



Report Generated: July 25, 2022 (2:12 p.m. EDT)

Comparative Print: Bill to Bill Differences

Comparing the base document BILLS-117hr1368ih.xml with BILLS-117HR1368RH-RCP117-63.

Notice

This document was computer-generated in an effort to show how two versions of the same legislative text differ **and may not have been reviewed for accuracy**. This document may comply with clause 12(b) of rule XXI of the Rules of the House. This document does not represent an official expression by the House and should not be relied on as an authoritative delineation of the proposed change(s) to existing law.

Omitted text is shown ~~stricken~~, new matter that is proposed is in underlined italics, and existing text in which no change is being proposed is shown in regular roman. Typesetting and stylistic characteristics, particularly in the headings and indentations, may not conform to how the text, if adopted, would be illustrated in subsequent versions of legislation or public law.

Text of H.R. 1368, the Mental Health Justice Act of 2022 Offered by M. _____ [Showing the text of H.R. 1368, as introduced, with modifications.]

SECTION 1. Short title.

This Act may be cited as the “Mental Health Justice Act of ~~2021~~2022”.

SEC. 2. Findings.

Congress finds the following:

(1) ~~Needless institutionalization (including in psychiatric hospitals) of people with disabilities is generally a violation of the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.), and the failure to provide sufficient community-based services (such as supported housing, assertive community treatment, mobile crisis, peer support, and supported employment) has resulted in needless institutionalization as well as incarceration of persons with mental illness or an intellectual or developmental disability.~~

(2) ~~In the landmark 1999 Supreme Court case *Olmstead v. L.C.*, the Supreme Court ruled that the “unjustified institutional isolation of persons with disabilities is a form of~~

discrimination” prohibited by the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.).

(3) Regulations promulgated by the Attorney General in 1991 affirm that title II of the Americans with Disabilities Act of 1990 (42 U.S.C. 12131 et seq.) requires public entities to “administer services, programs, and activities in the most integrated setting appropriate to the needs of qualified individuals with disabilities” (28 C.F.R. 35.130(d)). The regulation defines “the most integrated setting” as one that “enables individuals with disabilities to interact with nondisabled persons to the fullest extent possible” (28 C.F.R. pt. 35, App. B).

(4) Yet today, persons with a mental illness or an intellectual or developmental disability are more likely to be incarcerated and to be subject to excessive use of force by law enforcement officers:

(A) One out of every four of the deaths caused by law enforcement officers is a person with mental illness.

(B) Persons with a mental illness or an intellectual or developmental disability are often charged with minor, nonviolent offenses. For many of these persons, arrest and incarceration could have been avoided if they had access to intensive community-based services and stable housing.

(5) Many of the police encounters that lead to the incarceration (and in too many cases, death) of people with mental illness or an intellectual or developmental disability could be avoided by having in place systems that ensure that calls to 911 or to law enforcement result in dispatch of mental health professionals, peer support workers, or others rather than law enforcement officers.

(6) Many people who are incarcerated would be better served in community services. If there were sufficient community services, and persons with mental illness or an intellectual or developmental disability were connected to those services rather than being arrested, thousands of people with mental illness or an intellectual or developmental disability would avoid needless admissions to hospitals or jails. Further, jails and hospitals would experience less crowding.

SEC. 3.2. Grants for mental health professionals to act as first responders.

(a) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the

Subpart 3 of part B of title V of the Public Health Service Act (42 U.S.C. 290bb–31 et seq.) is amended by adding at the end the following:

“SEC. 520N. Grants for mental health professionals to act as first responders.

“(a) In general.—The “Secretary”, acting through the Assistant Secretary for Mental Health and Substance Use Secretary, and in consultation with the Assistant Attorney General for the Civil Rights Division of the Department of Justice (in this section referred to as the “Assistant Attorney General”), shall award grants to States and political subdivisions of States Justice, shall award grants to States, Indian Tribes, Tribal organizations, Urban Indian organizations, and political subdivisions thereof to establish or expand programs—

“(1) to hire, employ, train, and dispatch mental health professionals to respond in lieu of law enforcement officers in emergencies in which—

“(A) an individual calling 911, 988, or another emergency hotline states that

a person—

“(i) is in a mental health crisis; or

“(ii) may have a mental illness or an intellectual or developmental disability;

“(B) a law enforcement officer or other first responder identifies a person as having (or possibly having) a mental illness or an intellectual or developmental disability; or

“(C) a law enforcement officer or other first responder identifies a person as being (or possibly being) under the influence of a legal or illegal substance;

“(2) to include in the training for mental health professionals pursuant to paragraph (1) training in—

“(A) the principles of deescalation and antiracism; and

“(B) ~~age-appropriate~~ developmentally appropriate techniques;

“(3) to ensure that such mental health professionals link persons described in subparagraph (A), (B), or (C) of paragraph (1) with voluntary community-based services where appropriate;

~~and~~“(4) to train the staff of dispatch centers regarding the proper handling of a report of an emergency described in paragraph (1), including training in the principles of deescalation and antiracism referred to in paragraph (2)(A);

~~(b) DELEGATION.—The Secretary shall delegate responsibility for carrying out the Secretary’s responsibilities under this section and section 4 to the Director of the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration.~~

~~(c) ADDITIONAL AWARDS.—The Secretary shall make an additional award of funds under this section each fiscal year to grantees that~~

