## 117TH CONGRESS 1ST SESSION

## H. R. 4305

To amend the Community Mental Health Service Block Grant to authorize a set-aside for crisis care services, and for other purposes.

## IN THE HOUSE OF REPRESENTATIVES

July 1, 2021

Mrs. Bustos (for herself, Mr. Fitzpatrick, and Mr. Gottheimer) introduced the following bill; which was referred to the Committee on Energy and Commerce

## A BILL

To amend the Community Mental Health Service Block Grant to authorize a set-aside for crisis care services, 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 "Crisis Care Enhance-
- 5 ment Act".
- 6 SEC. 2. SENSE OF CONGRESS.
- 7 It is the sense of Congress that—
- 8 (1) for patients with mental health issues, co-
- 9 ordination of physical and mental health services

1	and cooperation with law enforcement are essential
2	to ensure timely, appropriate care; and
3	(2) crisis care networks established at State
4	and local levels have saved resources and shown im-
5	proved outcomes for patients in crisis.
6	SEC. 3. EVIDENCE-BASED CRISIS CARE PROGRAMS.
7	(a) In General.—Section 1912(b)(1) of the Public
8	Health Service Act (42 U.S.C. 300x–1(b)(1))—
9	(1) in subparagraph (A)—
10	(A) by redesignating clauses (vi) and (vii)
11	as clauses (vii) and (viii), respectively; and
12	(B) by inserting after clause (v), the fol-
13	lowing:
14	"(vi) include a description of how the
15	State supports evidenced-based programs
16	that address the crisis care needs of indi-
17	viduals with serious mental disorders, and
18	children with serious mental and emotional
19	disturbances, that include at least one of
20	the core components specified in subpara-
21	graph (F);"; and
22	(2) by adding at the end the following:
23	"(F) Core components for crisis care
24	SERVICES.—The core components of a program

1	referred to in subparagraph (A)(vi) include the
2	following:
3	"(i) Crisis call centers.
4	"(ii) 24/7 mobile crisis services.
5	"(iii) Crisis stabilization programs of-
6	fering acute care or sub-acute care in a
7	hospital or appropriately licensed facility,
8	with referrals to inpatient or outpatient
9	care, as determined by the Assistant Sec-
10	retary for Mental Health and Substance
11	Use.".
12	(b) Set-Aside for Evidence-Based Crisis Care
13	SERVICES.—Section 1920 of the Public Health Service
14	Act (42 U.S.C. 300x–9) is amended by adding at the end
15	the following:
16	"(d) Crisis Care.—
17	"(1) IN GENERAL.—Except as provided in para-
18	graph (3), a State shall expend at least 10 percent
19	of the allotment of the State pursuant to a funding
20	agreement under section 1911 for each fiscal year to
21	support programs described in section
22	1912(b)(1)(A)(vi).
23	"(2) State flexibility.—In lieu of expending
24	10 percent of the State's allotment for a fiscal year
25	as required by paragraph (1), a State may elect to

expend not less than 20 percent of such amount by the end of two consecutive fiscal years.

"(3) Funding contingency.—Paragraph (1) shall not apply with respect to a fiscal year unless the amount made available to carry out this section for that fiscal year exceeds the amount appropriated to carry out this section for fiscal year 2021 by at least \$37,257,100.

"(4) WAIVER.—A State may, pursuant to a waiver granted by the Secretary of any requirements under this subpart (including requirements imposed by a funding agreement under section 1911), use funds set aside under this subsection to provide services described in section 1912(b)(1)(A)(vi) to individuals in such State who do not meet the criteria to be considered with serious mental disorders or children with serious mental and emotional disturbances.".