

117TH CONGRESS  
1ST SESSION

**S.** \_\_\_\_\_

To amend title XIX of the Social Security Act to encourage State Medicaid programs to provide community-based mobile crisis intervention services, and for other purposes.

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IN THE SENATE OF THE UNITED STATES

\_\_\_\_\_ introduced the following bill; which was read twice  
and referred to the Committee on \_\_\_\_\_

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**A BILL**

To amend title XIX of the Social Security Act to encourage State Medicaid programs to provide community-based mobile crisis intervention 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 Assistance Help-  
5 ing Out On The Streets Act” or the “CAHOOTS Act”.

1 **SEC. 2. ENHANCED FEDERAL MEDICAID SUPPORT FOR**  
2 **COMMUNITY-BASED MOBILE CRISIS INTER-**  
3 **VENTION SERVICES.**

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 “(cc) **COMMUNITY-BASED MOBILE CRISIS INTER-**  
8 **VENTION SERVICES.**—

9 “(1) **IN GENERAL.**—Notwithstanding section  
10 1902(a)(1) (relating to Statewideness), section  
11 1902(a)(10)(B) (relating to comparability), section  
12 1902(a)(23)(A) (relating to freedom of choice of  
13 providers), or section 1902(a)(27) (relating to pro-  
14 vider agreements), a State may provide medical as-  
15 sistance for qualifying community-based mobile cri-  
16 sis intervention services under a State plan amend-  
17 ment or waiver approved under section 1115 or  
18 1915.

19 “(2) **QUALIFYING COMMUNITY-BASED MOBILE**  
20 **CRISIS INTERVENTION SERVICES DEFINED.**—For  
21 purposes of this subsection, the term ‘qualifying  
22 community-based mobile crisis intervention services’  
23 means, with respect to a State, items and services  
24 for which medical assistance is available under the  
25 State plan under this title or a waiver of such plan,  
26 that are—

1           “(A) furnished outside of a hospital or  
2 other facility setting to an individual who is—

3           “(i) entitled to medical assistance  
4 under such plan or waiver; and

5           “(ii) experiencing a mental health or  
6 substance use disorder crisis;

7           “(B) furnished by a multidisciplinary mo-  
8 bile crisis team—

9           “(i) that includes at least 1 behavioral  
10 health care professional who is capable of  
11 conducting an assessment of the individual,  
12 in accordance with the professional’s per-  
13 mitted scope of practice under State law,  
14 and other professionals or paraprofes-  
15 sionals with appropriate expertise in behav-  
16 ioral health or mental health crisis re-  
17 sponse, including nurses, social workers,  
18 peer support specialists, and others, as  
19 designated by the State and approved by  
20 the Secretary;

21           “(ii) whose members are trained in  
22 trauma-informed care, de-escalation strate-  
23 gies, and harm reduction;

1                   “(iii) that is able to respond in a  
2 timely manner and, where appropriate,  
3 provide the following—

4                                 “(I) screening and assessment;

5                                 “(II) stabilization and de-esca-  
6 lation;

7                                 “(III) coordination with, and re-  
8 ferrals to, health, social, and other  
9 services and supports as needed; and

10                                “(IV) facilitate an individual into  
11 the State’s Medicaid transportation  
12 process to ensure access to the next  
13 step in care or treatment;

14                               “(iv) that maintains relationships with  
15 relevant community partners, including  
16 medical, primary care, and behavioral  
17 health providers, community health cen-  
18 ters, crisis respite centers, managed care  
19 organizations (if applicable), entities able  
20 to provide assistance with application and  
21 enrollment in the State plan or a waiver of  
22 the plan, entities able to provide assistance  
23 with applying for and enrolling in benefit  
24 programs, entities that provide assistance  
25 with housing (such as public housing au-

1           thorities, Continuum of Care programs, or  
2           not-for-profit entities that provide housing  
3           assistance), and entities that provide as-  
4           sistance with other social services;

5                   “(v) that coordinates with crisis inter-  
6           vention hotlines and emergency response  
7           systems;

8                   “(vi) that maintains the privacy and  
9           confidentiality of patient information con-  
10          sistent with Federal and State require-  
11          ments; and

12                   “(vii) that operates independently  
13          from (but may coordinate with) State or  
14          local law enforcement agencies;

15                   “(C) available 24 hours per day, every day  
16          of the year; and

17                   “(D) voluntary to receive.

