

## **LEGISLATION OF POTENTIAL IMPORT TO NACBHDD**

### **BEHAVIORAL HEALTH SERVICES**

- **Behavioral Health Coverage Transparency Act (S. 2647; HR 4276).** Introduced by Senator Elizabeth Warren (D-MA) and Rep. Joe Kennedy III (D-MA) and originally cosponsored by 12 Senators and 8 Representatives, all Democrats. *Measure would hold insurers accountable for providing adequate mental health benefits (parity) and increase transparency for consumers seeking coverage for mental and substance use disorders.*
- **Medicare for All Act of 2017 (S. 1804).** Introduced by Senator Bernie Sanders (I-VT). *Measure would establish a universal Medicare program, including transitional Medicare buy-in option and transitional public option. Premium assistance/cost-sharing subsidies would be available. Establishes a Universal Medicare Trust Fund using funds from Medicare, Medicaid, FEHBP and TRICARE. Individuals must be covered without regard to pre-existing condition or nature of medical issue (e.g., parity for behavioral health) Coverage includes, among other provisions, preventive care and all necessary inpatient and outpatient care to prevent, diagnose, treat and maintain recovery from behavioral disorders.*
- **Mental Health and Substance Abuse Treatment Act of 2017 (HR 1253).** Introduced by Rep. Derek Kilmer (D-WA) *The measure would allow HHS to make loans/loan guarantees for construction or renovation of psychiatric or substance abuse treatment facilities, and to refinance such loans and loan guarantees. Revenues from the loans/loan guarantees in excess of program costs would be placed in a Mental Health and Substance Use Treatment Trust Fund and be made available for block grants for community mental health services.*
- **Trauma-informed Care for Children and Families Act of 2017 (S. 774).** Introduced by Senator Heidi Heitkamp (D-ND) *Measure promotes development, testing, dissemination, and application of best practices in trauma-informed identification, referral, care and support for trauma-exposed children and families through a task force, funding through the NCTSI, and specific responsibility for dissemination of identified best practices by a range of HHS agencies and offices.*
- **CHIP Mental Health Parity Act (S. 22543; HR 3192).** Introduced by Senator Debbie Stabenow (D-MI) and Rep. Joseph P. Kennedy III (D-MA). *Measure would ensure access to mental health services under the Child Health Insurance Program, including all services “necessary to prevent, diagnose, and treat a broad range of mental health symptoms and disorders, including substance use disorders.”*
- **ACE Kids Act of 2017 (S. 428, HR 3325).** Introduced by Senator Chuck Grassley (R-IA) and Rep. Joe Barton (R-TX). *The measure amends Medicaid to enable, but not require, States to provide coordinated care to children with complex medical conditions through enhanced pediatric health homes using, as necessary, alternative payment mechanisms. Two MACPAC reports to Congress are to be developed—one (within 2 years) making recommendations on the program, the second (in 5 years) on the program’s conduct, recommendations for the future, and potential expansion.*
- **CONNECT for Health Act of 2017 (S. 1016; HR 2556).** Introduced by Senator Brian Schatz (D-HI) and Rep. Diane Black (R-TN). *Measure would amend Medicare to allow ACOs, FQHCs, Native American health service facilities, and rural clinics to engage in and be reimbursed for telehealth services, including for stroke, patient monitoring, and expanded mental health care.*
- **Medicaid Bump Act of 2017 (HR 324).** Introduced by Rep. Joseph Kennedy III (D-MA) *Measure would provide a higher federal matching rate for increased expenditures under Medicaid for mental and behavioral health services, and require the Medicaid and Chip Payment and Access Commission to report to Congress annually on Medicaid mental and behavioral health services payment rates and service utilization.*

- **Road to Recovery Act (HR 2938).** Introduced by Rep. Brian Fitzpatrick (R-PA). *Measure would remove barriers to residential substance disorder treatment services provided in specialty substance use treatment facilities under Medicaid and CHIP for individuals under the age of 65.*
- **Family-based Care Services Act (S. 1357, HR 2290).** Introduced by Senator Tammy Baldwin (D-WI) and Rep. Rosa DeLauro (D-CT). *Measure would amend Medicaid to provide a standard definition of therapeutic family care services, to wit: services for children under 21 who, due to mental illness, other emotional or behavioral disorders, medically fragile conditions, or developmental disabilities, need the level of care provided in an institution (including a psychiatric residential treatment facility) or nursing facility, the cost of which could be reimbursed under the State plan but who can be cared for or maintained in a community placement, through a qualified therapeutic family care program.*
- **National Suicide Hotline Improvement Act of 2017 (S. 1015, HR 2345).** Introduced by Senator Orrin Hatch (R-UT) and Rep. Chris Stewart (R-UT). *Measure would require the FCC to coordinate with SAMHSA and the VA to examine: (1) designating a 3-digit dialing code for a national suicide prevention and mental health crisis hotline system; and (2) the effectiveness of the National Suicide Prevention Lifeline (1-800-273-TALK), including how well it addresses the needs of veterans. [NOTE: Passed Senate, Nov. 7, 2017.]*

