

118TH CONGRESS
2D SESSION

H. R. 8375

To require the Secretary of Health and Human Services to issue guidance to States on strategies under Medicaid and CHIP to increase pediatric mental and behavioral health provider education, training, recruitment, retention, and support, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MAY 14, 2024

Ms. CARAVEO (for herself, Mr. FITZPATRICK, Mrs. WATSON COLEMAN, Ms. JACKSON LEE, Mr. THANEDAR, Ms. LEE of California, Ms. NORTON, Ms. TLAIB, and Ms. STANSBURY) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To require the Secretary of Health and Human Services to issue guidance to States on strategies under Medicaid and CHIP to increase pediatric mental and behavioral health provider education, training, recruitment, retention, and support, 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 “Strengthening Our Pe-
5 diatric Mental Health Workforce Act”.

1 **SEC. 2. GUIDANCE TO STATES ON STRATEGIES UNDER**
2 **MEDICAID AND CHIP TO INCREASE PEDI-**
3 **ATRIC MENTAL AND BEHAVIORAL HEALTH**
4 **PROVIDER EDUCATION, TRAINING, RECRUIT-**
5 **MENT, RETENTION, AND SUPPORT.**

6 Not later than 12 months after the date of the enact-
7 ment of this Act, the Secretary of Health and Human
8 Services shall issue guidance to States on strategies (in-
9 cluding strategies that utilize waivers under section 1115
10 of the Social Security Act (42 U.S.C. 1315) or other au-
11 thorities under titles XIX and XXI of such Act (42 U.S.C.
12 1396 et seq., 1397aa et seq.)) such States may utilize
13 under the Medicaid and CHIP programs to—

14 (1) increase the education, training, recruit-
15 ment, and retention of pediatricians, child and ado-
16 lescent psychiatrists, and other pediatric mental and
17 behavioral health providers that participate in such
18 programs;

19 (2) improve the capacity of pediatricians, child
20 and adolescent psychiatrists, and other pediatric
21 mental and behavioral health providers that serve
22 populations with limited English proficiency;

23 (3) recruit and retain pediatricians, child and
24 adolescent psychiatrists, and other pediatric mental
25 and behavioral health professionals that practice in
26 rural and underserved areas;

1 (4) expand the capacity of the pediatric mental
2 and behavioral health care workforce that practices
3 in rural and underserved areas;

4 (5) increase the recruitment and retention of
5 racial and ethnic minorities in the pediatric mental
6 and behavioral health professions;

7 (6) promote the capabilities of and payments
8 available to pediatric mental and behavioral pro-
9 viders across disciplines that participate in such pro-
10 grams through implementation of integrated care
11 models, primary care behavioral health models, col-
12 laborative care models, pediatric mental health care
13 telehealth access programs (as described in section
14 330M(b) of the Public Health Service Act (42
15 U.S.C. 254e-19(b))), and consultation with and
16 training of other allied professionals and community
17 organizations engaged in pediatric mental and be-
18 havioral health services; and

19 (7) improve provider participation and recruit-
20 ment in such programs through various incentive
21 strategies, such as increased reimbursement, scholar-
22 ships, and student loan repayment programs, and to
23 support the needs of pediatricians, child and adoles-
24 cent psychiatrists, and other pediatric mental and
25 behavioral health providers that participate in such

1 programs to reduce rates of turnover, burnout, and
2 intent to leave.

3 **SEC. 3. REPORT ON STRATEGIES UNDER MEDICAID AND**
4 **CHIP TO INCREASE PEDIATRIC MENTAL AND**
5 **BEHAVIORAL HEALTH PROVIDER EDU-**
6 **CATION, TRAINING, RECRUITMENT, RETEN-**
7 **TION, AND SUPPORT.**

8 Not later than 2 years after the date of the enact-
9 ment of this Act, the Secretary of Health and Human
10 Services shall submit to the Committee on Health, Edu-
11 cation, Labor, and Pensions of the Senate and the Com-
12 mittee on Energy and Commerce of the House of Rep-
13 resentatives, and make publicly available, a report ana-
14 lyzing implementation of strategies described in section 2.

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