

115TH CONGRESS
2D SESSION

H. R. 5477

To amend title XIX of the Social Security Act to provide for a demonstration project to increase substance use provider capacity under the Medicaid program.

IN THE HOUSE OF REPRESENTATIVES

APRIL 11, 2018

Mr. O'HALLERAN introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend title XIX of the Social Security Act to provide for a demonstration project to increase substance use provider capacity under the Medicaid program.

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 “Rural Development
5 of Opioid Capacity Services Act” or the “Rural DOCS
6 Act”.

1 **SEC. 2. DEMONSTRATION PROJECT TO INCREASE SUB-**
2 **STANCE USE PROVIDER CAPACITY UNDER**
3 **THE MEDICAID PROGRAM.**

4 Section 1903 of the Social Security Act (42 U.S.C.
5 1396b) is amended by adding at the end the following new
6 subsection:

7 “(aa) DEMONSTRATION PROJECT TO INCREASE SUB-
8 STANCE USE PROVIDER CAPACITY.—

9 “(1) IN GENERAL.—Beginning January 1,
10 2019, the Secretary shall conduct a 5-year dem-
11 onstration project under which the Secretary shall
12 provide to an eligible State (as defined in paragraph
13 (2)(A)) payments, in accordance with paragraph (3),
14 with respect to expenditures by such eligible State
15 for incentives, training, and technical assistance for
16 providers under the State plan (or a waiver of such
17 plan) to expand substance use treatment and recov-
18 ery services for individuals enrolled under such State
19 plan (or waiver), including each of the following ac-
20 tivities:

21 “(A) Activities that support the develop-
22 ment of an assessment of the behavioral health
23 treatment needs of the State to determine the
24 extent to which providers are needed (including
25 the types of such providers and geographic area
26 of need) to improve the network of providers

1 that treat substance use disorders under the
2 State plan (or waiver), including:

3 “(i) An estimate of the number of in-
4 dividuals enrolled under the State plan (or
5 a waiver of such plan) who have a sub-
6 stance use disorder.

7 “(ii) Information on the capacity of
8 providers to provide substance use disorder
9 services to individuals enrolled under the
10 State plan (or waiver), including informa-
11 tion on providers who provide such serv-
12 ices.

13 “(iii) Information on the gap in sub-
14 stance use disorder treatment under the
15 State plan (or waiver) based on the infor-
16 mation described in clauses (i) and (ii).

17 “(iv) Projections regarding the extent
18 to which participating under the dem-
19 onstration project would increase the num-
20 ber of providers offering substance use dis-
21 order services under the State plan (or
22 waiver) during the period of the dem-
23 onstration project.

24 “(B) Activities that, taking into account
25 the results of the assessment described in sub-

1 paragraph (A), support the recruitment, train-
2 ing, and provision of technical assistance for
3 current, new, and prospective participating pro-
4 viders under the State plan (or a waiver of such
5 plan) that specialize in substance use disorder
6 treatment and recovery.

7 “(C) Activities that specifically expand, in-
8 cluding through the provision of incentives, the
9 number of providers participating under the
10 State plan (or waiver) that—

11 “(i) are authorized to dispense drugs
12 approved by the Food and Drug Adminis-
13 tration for individuals with a substance use
14 disorder who need withdrawal management
15 or maintenance treatment for such dis-
16 order;

17 “(ii) have in effect a registration or
18 waiver under section 303(g) of the Con-
19 trolled Substances Act for purposes of dis-
20 pensing narcotic drugs to individuals for
21 maintenance treatment or detoxification
22 treatment and are in compliance with any
23 regulation promulgated by the Assistant
24 Secretary for Mental Health and Sub-
25 stance Use for purposes of carrying out

1 the requirements of such section 303(g);
2 and

3 “(iii) are licensed or certified under
4 applicable State law to provide substance
5 use disorder treatment and recovery serv-
6 ices.

7 “(D) Activities that specifically expand, in-
8 cluding through the provision of incentives, the
9 number of providers participating under the
10 State plan (or waiver) that have the qualifica-
11 tions to address the treatment and recovery
12 needs of—

13 “(i) individuals enrolled under the
14 State plan (or a waiver of such plan) who
15 have neonatal abstinence syndrome, in ac-
16 cordance with guidelines issued by the
17 American Academy of Pediatrics and
18 American College of Obstetricians and
19 Gynecologists relating to maternal care
20 and infant care with respect to neonatal
21 abstinence syndrome;

22 “(ii) postpartum women and infants,
23 particularly the concurrent treatment and
24 comprehensive case management of post-

partum women and infants, enrolled under the State plan (or a waiver of such plan);

“(iii) adolescents and young adults between the ages of 12 and 21 enrolled under the State plan (or a waiver of such plan); or

“(iv) American Indian and Alaska Native individuals enrolled under the State plan (or a waiver of such plan).

“(2) ELIGIBLE STATES.—

“(A) DEFINITION.—For purposes of this subsection, the term ‘eligible State’ means a State selected by the Secretary under subparagraph (B).

