

17          “(f) CONDITION ON RECEIPT OF FUNDS.—The Sec-  
18          retary may not award a grant to an eligible entity under  
19          subsection (a) unless the entity provides assurances to the  
20          Secretary that, not later than 120 days after receiving no-  
21          tice that the entity has been selected under subsection  
22          (b)(2) to receive a grant, the entity will submit to the Sec-  
23          retary for approval an implementation plan that describes  
24          how the entity will—

1           “(1) provide certified community behavioral  
2 health clinic services; and

3           “(2) in the case of an entity described in sub-  
4 paragraph (B) of subsection (b)(1), to meet the cri-  
5 teria described in such subparagraph.

6           “(g) AMOUNT OF GRANT.—

7           “(1) IN GENERAL.—Subject to paragraph (2),  
8 in determining the amount of a grant made in any  
9 fiscal year to an eligible entity under subsection (a),  
10 the Secretary shall take into account information  
11 provided by the entity with respect to the following:

12           “(A) The total State, local, and other oper-  
13 ational funding provided to the entity for such  
14 fiscal year.

15           “(B) The fees, premiums, and third-party  
16 reimbursements that the entity reasonably ex-  
17 pects to receive for items and services furnished  
18 during such fiscal year.

19           “(C) The costs to the entity of meeting the  
20 purposes and requirements of the grant pro-  
21 gram under this section during such fiscal year,  
22 as estimated by the Secretary based upon the  
23 anticipated costs to the entity of—

24           “(i) providing certified community be-  
25 havioral health clinic services, including the

1           anticipated costs of providing any indi-  
2           vidual certified community behavioral  
3           health service that the entity does not have  
4           experience providing at the time of submit-  
5           ting an application for such grant; and

6                       “(ii) in the case of an entity described  
7           in subparagraph (B) of subsection (b)(1),  
8           meeting the criteria described in such sub-  
9           paragraph.

10           “(2) PAYMENTS.—The Secretary may award  
11           grants under subsection (a) in such form and man-  
12           ner as the Secretary determines appropriate (includ-  
13           ing by making grant amounts available in advance  
14           or through reimbursement, and including by making  
15           such amounts available in installments), and may  
16           adjust grant amounts to account for overpayments  
17           or underpayments.

18           “(h) USE OF ACCREDITATION IN MONITORING  
19           GRANT PROGRESS.—Regardless of whether the Secretary  
20           elects under subsection (b) to use accreditation under sec-  
21           tion 340J-4(a) as a condition for the award of a grant  
22           under subsection (a), the Secretary may take such accredi-  
23           tation into account in determining whether an entity re-  
24           ceiving such a grant is providing the services described

1 in subsection (a) and, if applicable, meeting such criteria  
2 as are described in subsection (b)(2).

3 “(i) AUTHORIZATION OF APPROPRIATIONS.—

4 “(1) IN GENERAL.—There is authorized to be  
5 appropriated to carry out this section \$552,500,000  
6 for each of fiscal years 2026 through 2030.

7 “(2) MAINTENANCE OF FUNDING.—The  
8 amount made available under paragraph (1) shall  
9 supplement (and not supplant) any other Federal  
10 funding made available for certified community be-  
11 havioral health clinics.

12 “(j) GUIDANCE FOR CLINICS SERVING SPECIALIZED  
13 POPULATIONS.—Not later than 1 year after the date of  
14 enactment of this section, the Secretary shall publish guid-  
15 ance clarifying how certified community behavioral health  
16 clinics that focus on distinct populations, such as children,  
17 youth, or veterans, may meet any relevant requirement to  
18 furnish appropriate treatment to all individuals. Such  
19 guidance shall not affect such clinics’ qualification to par-  
20 ticipate in the demonstration program under section  
21 223(d) of the Protecting Access to Medicare Act of 2014  
22 or to furnish the services described under section  
23 1905(a)(31) of the Social Security Act.

