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(Original Signature of Member)

116TH CONGRESS
2D SESSION

H. R. 7147

To amend the Community Mental Health Service Block Grant to authorize a set-aside for crisis care services, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. LATTA introduced the following bill; which was referred to the Committee on _____

A BILL

To amend the Community Mental Health Service Block Grant to authorize a set-aside for crisis care services, 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 “Creating Resources
5 to Improve Situations of Inherent Severity Act” or the
6 “CRISIS Act”.

1 **SEC. 2. SET-ASIDE FOR EVIDENCE-BASED CRISIS CARE**
2 **SERVICES.**

3 Section 1920 of the Public Health Service Act (42
4 U.S.C. 300x-9) is amended—

5 (1) in subsection (a), by striking
6 “\$532,571,000 for each of fiscal years 2018 through
7 2022” and inserting “\$532,571,000 for each of fis-
8 cal years 2018 through 2020, and \$758,000,000 for
9 each of fiscal years 2021 through 2022”; and

10 (2) by adding at the end the following:

11 “(d) CRISIS CARE.—

12 “(1) IN GENERAL.—Except as provided in para-
13 graph (3), a State shall expend at least 5 percent of
14 the amount the State receives pursuant to section
15 1911 for each fiscal year to support evidenced-based
16 programs that address the crisis care needs of indi-
17 viduals with serious mental disorders, and children
18 with serious mental and emotional disturbances.

19 “(2) CORE ELEMENTS.—At the discretion of
20 the single State agency responsible for the adminis-
21 tration of the program of the State under a grant
22 under section 1911, funds expended pursuant to
23 paragraph (1) may be used to fund some or all of
24 the core crisis care service components, delivered ac-
25 cording to evidence-based principles, including the
26 following:

1 “(A) Crisis call centers.

2 “(B) 24/7 mobile crisis services.

3 “(C) Crisis stabilization programs offering
4 acute care or subacute care in a hospital or ap-
5 propriately licensed facility, as determined by
6 the Substance Abuse and Mental Health Serv-
7 ices Administration, with referrals to inpatient
8 or outpatient care.

9 “(3) STATE FLEXIBILITY.—In lieu of expending
10 5 percent of the amount the State receives pursuant
11 to section 1911 for a fiscal year to support evidence-
12 based programs as required by paragraph (1), a
13 State may elect to expend not less than 10 percent
14 of such amount to support such programs by the
15 end of two consecutive fiscal years.”.