“(B) SELECTION.—For purposes of this subsection, the Secretary shall select 10 States that meet the criteria for eligibility under subparagraph (C). In selecting such States, the Secretary shall—

“(i) select States in a manner that ensures geographic diversity;

“(ii) give preference to States with a prevalence of substance use disorders (in particular opioid use disorders) that is comparable to or higher than the national

1 average prevalence, as measured by aggre-
2 gate drug overdoses, or any other measure
3 that the Secretary deems appropriate; and

4 “(iii) take into consideration the qual-
5 ity of applications submitted under sub-
6 paragraph (D).

7 “(C) CRITERIA FOR ELIGIBILITY.—To be
8 eligible for selection under subparagraph (B), a
9 State shall—

10 “(i) have a State plan (or waiver of
11 the State plan) approved under this title;
12 and

13 “(ii) submit to the Secretary an appli-
14 cation in accordance with the requirements
15 in subparagraph (D).

16 “(D) APPLICATIONS.—For purposes of this
17 paragraph, a State shall submit to the Sec-
18 retary, at such time and in such form and man-
19 ner as the Secretary requires, an application
20 that includes such information, provisions, and
21 assurances, as the Secretary may require, in ad-
22 dition to the following:

23 “(i) A proposed process for under-
24 taking the assessment described in para-
25 graph (1)(A).

1 “(ii) A proposed process for reviewing
2 reimbursement methodologies and other
3 policies related to substance use disorder
4 services under the State plan (or waiver)
5 that may create barriers to increasing the
6 number of providers delivering substance
7 use disorder services.

8 “(iii) A proposed process for devel-
9 oping a plan that will result in long-term
10 and sustainable provider networks under
11 the State plan (or waiver) that will offer a
12 continuum of care for substance use dis-
13 orders. Such plan shall include the fol-
14 lowing:

15 “(I) Specific activities to increase
16 access to providers (including pro-
17 viders that specialize in providing sub-
18 stance use disorder services, hospitals,
19 health care systems, and Federally
20 qualified health centers) that offer
21 substance use disorder treatment, re-
22 covery, and support services, including
23 short-term detoxification services, out-
24 patient substance use disorder serv-

1 ices, and evidence-based peer recovery
2 services.

3 “(II) Strategies that will
4 incentivize providers described in
5 paragraph (1)(C) to obtain the nec-
6 essary training, education, and sup-
7 port to deliver substance use disorder
8 services in the State.

9 “(III) Milestones and timeliness
10 for implementing activities set forth in
11 the plan.

12 “(IV) Specific measurable targets
13 for increasing the substance use dis-
14 order provider network under the
15 State plan (or a waiver of such plan).

16 “(iv) A proposed process for reporting
17 the information required under paragraph
18 (4)(A), including information demonstrat-
19 ing the progress of the efforts of the State
20 to expand the capacity of providers to de-
21 liver substance use disorder services during
22 the period of the demonstration project
23 under this subsection.

24 “(v) A projected five-year budget for
25 the State to carry out under the dem-

1 onstration project under this subsection
2 the activities set forth in the plan.

3 “(3) PAYMENT.—

4 “(A) IN GENERAL.—For each quarter oc-
5 curring during the period for which the dem-
6 onstration project is conducted, the Secretary
7 shall pay under this subsection, subject to sub-
8 paragraph (B), to each eligible State an amount
9 equal to 90 percent of so much of the sums ex-
10 pended during such quarter as are attributable
11 to activities described in paragraph (1).

12 “(B) NON-DUPLICATION OF PAYMENT.—In
13 the case that payment is made under subpara-
14 graph (A) with respect to expenditures for ac-
15 tivities carried out by an eligible State under
16 the demonstration project under this sub-
17 section, payment may not also be made under
18 subsection (a) with respect to expenditures for
19 the same activities carried out by the eligible
20 State.

21 “(4) REPORTS.—

22 “(A) STATE REPORTS.—A State receiving
23 payments under this subsection shall, for the
24 period of the demonstration project under this
25 subsection, submit to the Secretary a quarterly

1 report, with respect to expenditures for activi-
2 ties for which payment is made to the State
3 under this subsection, on the following:

4 “(i) The specific activities with re-
5 spect to which payment under this sub-
6 section was provided.

7 “(ii) The number of providers that de-
8 livered substance use disorder services in
9 the State under the demonstration project
10 compared to the estimated number of pro-
11 viders that would have otherwise delivered
12 such services in the absence of such dem-
13 onstration project.

14 “(iii) The number of individuals en-
15 rolled under the State plan (or a waiver of
16 such plan) who received substance use dis-
17 order services under the demonstration
18 project compared to the estimated number
19 of such individuals who would have other-
20 wise received such services in the absence
21 of such demonstration project.

22 “(iv) Other matters as determined by
23 the Secretary.

24 “(B) CMS REPORTS.—

1 “(i) INTERIM REPORT.—Not later
2 than October 1, 2022, the Administrator
3 of the Centers for Medicare & Medicaid
4 Services shall submit to Congress an in-
5 terim report on activities carried out under
6 the demonstration project under this sub-
7 section.

8 “(ii) FINAL REPORT.—Not later than
9 October 1, 2024, the Administrator of the
10 Centers for Medicare & Medicaid Services
11 shall submit to Congress a final report on
12 activities carried out under the demonstra-
13 tion project under this subsection.”.

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