### **ID/DD-RELATED ISSUES**

- **Ensuring Medicaid Provides Opportunities for Widespread Equity, Resources, and Care Act (EMPOWER Care Act) (S. 2227).** Introduced by Senator Rob Portman (R-OH). *Measure is designed help Medicaid beneficiaries receive long-term services and support in their community or home, and help save taxpayer dollars in the process. It reauthorizes and expands the Money Follows the Person demonstration program from 2018 through 2022. It provides states with funding and flexibility to help Medicaid beneficiaries, particularly elderly and disabled individuals, transition from institutional to home and community-based long-term care settings. A required report to Congress would provide information on the most effective State and program strategies to improve community living for people with different types disabilities, including those with ID/DDs or mental illnesses, including best practices not currently available through Medicaid that improve health outcomes, community supports, housing and person-centered care and planning.*
- **Recognize, Assist, Include, Support, and Engage Family Caregivers Act of 2017" (RAISE Family Caregivers Act) (S. 1028).** Introduced by Senator Susan Collins (R-ME). *Measure directs HHS to develop and make publicly available a National Family Caregiving Strategy that identifies recommended actions for recognizing and supporting family caregivers in a manner that reflects their diverse needs. A Family Caregiving Advisory Council is to be established for a 5-year tenure to advise the Department on recognizing and supporting family caregivers. [Bill has passed Senate]*
- **Family-Based Care Services Act (S. 1357).** Introduced by Senator Tammy Baldwin (D-WI). *Measure would define therapeutic family care services for the purposes of Medicaid. These are services provided for children who have not attained age 21, and who, as a result of mental illness, other emotional or behavioral disorders, medically fragile conditions, or developmental disabilities, need the level of care provided in an institution (including a psychiatric residential treatment facility) or nursing facility the cost of which could be reimbursed under the State plan but who can be cared for or maintained in a community placement. Such therapeutic family care services provide structured daily activities, including the development, improvement, monitoring, and reinforcement of age-appropriate social, communication and behavioral skills, trauma-informed and gender-responsive services, crisis intervention and crisis support services, medication monitoring, counseling, and case management, and may furnish other intensive community services. They also give parents, relatives, or other relevant caregivers in the home specialized training and consultation in the management of children with mental illness, other emotional or behavioral disorders, medically fragile conditions, or developmental disabilities.*

## OPIATE-SPECIFIC

- **Opioid Addiction Prevention Act of 2017 (S. 892; HR 4408).** Introduced by Senator Kirsten Gillibrand (D-NY) and Rep. John Katko (R-NY). *Measure would require clinicians to restrict initial prescribing of opiates for acute pain to 7 days as a condition of registration under the Controlled Substances Act. [A similar bill, with a 10-day limit, HR 3964, was introduced by Rep. Phil Roe (R-TN)].*
- **Youth Opioid Use Treatment Help Act of 2017 (YOUTH Act) (HR 3382).** Introduced by Rep. Katherine Clark (D-MA) *Measure would amend the PHS Act substance abuse program provisions to include young adults as well as children and adolescents, including access to prevention and treatment programs, including MAT.*
- **Safer Prescribing of Controlled Substances Act (S. 1554).** Introduced by Senator Edward Markey (D-MA) *Measure would require health care professionals who want to receive or renew registration for prescribing opiates to complete training regarding best practices for pain management, including alternatives to prescribing controlled substances and other alternative therapies to decrease the use of opioids; responsible prescribing of pain medications; ways to diagnose, treat and manage a substance use disorder, including medications and evidence-based non-pharmacologic therapies; linking patients to evidence-based treatment for substance use disorders; and tools to manage adherence and diversion of controlled substances.*
- **Medicare Beneficiary Opioid Addiction Treatment Act (HR 4097).** Introduced by Rep. Richard Neal (D-MA). *Measure would make methadone available under Medicare Part B.*