1 **“SEC. 340J-2. TECHNICAL ASSISTANCE.**

2 “(a) IN GENERAL.—Not later than 180 days after  
3 the date of enactment of the Ensuring Excellence in Men-  
4 tal Health Act, the Secretary shall establish a program  
5 or programs through which the Secretary shall provide (ei-  
6 ther through the Department of Health and Human Serv-  
7 ices or by grant or contract) technical assistance, and such  
8 other assistance as the Secretary determines appropriate,  
9 to any of the following:

10 “(1) Entities receiving a grant under section  
11 340J-1.

12 “(2) Entities participating in a demonstration  
13 program under section 223(d) of the Protecting Ac-  
14 cess to Medicare Act of 2014.

15 “(3) Certified community behavioral health clin-  
16 ics (as defined in sections 1861(aa)(8) and  
17 1905(jj)(2) of the Social Security Act) furnishing  
18 services under title XVIII or title XIX of such Act.

19 “(4) Health or social service provider organiza-  
20 tions pursuing or considering certified community  
21 behavioral health clinic status or partnering with  
22 certified community behavioral health clinics.

23 “(5) States and territories, for the purpose of  
24 assisting in the consideration of demonstration pro-  
25 grams carried out under section 223(d) of the Pro-  
26 tecting Access to Medicare Act of 2014, the plan-

1       ning and development of new State certified commu-  
2       nity behavioral health clinic programs, or the ongo-  
3       ing implementation and improvement of established  
4       State certified community behavioral health clinic  
5       programs.

6               “(6) Other stakeholders, for the purpose of fa-  
7       cilitating the successful implementation of the cer-  
8       tified community behavioral health clinic model.

9               “(b) INCLUSIONS.—Assistance provided by the Sec-  
10      retary under subsection (a) may include technical and  
11      nonfinancial assistance, including, but not limited to—

12               “(1) fiscal and program management assist-  
13      ance;

14               “(2) operational and administrative support;  
15      and

16               “(3) the provision of information to the entities  
17      about the variety of resources available under this  
18      part and how those resources can be best used to  
19      meet the health and behavioral health needs of the  
20      communities served by the entities.

21               “(c) AUTHORIZATION OF APPROPRIATIONS.—There  
22      is authorized to be appropriated to carry out this section  
23      \$8,000,000 for each of fiscal years 2026 through 2030.

1 **“SEC. 340J-3. DATA INFRASTRUCTURE FOR COMMUNITY**  
2 **BEHAVIORAL HEALTH CLINIC REPORTING.**

3 “(a) IN GENERAL.—Not later than 180 days after  
4 the date of enactment of the Ensuring Excellence in Men-  
5 tal Health Act, the Secretary shall establish a system  
6 under which the Secretary shall collect and analyze data  
7 on community behavioral health clinics.

8 “(b) SCOPE OF DATA COLLECTION.—The system es-  
9 tablished under subsection (a) shall be used by the Sec-  
10 retary to collect and analyze data from—

11 “(1) entities that receive a grant under section  
12 340J-1; and

13 “(2) certified community behavioral health clin-  
14 ics (as defined in sections 1861(aa)(8) and  
15 1905(jj)(2) of the Social Security Act) furnishing  
16 services under title XVIII or title XIX of such Act.

17 “(c) AUTHORIZATION OF APPROPRIATIONS.—There  
18 is authorized to be appropriated to carry out this section  
19 \$51,000,000 for each of fiscal years 2026 through 2030.

20 **“SEC. 340J-4. CERTIFIED COMMUNITY BEHAVIORAL**  
21 **HEALTH CLINIC ACCREDITATION.**

22 “(a) ACCREDITATION STANDARDS.—A clinic is ac-  
23 credited as a certified community behavioral health clinic  
24 under this section if the clinic—

25 “(1) is accredited by an accreditation body ap-  
26 proved by the Secretary under subsection (b); and

1           “(2) authorizes the accreditation body to sub-  
2           mit to the Secretary (or such agency as the Sec-  
3           retary may designate) such records or other infor-  
4           mation as the Secretary may require.