18          “(3) PAYMENTS.—

19                   “(A) IN GENERAL.—Notwithstanding sec-  
20          tion 1905(b), beginning October 1, 2020, dur-  
21          ing each of the first 12 fiscal quarters that a  
22          State meets the requirements described in para-  
23          graph (4), the Federal medical assistance per-  
24          centage applicable to amounts expended by the  
25          State for medical assistance for qualifying com-

1           munity-based mobile crisis intervention services  
2           furnished during such quarter shall be equal to  
3           95 percent.

4           “(B) EXCLUSION OF ENHANCED PAY-  
5           MENTS FROM TERRITORIAL CAPS.—To the ex-  
6           tent that the amount of a payment to Puerto  
7           Rico, the Virgin Islands, Guam, the Northern  
8           Mariana Islands, or American Samoa for med-  
9           ical assistance for qualifying community-based  
10          mobile crisis intervention services that is based  
11          on the Federal medical assistance percentage  
12          specified in subparagraph (A) exceeds the  
13          amount that would have been paid to such ter-  
14          ritory for such services if the Federal medical  
15          assistance percentage for the territory had been  
16          determined without regard to such subpara-  
17          graph—

18                 “(i) the limitation on payments to ter-  
19                 ritories under subsections (f) and (g) of  
20                 section 1108 shall not apply to the amount  
21                 of such excess; and

22                 “(ii) the amount of such excess shall  
23                 be disregarded in applying such sub-  
24                 sections.

1           “(4) REQUIREMENTS.—The requirements de-  
2           scribed in this paragraph are the following:

3           “(A) The State demonstrates, to the satis-  
4           faction of the Secretary—

5           “(i) that it will be able to support the  
6           provision of qualifying community-based  
7           mobile crisis intervention services that  
8           meet the conditions specified in paragraph  
9           (2); and

10          “(ii) how it will support coordination  
11          between mobile crisis teams and commu-  
12          nity partners, including health care pro-  
13          viders, to enable the provision of services,  
14          needed referrals, and other activities iden-  
15          tified by the Secretary.

16          “(B) The State provides assurances satis-  
17          factory to the Secretary that—

18          “(i) any additional Federal funds re-  
19          ceived by the State for qualifying commu-  
20          nity-based mobile crisis intervention serv-  
21          ices provided under this subsection that  
22          are attributable to the increased Federal  
23          medical assistance percentage under para-  
24          graph (3)(A) will be used to supplement,  
25          and not supplant, the level of State funds





- 1                   “(III) hospitalizations;
- 2                   “(IV) the involvement of law en-  
3                   forcement in mental health or sub-  
4                   stance use disorder crisis events;
- 5                   “(V) the diversion of individuals  
6                   from jails or similar settings; and
- 7                   “(ii) assessing—
- 8                   “(I) the types of services pro-  
9                   vided to individuals;
- 10                  “(II) the types of events re-  
11                  sponded to;
- 12                  “(III) cost savings or cost-effec-  
13                  tiveness attributable to such services;
- 14                  “(IV) the experiences of individ-  
15                  uals who receive qualifying commu-  
16                  nity-based mobile crisis intervention  
17                  services;
- 18                  “(V) the successful connection of  
19                  individuals with follow-up services;  
20                  and
- 21                  “(VI) other relevant outcomes  
22                  identified by the Secretary.

23                   “(B) COMPARISON TO HISTORICAL MEAS-  
24                   URES.—The contract described in subparagraph  
25                   (A) shall specify that the evaluation is based on

1 a comparison of the historical measures of  
2 State performance with respect to the outcomes  
3 specified under such subparagraph to the  
4 State's performance with respect to such out-  
5 comes during the period beginning with the  
6 first quarter in which the State begins pro-  
7 viding qualifying community-based mobile crisis  
8 intervention services in accordance with this  
9 subsection.