## JUSTICE-RELATED ISSUES

- **Law Enforcement Mental Health and Wellness Act of 2017 (S. 867, HR 2228).** Introduced by Senator Joe Donnelly (D-IN) and Rep. Susan Brooks (R-IN) **THIS HAS BEEN SIGNED INTO LAW (PL 115-113).** *Under the new law, grants available under the Community Oriented Policing Services program can be used to establish peer mentoring mental health and wellness pilot programs at the state, local and tribal levels. The Department of Justice (DoJ) will (1) review existing crisis hotlines, recommending improvements; examine the behavioral health needs of federal officers; and assure privacy is maintained; (2) working with HHS, develop materials for mental health providers to educate about the culture of law enforcement and relevant therapies for common problems; and (3) report on DoD and VA mental health practices and services that could be adopted by law enforcement agencies, and on programs to address the mental health and wellbeing of law-enforcement officers.*
- **Veterans Treatment Court Improvement Act of 2017 (S. 946, HR 2147).** Introduced by Senator Jeff Flake (R-AZ) and Rep. Mike Coffman (R-CO). *Measure would require the VA to hire at least 50 Veterans Justice Outreach Specialists to serve at an eligible VA medical center to serve as part of a veterans treatment court justice team or other veteran-focused court. The individuals would work with veterans with active, ongoing, or recent contact with some component of a local criminal justice system.*
- **Keeping Communities Safe through Treatment Act of 2017 (HR 1763).** Introduced by Rep. Sean Maloney (D-NY). *Measure would require the Department of Justice to conduct a pilot program to provide grants to eligible entities to divert individuals with low-level drug offenses to pre-booking diversion programs*

[Note that major legislation in this area by Senator Franken, who has resigned from the Senate, is not included at this time.]

## **SERVICE PROVIDERS**

- **Mental Health Access Improvement Act of 2017 (HR 3032).** Introduced by Rep. John Katko (R-NY). *Measure would provide Medicare coverage for services of mental health counselors and marriage and family therapists within their scopes of practice.*
- **Medicare Mental Health Access Act (S. 448).** Introduced by Senator Sherrod Brown (D-OH). *Measure would expand Medicare's definition of 'physician' to include state-licensed, clinical psychologists for the purpose of providing services within a psychologist's scope of state licensure.*
- **Prescriber Support Act of 2017 (HR 1375).** Introduced by Rep. Katherine Clark (D-MA) *Measure would establish a grant program to states or groups of states through HHS to establish, expand or maintain a comprehensive regional, State, or municipal system to provide training, education, consultation, and other resources to prescribers relating to patient pain, substance misuse, and substance abuse disorders.*
- **Strengthening the Addiction Treatment Workforce Act (S. 1453).** Introduced by Sen. Joe Donnelly (D-IN). *The measure makes certain substance abuse treatment facilities, both inpatient and outpatient that meet specified criteria (e.g., use of MAT, counseling or other evidence-based services) eligible for National Health Service Corps (NHSC) service.*
- **Addiction Treatment Access Improvement Act of 2017 (HR 3692).** Introduced by Rep. Paul Tonko (D-NY). *Measure would amend the Controlled Substances Act to provide greater flexibility in the use of MAT for opioid use disorders by eliminating any time limitations for nurse practitioners, clinical nurse specialists, certified registered nurse anesthetists, certified nurse midwives, and physician assistants to become qualifying MAT practitioners*
- **Ensuring Children's Access to Specialty Care Act of 2017 (S. 989).** Introduced by Senator Roy Blunt [R-MO]. *Measure would add pediatric subspecialties (including child psychiatrists) to the roster of physicians eligible to participate in the NHSC, with relevant loan forgiveness.*

## **VETERANS' ISSUES**

- **Mental Health Care Provider Retention Act of 2017 (HR 1064).** Introduced by Rep. Beto O'Rourke (D-TX) *Measure would ensure that an individual transitioning from treatment through DoD to VA to continue receiving treatment from the DoD mental health care provider.*
- **Community Care Core Competency Act of 2017 (S. 1319).** Introduced by Senator Sherrod Brown (D-OH) *Measure directs the VA to establish a 5-year, no-cost online program of continuing medical education for non-VA medical professionals designed to (1) increase knowledge and recognition of medical conditions common to veterans, and (2) improve outreach to veterans and family members. CME topics include working with veterans and their family members; identifying and treating their common mental and physical conditions; and the VA health care system.*
- **Honor Our Commitment Act of 2017 (S. 699).** Introduced by Senator Christopher Murphy [D-CT]. *Measure would require the VA to provide behavioral health services to individuals discharged/released from active service under other than honorable conditions.*
- **Veteran Urgent Access to Mental Healthcare Act (HR 918).** Introduced by Rep. Mike Coffman (R-CO) *Measure would require the VA to give former members of the Armed Forces an initial mental health assessment and mental health services to treat a member's urgent mental health care needs, including risk of suicide or harming others. Such mental health services can be provided at a non-VA facility if VA care is clinically inadvisable or geographically untenable. [NOTE: Passed House Nov 7, 2017.]*