

**AMENDMENT TO THE AMENDMENT IN THE  
NATURE OF A SUBSTITUTE TO H.R. 2646  
OFFERED BY MR. BEN RAY LUJÁN OF NEW  
MEXICO**

After section 204, insert the following new section  
(and redesignate the subsequent sections and make such  
other conforming changes as may be necessary):

**1 SEC. 205. ADOLESCENT INTERVENTION AND TREATMENT.**

2 (a) GRANTS.—The Secretary of Health and Human  
3 Services (in this section referred to as the “Secretary”)  
4 shall—

5 (1) award grants to eligible entities to initiate  
6 and undertake, for eligible adolescents, early inter-  
7 vention and treatment programs, and specialized  
8 secondary school and college programs, with the goal  
9 of preventing chronic and serious mental illness;

10 (2) award grants to not more than 3 eligible en-  
11 tities for studying the longitudinal outcomes of pro-  
12 grams funded under paragraph (1) on eligible ado-  
13 lescents who were treated 5 or more years prior to  
14 the enactment of this Act; and

15 (3) ensure that programs and activities funded  
16 through grants under this subsection are based on

1 a sound scientific model that shows evidence and  
2 promise and can be replicated in other settings.

3 (b) ELIGIBLE ENTITIES AND ADOLESCENTS.—In  
4 this section:

5 (1) The term “eligible entity” means a non-  
6 profit institution that—

7 (A) is accredited by a State mental health  
8 or education agency, as applicable, for the  
9 treatment or education of adolescents from 12  
10 to 25 years of age; and

11 (B) provides services that include early  
12 intervention and specialized secondary school  
13 programs and college focused on adolescents  
14 whose primary need is a social or emotional dis-  
15 ability (in addition to any learning disability).

16 (2) The term “eligible adolescent” means an in-  
17 dividual who is at least 12 years old and not more  
18 than 25 years old—

19 (A) whose primary need is a social and  
20 emotional disability (in addition to any learning  
21 disability);

22 (B) who is at risk of developing serious  
23 mental illness or may show early signs of men-  
24 tal illness; and

1 (C) who could benefit from early interven-  
2 tion and specialized preschool or elementary  
3 school programs with the goal of preventing or  
4 treating chronic and serious mental illness.

5 (c) APPLICATION.—An eligible entity seeking a grant  
6 under subsection (a) shall submit to the Secretary an ap-  
7 plication at such time, in such manner, and containing  
8 such information as the Secretary may require.

9 (d) USE OF FUNDS FOR EARLY INTERVENTION AND  
10 TREATMENT PROGRAMS.—An eligible entity shall use  
11 amounts awarded under a grant under subsection (a)(1)  
12 to carry out the following activities:

13 (1) Deliver (or facilitate) for eligible adolescents  
14 treatment and education, early intervention, and  
15 specialized secondary school and college programs.

16 (2) Treat and educate eligible adolescent, in-  
17 cluding startup, curricula development, operating  
18 and capital needs, staff and equipment, assessment  
19 and intervention services, administration and medi-  
20 cation requirements, enrollment costs, collaboration  
21 with primary care physicians and psychiatrists, other  
22 related services to meet emergency needs of adoles-  
23 cents, and communication with families and medical  
24 professionals concerning the adolescents.

1           (3) Develop and implement other strategies to  
2           address identified treatment and educational needs  
3           of eligible adolescents that have reliable and valid  
4           evaluation modalities built into assess outcomes  
5           based on sound scientific metrics.

6           (e) USE OF FUNDS FOR LONGITUDINAL STUDY.—In  
7           conducting a study on longitudinal outcomes through a  
8           grant under subsection (a)(2), an eligible entity shall in-  
9           clude an analysis of—

10           (1) the individuals treated and educated;

11           (2) the success of such treatment and education  
12           in avoiding the onset of serious mental illness or the  
13           preparation of such adolescents for the care and  
14           management of serious mental illness;

15           (3) any evidence-based best practices generally  
16           applicable as a result of such treatment and edu-  
17           cational techniques used with such adolescents; and

18           (4) the ability of programs to be replicated as  
19           a best practice model of intervention.

20           (f) REQUIREMENTS.—In carrying out this section,  
21           the Secretary shall ensure that each entity receiving a  
22           grant under subsection (a) maintains a written agreement  
23           with the Secretary, and provides regular written reports,  
24           as required by the Secretary, regarding the quality, effi-  
25           ciency, and effectiveness of intervention and treatment for

1 eligible adolescents preventing or treating the development  
2 and onset of serious mental illness.

3 (g) AMOUNT OF AWARDS.—

4 (1) AMOUNTS FOR ADOLESCENT INTERVENTION  
5 AND TREATMENT PROGRAMS.—The amount of an  
6 award to an eligible entity under subsection (a)(1)  
7 shall be not more than \$600,000 per fiscal year.

8 (2) AMOUNTS FOR LONGITUDINAL STUDY.—  
9 The total amount of an award to an eligible entity  
10 under subsection (a)(2) (for one or more fiscal  
11 years) shall be not less than \$1,000,000 and not  
12 greater than \$2,000,000.

13 (h) PROJECT TERMS.—The period of a grant—

14 (1) for awards under subsection (a)(1), shall be  
15 not less than 3 fiscal years and not more than 10  
16 fiscal years; and

17 (2) for awards under subsection (a)(2), shall be  
18 not more than 5 fiscal years.

19 (i) MATCHING FUNDS.—The Secretary may not  
20 award a grant under this section to an eligible entity un-  
21 less the eligible entity agrees, with respect to the costs to  
22 be incurred by the eligible entity in carrying out the activi-  
23 ties described in subsection (d), to make available non-  
24 Federal contributions (in cash or in kind) toward such

1 costs in an amount equal to not less than 10 percent of  
2 Federal funds provided in the grant.

3 (j) DEFINITIONS.—In this section, the term “emer-  
4 gency room boarding” means the practice of admitting pa-  
5 tients to an emergency department and holding them in  
6 the department until inpatient psychiatric beds become  
7 available.

8 (k) AUTHORIZATION OF APPROPRIATIONS.—To carry  
9 out this section, there is authorized to be appropriated  
10 \$6,000,000 for each of fiscal years 2016 through 2020.

