

23 September 2022

House Ways and Means Committee Advances Mental Health and MIECHV Reauthorization Legislation

On Wednesday (September 21), the House Ways and Means Committee advanced the bipartisan bill, The Jackie Walorski Maternal and Child Home Visiting Reauthorization Act of 2022 (H.R. 8876), along with a package of bipartisan bills aimed at addressing the mental health crisis. During the markup, there was considerable bipartisan recognition of the late Jackie Walorski's efforts as a champion for women and children and to advance H.R. 8876, providing reauthorization and a doubling in federal funding for the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program over the next five years.

In their opening statements, Chairman Richard Neal (D-MA) and Ranking Member Kevin Brady (R-TX) also praised the mental health legislation as being both bipartisan and critical to strengthening mental health care across the continuum, expanding access and improving transparency for patients. The legislation aims to expand access to mental health and substance use disorder (SUD) services within the Medicare program, increase reporting and transparency about service offerings and coverage in the private market, make improvements to physician education while mitigating burnout, and ensuring that the system as a whole works better for patients.

The bills, as amended, were all ordered to be reported favorably and will advance to the full House.

For more information: <https://waysandmeans.house.gov/legislation/markups/markup-worker-and-family-support-and-health-legislation>

Markup details

H.R. 8876, The Jackie Walorski Maternal and Child Home Visiting Reauthorization Act of 2022

- **High-level summary:** This bill increases funding for services that aid new parents and their children with in-home support by reauthorizing the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program for five years and increasing the annual funding level to \$800 million in 2027.
- **Outcome:** Ordered to be favorably reported, as amended, by voice vote. The committee adopted by unanimous consent Chairman Neal's amendment in the nature of a substitute to make technical changes to the bill. The committee also unanimously adopted Wenstrup's proposed amendment that The Department of Health and Human Services (HHS) direct a portion of the 2% workforce set-aside to establish a new technical assistance center, named after Walorski, for best practice evaluation.

Committee Print 117-1. Improvements to Medicare Inpatient and Outpatient Mental Health Services (H.R. 8879 and H.R. 8878)

- **Outcome:** Ordered to be favorably reported, as amended, by voice vote. The committee adopted by unanimous consent Chairman Neal's amendment in the nature of a substitute to make technical changes to the bill.

H.R. 8879 (introduced by Reps. Dwight Evans and Jodey Arrington)

- **High-level summary:** The bill would amend the Medicare prospective payment system for psychiatric hospitals and psychiatric units to expand coverage.

H.R. 8878 (introduced by Reps. Judy Chu, Bill Pascrell, and Adrian Smith)

- *High-level summary:* The bill expands Medicare mental health coverage by creating a new benefit category for intensive outpatient programs.

Committee Print 117-2. Improvements to the Medicare Program Related to Physician Services and Education (H.R. 432, H.R. 8910, H.R. 8884, H.R. 8890, H.R. 8908)

- *Outcome:* Ordered to be favorably reported, as amended, by voice vote. The committee adopted by unanimous consent Chairman Neal's amendment in the nature of a substitute to make technical changes to the bill. Also of note, there was some dissatisfaction expressed by Doggett that contingency management incentives paid for by Medicare in H.R. 8908 could lead to misuse and misleading marketing. Murphy also expressed concern with Medicare solvency when suggesting that marriage and family therapist services shouldn't be covered services, per H.R. 432.

H.R. 432 (introduced by Rep. Mike Thompson)

- *High-level summary:* Provides for coverage of marriage and family therapist services and mental health counselor services under Medicare. It also excludes such services from the skilled nursing facility prospective payment system, and authorizes marriage and family therapists and mental health counselors to develop discharge plans for post-hospital services.

H.R. 8910 (introduced by Reps. Jason Smith, Brad Schneider, and Drew Ferguson)

- *High-level summary:* It would direct the Secretary of HHS to provide outreach and reporting on certain behavioral health integration services offered through Medicare.

H.R. 8884 (introduced by Reps. Mike Kelly and Brian Higgins)

- *High-level summary:* Directs the Secretary of HHS to conduct educational outreach to Medicare-participating health care providers to increase awareness and access to opioid use disorder treatment services for Medicare beneficiaries.

H.R. 8890 (introduced by Reps. Raul Ruiz, Greg Murphy, Don Beyer, and Larry Buschon)

- *High-level summary:* It would amend the Social Security Act to establish exceptions for certain physician wellness programs.

H.R. 8908 (introduced by Reps. Ron Estes and Jimmy Panetta)

- *High-level summary:* Amends title XI of the Social Security Act to require the Inspector General of HHS to review a safe harbor under the anti-kickback statute for certain contingency management interventions, and for other purposes.

Committee Print 117-3. Requiring Coverage of Forensic Medical Exams with No Cost Sharing (H.R. 8891)

H.R. 8891 (introduced by Reps. Linda Sanchez, Gwen Moore, and Carol Miller)

- *High-level summary:* Ensures patients with private health insurance do not face out-of-pocket costs or surprise medical bills for forensic medical exams.
- *Outcome:* Ordered to be favorably reported, as amended, by voice vote. The committee adopted by unanimous consent Chairman Neal's amendment in the nature of a substitute to make technical changes to the bill.

Committee Print 117-4. Improved Information in Provider Directories, Plan Definitions, and Crisis Services for Private Insurance Plans (H.R. 8885, H.R. 8886, H.R. 8892)

- *Outcome:* Ordered to be favorably reported, as amended, by voice vote. The committee adopted by unanimous consent Chairman Neal's amendment in the nature of a substitute to make technical changes to the bill.

H.R. 8885 (introduced by Reps. Dan Kildee, Brad Wenstrup, and Kevin Hern)

- *High-level summary:* The bill amends the Public Health Service Act, Internal Revenue Code of 1986, and Employee Retirement Income Security Act of 1974 to provide for provider directory improvements to enhance enrollee, participant, and beneficiary access to care.

H.R. 8886 (introduced by Reps. Gwen Moore and David Schweikert)

- *High-level summary:* The bill amends the Public Health Service Act, Internal Revenue Code of 1986, and Employee Retirement Income Security Act of 1974 to ensure mental health and substance use disorder benefits are defined pursuant to external benchmarks based on nationally recognized standards.

H.R. 8892 (introduced by Reps. Terri Sewell, Darin LaHood, and David Kustoff)

- *High-level summary:* The bill requires HHS to conduct an outreach campaign regarding the availability of mental health crisis services under private insurance and to submit a report to Congress on private insurance coverage for mental health services, including any barriers to accessing such services.

Committee Print 117-5. Improved Information for Network Coverage and Plan Documents in Private Insurance Plans

- *Outcome:* Ordered to be favorably reported, as amended, by voice vote. The committee adopted by unanimous consent Chairman Neal's amendment in the nature of a substitute to make technical changes to the bill.

H.R. 8881 (introduced by Reps. Steven Horsford and Vern Buchanan)

- *High-level summary:* The bill requires group health plans and health insurance issuers offering group or individual health insurance coverage to disclose the percentage of in-network participation for certain provider types.

H.R. 8889 (introduced by Reps. Stacey Plaskett, Tom Rice, and Lloyd Smucker)

- *High-level summary:* The bill improves access to group health plan and health insurance coverage summary of benefits and coverage explanation. It also requires a joint report by the Secretaries of HHS, Treasury, and Labor relating to summaries of benefits and coverage.

If you have questions, please contact [Heather Meade](#) or [Laura Dillon](#).

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