

117TH CONGRESS  
2D SESSION

# H. R. 9577

To amend title XVIII of the Social Security Act to expand access to psychological and behavioral services.

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## IN THE HOUSE OF REPRESENTATIVES

DECEMBER 15, 2022

Ms. CHU (for herself, Ms. SCHAKOWSKY, Mr. SMITH of Missouri, and Mr. MULLIN) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XVIII of the Social Security Act to expand access to psychological and behavioral services.

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 “Increasing Mental

5       Health Options Act of 2022”.

1   **SEC. 2. EXPANDING ELIGIBILITY FOR INCENTIVES TO**  
2                   **PRACTICE IN RURAL AND UNDERSERVED**  
3                   **AREAS.**

4       Section 1833(m) of the Social Security Act (42  
5   U.S.C. 1395l(m)) is amended—

6                   (1) in paragraph (1)—

7                      (A) by inserting “(A)” before “In the  
8                      case”; and

9                      (B) by adding at the end the following new  
10                  subparagraph:

11                 “(B) In the case of services furnished by a clinical  
12   psychologist (as defined by the Secretary for purposes of  
13   section 1861(ii)) in a year to an individual, who is covered  
14   under the insurance program established by this part and  
15   who incurs expenses for such services, in an area that is  
16   designated (under section 332(a)(1)(A) of the Public  
17   Health Service Act) as a health professional shortage area  
18   as identified by the Secretary prior to the beginning of  
19   such year, in addition to the amount otherwise paid under  
20   this part, there also shall be paid to the clinical psycholo-  
21   gist (or to an employer or facility in the cases described  
22   in clause (A) of section 1842(b)(6)) (on a monthly or  
23   quarterly basis) from the Federal Supplementary Medical  
24   Insurance Trust Fund an amount equal to 10 percent of  
25   the payment amount for the service under this part.”; and

1                             (2) in paragraph (2), by inserting “or clinical  
2                             psychologist” after “physician”.

3     **SEC. 3. ELIMINATING UNNECESSARY OVERSIGHT AND AP-**  
4                             **PROVAL REQUIREMENTS FOR BEHAVIORAL**  
5                             **HEALTH SERVICES PROVIDED BY CLINICAL**  
6                             **PSYCHOLOGISTS.**

7     (a) **COMPREHENSIVE OUTPATIENT REHABILITATION**  
8     **FACILITIES.**—Section 1835(a)(2)(E)(iii) of the Social Se-  
9     curity Act (42 U.S.C. 1395n(a)(2)(E)(iii)) is amended by  
10    inserting “, except that an individual receiving qualified  
11    psychologist services as described in section 1861(ii) may  
12    be under the care of a clinical psychologist with respect  
13    to such services to the extent authorized under State law”  
14    before the semicolon.

15    (b) **SKILLED NURSING FACILITIES.**—Section  
16    1819(b) of such Act (42 U.S.C. 1395i–3(b)) is amended—  
17      (1) in paragraph (5)(G), by inserting “clinical  
18      psychologist,” after “nurse practitioner,”; and

19      (2) in paragraph (6)(A), by inserting “, except  
20      that a resident receiving qualified psychologist serv-  
21      ices as described in section 1861(ii) may be under  
22      the supervision of a clinical psychologist with respect  
23      to such services to the extent authorized under State  
24      law” before the semicolon.

25    (c) **PARTIAL HOSPITALIZATION SERVICES.**—

1                         (1) Section 1835(a)(2)(F)(iii) of the Social Se-  
2         curity Act (42 U.S.C. 1395n(a)(2)(F)(iii)) is amend-  
3         ed by inserting “, except that an individual receiving  
4         qualified psychologist services as described in section  
5         1861(ii) may be under the care of a clinical psychol-  
6         ogist with respect to such services to the extent au-  
7         thorized under State law” before the period.

8                         (2) Section 1861(ff)(1) of such Act (42 U.S.C.  
9         1395x(ff)(1)) is amended by inserting “(or, in the  
10        case of qualified psychologist services, under the su-  
11        pervision of a clinical psychologist to the extent au-  
12        thorized under State law)” after “under the super-  
13        vision of a physician”.

14         (d) HOME HEALTH SERVICES.—

15                         (1) Section 1861(m) of such Act (42 U.S.C.  
16         1395x(m)) is amended—

17                             (A) in paragraph (6), by striking “and” at  
18                             the end;

19                             (B) in paragraph (7), by inserting “and”  
20                             after the semicolon; and

21                             (C) by inserting after paragraph (7) the  
22                             following new paragraph:

23                             “(8) an individual receiving qualified psycholo-  
24                             gist services may be under the care of a clinical psy-

1           chologist with respect to such services to the extent  
2           authorized under State law.”.

3           (2) Section 1891(a)(3)(F) of such Act (42  
4           U.S.C. 1395bbb(a)(3)(F)) is amended by inserting  
5           “clinical psychologist,” after “physician.”.

6           (e) INPATIENT PSYCHIATRIC HOSPITAL SERVICES.—

7           Section 1814(a)(2)(A) of such Act (42 U.S.C.  
8           1395f(a)(2)(A)) is amended by inserting “(or, in the case  
9           of qualified psychologist services, under the supervision of  
10          a clinical psychologist to the extent authorized under State  
11          law)” after “under the supervision of a physician”.

12           (f) RULE OF CONSTRUCTION.—In accordance with  
13          section 410.71(e) of title 42, Code of Federal Regulations  
14          (or any successor regulation), nothing in the provisions of,  
15          and amendments made by, this section shall be construed  
16          as changing or eliminating existing requirements regard-  
17          ing clinical consultation by clinical psychologists with a  
18          beneficiary’s physician, in accordance with accepted pro-  
19          fessional ethical norms and taking into consideration pa-  
20          tient confidentiality.