10 “(C) REPORT.—Not later than 2 years  
11 after a State begins to provide qualifying com-  
12 munity-based mobile crisis intervention services  
13 in accordance with this subsection, the State  
14 shall submit a report to the Secretary on the  
15 following:

16 “(i) The results of the evaluation car-  
17 ried out under subparagraph (A).

18 “(ii) The number of individuals who  
19 received qualifying community-based mo-  
20 bile crisis intervention services.

21 “(iii) Demographic information re-  
22 garding such individuals when available,  
23 including the race or ethnicity, age, sex,  
24 sexual orientation, gender identity, and ge-  
25 ographic location of such individuals.

1           “(iv) The processes and models devel-  
2           oped by the State to provide qualifying  
3           community-based mobile crisis intervention  
4           services under such the State plan or waiv-  
5           er, including the processes developed to  
6           provide referrals for, or coordination with,  
7           follow-up care and services.

8           “(v) Lessons learned regarding the  
9           provision of such services.

10          “(D) PUBLIC AVAILABILITY.—The State  
11          shall make the report required under subpara-  
12          graph (C) publicly available, including on the  
13          website of the appropriate State agency, upon  
14          submission of such report to the Secretary.

15          “(6) BEST PRACTICES REPORT.—

16          “(A) IN GENERAL.—Not later than 3 years  
17          after the first State begins to provide qualifying  
18          community-based mobile crisis intervention  
19          services in accordance with this subsection, the  
20          Secretary shall submit a report to Congress  
21          that—

22                 “(i) identifies the States that elected  
23                 to provide services in accordance with this  
24                 subsection;

1                   “(ii) summarizes the information re-  
2                   ported by such States under paragraph  
3                   (5)(C); and

4                   “(iii) identifies best practices for the  
5                   effective delivery of community-based mo-  
6                   bile crisis intervention services.

7                   “(B) PUBLIC AVAILABILITY.—The report  
8                   required under subparagraph (A) shall be made  
9                   publicly available, including on the website of  
10                  the Department of Health and Human Services,  
11                  upon submission to Congress.

12                  “(7) STATE PLANNING AND EVALUATION  
13                  GRANTS.—

14                  “(A) IN GENERAL.—As soon as practicable  
15                  after the date of enactment of this subsection,  
16                  the Secretary may award planning and evalua-  
17                  tion grants to States for purposes of developing  
18                  a State plan amendment or section 1115 or  
19                  1915 waiver request (or an amendment to such  
20                  a waiver) to provide qualifying community-  
21                  based mobile crisis intervention services and  
22                  conducting the evaluation required under para-  
23                  graph (5)(A). A grant awarded to a State  
24                  under this paragraph shall remain available  
25                  until expended.

1           “(B) STATE CONTRIBUTION.—A State  
2 awarded a grant under this subsection shall  
3 contribute for each fiscal year for which the  
4 grant is awarded an amount equal to the State  
5 percentage determined under section 1905(b)  
6 (without regard to the temporary increase in  
7 the Federal medical assistance percentage of  
8 the State under section 6008(a) of the Families  
9 First Coronavirus Response Act (Public Law  
10 116–127) or any other temporary increase in  
11 the Federal medical assistance percentage of  
12 the State for fiscal year 2020 or any succeeding  
13 fiscal year) of the grant amount.

14           “(8) FUNDING.—

15           “(A) IMPLEMENTATION AND ADMINISTRA-  
16 TION.—There is appropriated to the Secretary,  
17 out of any funds in the Treasury not otherwise  
18 appropriated, such sums as are necessary for  
19 purposes of implementing and administering  
20 this section.

21           “(B) PLANNING AND EVALUATION  
22 GRANTS.—There is appropriated, out of any  
23 funds in the Treasury not otherwise appro-  
24 priated, \$25,000,000 to the Secretary for fiscal  
25 year 2021 for purposes of making grants under

1 paragraph (7), to remain available until ex-  
2 pended.”.