5           “(b) APPROVAL OF ACCREDITATION BODIES.—The  
6           Secretary may approve a private nonprofit organization to  
7           be an accreditation body for the accreditation of certified  
8           community behavioral health clinics under subsection (a)  
9           if—

10           “(1) the accreditation body agrees to inspect  
11           the clinic, using inspectors qualified to evaluate  
12           quality of care in a behavioral health service setting,  
13           with such frequency the Secretary determines appro-  
14           priate;

15           “(2) the Secretary determines that the stand-  
16           ards applied by the accreditation body in deter-  
17           mining whether or not to accredit a clinic correspond  
18           to (and are not less restrictive than) the criteria de-  
19           scribed in section 340J–1(b)(1)(B);

20           “(3) the accreditation body has made adequate  
21           assurances that the standards of the accreditation  
22           body continue to be met by each clinic that it ac-  
23           credited;

24           “(4) the accreditation body agrees that, for the  
25           3-year period following accreditation of a clinic, in

1 the case that the accreditation body suspends, with-  
2 draws, or revokes such accreditation, denies an ap-  
3 plication to renew such accreditation, or takes any  
4 other disciplinary action with respect to such clinic,  
5 the accreditation body shall submit to the Secretary  
6 the name of such clinic not later than 30 days after  
7 such action is taken;

8 “(5) the accreditation body agrees that, in the  
9 case that its approval is withdrawn by the Secretary,  
10 the body will notify each clinic accredited by the  
11 body of the withdrawal within 10 days of the with-  
12 drawal; and

13 “(6) the accreditation body complies with such  
14 other requirements as the Secretary determines ap-  
15 propriate.

16 “(c) OVERSIGHT OF ACCREDITATION BODIES.—The  
17 Secretary may provide ongoing oversight of accrediting  
18 bodies approved under subsection (b). Such ongoing over-  
19 sight may include the following actions:

20 “(1) Providing continual oversight and review  
21 of approved accreditation processes through regular  
22 communication with such bodies.

23 “(2) Providing additional review of individual  
24 certified community behavioral health clinic accredi-  
25 tations to assure alignment with the criteria estab-

1 lished by the Secretary under section 223(a) of the  
2 Protecting Access to Medicare Act of 2014 and, in  
3 cases where potential issues are identified with indi-  
4 vidual certified community behavioral health clinic  
5 accreditations, to provide review of such issues.

6 “(3) Mediating disputes between providers seek-  
7 ing certified community behavioral health clinic ac-  
8 creditation and approved accreditation bodies.

9 “(4) Providing ongoing support and coordina-  
10 tion across approved accreditation bodies.

11 “(5) In cases where an approved accreditation  
12 body is found to not provide accreditation in align-  
13 ment with the criteria established by the Secretary  
14 under section 223(a) of the Protecting Access to  
15 Medicare Act of 2014, developing a process to termi-  
16 nate the approval provided under subsection (b) with  
17 respect to such body.

18 “(6) Periodically reviewing accreditation body  
19 processes and renewing the approval provided under  
20 subsection (b) with respect to such bodies.

21 “(7) Such other activities as the Secretary de-  
22 termines necessary for the oversight of accreditation  
23 bodies approved under subsection (b).”.

1 **TITLE IV—LIABILITY PROTEC-**  
2 **TION FOR CERTIFIED COM-**  
3 **MUNITY BEHAVIORAL**  
4 **HEALTH CLINIC CLINICIANS**

5 **SEC. 401. CONFERRING PROTECTION UNDER THE FEDERAL**  
6 **TORT CLAIMS ACT TO CLINICIANS IN CER-**  
7 **TIFIED COMMUNITY BEHAVIORAL HEALTH**  
8 **CLINICS.**

9 Section 224(g)(4) of the Public Health Service Act  
10 (42 U.S.C. 233(g)(4)) is amended by inserting “or a cer-  
11 tified community behavioral health clinic (as defined in  
12 section 1905(jj)(2) of the Social Security Act)” before the  
13 period at the end.