



General Assembly

February Session, 2024

Substitute Bill No. 315



AN ACT IMPLEMENTING THE CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC MODEL IN THE MEDICAID PROGRAM.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective from passage*) (a) As used in this section, (1)
2 "certified community behavioral health clinic" means a clinic certified
3 by the state that offers behavioral health services, including, but not
4 limited to, (A) recovery-oriented person and family-centered substance
5 abuse and mental health services offered within and outside the clinic,
6 (B) expanded service hours, (C) timely access for routine needs, (D)
7 twenty-four-hour access to crisis management services, (E) peer support
8 and counseling services, (F) screening, assessment, diagnosis and risk
9 assessment, (G) outpatient primary care screening and monitoring of
10 key health indicators and risks, and (H) partnerships with a range of
11 health and social service providers to provide access to services; and (2)
12 "Medicare Economic Index" means a measure of inflation for physicians
13 with respect to their practice costs and wage levels as calculated by the
14 Centers for Medicare and Medicaid Services.

15 (b) Not later than October 1, 2024, the Commissioner of Social
16 Services, in consultation with the Commissioner of Mental Health and
17 Addiction Services, shall seek federal approval to join a Medicaid
18 demonstration program supporting certified community behavioral
19 health clinics in multiple states pursuant to Section 223 of the Protecting

20 Access to Medicare Act of 2014, P.L. 113-93, as amended by section
21 11001 of the Bipartisan Safer Communities Act, P.L. 117-15. The
22 Commissioner of Social Services, acting in consultation with the
23 Commissioner of Mental Health and Addiction Services and in
24 accordance with federal law, shall develop a plan to apply for the
25 Medicaid demonstration program that shall include, but need not be
26 limited to, (1) a system to certify such clinics, (2) reporting on the effect
27 of such clinics on access to care and costs to the state, and (3) a
28 prospective payment system with (A) incentives for clinics that exceed
29 quality of care thresholds, (B) triannual rate adjustments in accordance
30 with the Medicare Economic Index, and (C) allowable rate modifications
31 based on a clinic's scope of services.

32 (c) Not later than August 30, 2024, the Commissioner of Social
33 Services shall file a report on the plan, in accordance with the provisions
34 of section 11-4a of the general statutes, with the joint standing
35 committees of the General Assembly having cognizance of matters
36 relating to human services and public health. If the plan receives federal
37 approval, the commissioner shall file a report not later than January first
38 annually, in accordance with the provisions of section 11-4a of the
39 general statutes, for the duration of the demonstration program with
40 said committees of cognizance on the effect of the program on (1) access
41 to care, and (2) costs to the state for behavioral health care.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section

Statement of Legislative Commissioners:

The title was changed.

HS Joint Favorable Subst. -LCO