~~; and~~

~~“(5) to coordinate with law enforcement agencies, which may include operating independently from but in collaboration with a law enforcement agency, or operating within such an agency.~~

~~“(b) Additional awards.—The Secretary shall make an additional award of funds under this section each fiscal year to grantees that—~~

~~“(1) are in compliance with all conditions of their awards under this section, including the conditions specified in subsections (a) and (d); and~~

~~“(2) demonstrate that their programs under this section resulted in—~~ (1

~~“(A) a notable reduction in the incarceration and death of persons with mental illness or an intellectual or developmental disability; or~~

~~(2~~

~~“(B) a notable reduction in the use of force by police and a notable increase in referrals of persons with a mental illness or intellectual disability to community-based, voluntary support services (other than institutionalization or carceral support services).~~

~~(d)“(c) PRIORITY.—In awarding grants under this section, the Secretary shall give~~

priority to States, *Indian Tribes, Tribal organizations, Urban Indian organizations,* and political subdivisions ~~of States~~ *thereof* that—

“(1) have high rates of arrests and incarceration of persons with a mental illness or an intellectual or developmental disability;

“(2) commit to increasing resources for mental health and community-based support services or solutions for such persons; or

“(3) include peer support specialists in their current first responder model.

~~(e)~~“(d) REPORTING.—

“(1) BY GRANTEES.—A recipient of a grant under this section shall submit to the Secretary—

“(A) a quarterly report on—

“(i) the number and percentage of emergencies where mental health professionals were dispatched in lieu of law enforcement officers pursuant to assistance under this section;

“(ii) such other matters as the Secretary may require for determining whether the recipient should receive an additional award under subsection ~~(e)~~; and

“(iii) any increase or decrease, compared to any previous quarter, in incarceration or institutionalization as a result of dispatching mental health professionals pursuant to assistance under this section, disaggregated to include data specific to persons with intellectual and developmental disabilities and mental illnesses where available *and permitted to be disclosed under applicable privacy law*, so as—

“(I) to provide a critical baseline analysis; and

“(II) to ensure that mental health practitioners are not simply funneling individuals into other institutionalized settings; and

“(B) a final report on the use of such grant.

“(2) BY SECRETARY.—Not later than 1 year after awarding the first grant under this section, and annually thereafter, the Secretary shall submit to the Congress a report on the grant program under this section.

“(3) DISAGGREGATION OF DATA.—The reporting pursuant to paragraphs (1) and (2) shall, to the extent determined by the Secretary to be applicable, be disaggregated by age, *sex*, gender, race, and ethnicity.

~~(f)~~“(e) REVOCATION OF GRANT.—If the Secretary finds, based on reporting under subsection ~~(e)~~ or other information, that activities funded through a grant under this section are leading to a significant increase in incarceration or institutionalization—

“(1) the Secretary shall revoke the grant; and

“(2) the grantee shall repay to the Federal Government any amounts that the grantee—

“(A) received through the grant; and

“(B) has not obligated or expended.

~~(g) Funding.—To carry out this section, there are authorized to be appropriated such~~

~~sums as may be necessary for fiscal year 2022 and each subsequent fiscal year~~ *“(f) Technical assistance.—The Secretary, acting through the Assistant Secretary, and in consultation with the Assistant Attorney General for the Civil Rights Division of the Department of Justice, shall provide technical assistance to grantees under this section (or other Federal law), and to other States, Indian Tribes, Tribal organizations, Urban Indian organizations, and political subdivisions thereof to hire, employ, train, and dispatch mental health professionals to respond in lieu of law enforcement officers, as described in subsection (a).”*

“(g) DEFINITIONS.—In this section, the terms ‘Indian Tribe’, ‘Tribal organization’, and ‘Urban Indian organization’ have the meanings given to the terms ‘Indian tribe’, ‘tribal organization’, and ‘Urban Indian organization’, respectively, in section 4 of the Indian Health Care Improvement Act.”

“(h) FUNDING.—To carry out this section, there is authorized to be appropriated \$250,000,000 for the period of fiscal years 2023 through 2027.”

SEC. 4. Technical assistance for political subdivisions of a State.

The Secretary of Health and Human Service, acting through the Assistant Secretary for Mental Health and Substance Use and in consultation with the Assistant Attorney General for the Civil Rights Division of the Department of Justice, shall provide technical assistance to grantees under section 3 (or other Federal law), other political subdivisions of States, and States to hire, employ, train, and dispatch mental health professionals to respond in lieu of law enforcement officers, as described in section 3.

SEC. 5.3. Study.

(a) IN GENERAL.—The Secretary of Health and Human Services and the Assistant Attorney General for the Civil Rights Division of the Department of Justice shall conduct a study ~~of~~ *on* the effectiveness of programs and activities under ~~sections 3 and 4~~ *section 520N of the Public Health Service Act, as added by section 2.*

(b) QUALITATIVE AND LONGITUDINAL EXAMINATION.—The study under subsection (a) shall include a qualitative and longitudinal study of—

- (1) the number of persons diverted from arrests; and
- (2) short- and long-term outcomes for those persons, including reduced recidivism, reduced incidences of use of force, and reduced utilization of resources.

(c) COMPLETION; REPORT.—Not later than 3 years after the date of enactment of this Act, the Secretary of Health and Human Services and the Assistant Attorney General for the Civil Rights Division of the Department of Justice shall—

- (1) complete the study under subsection (a);
 - (2) submit a report to the Congress on the results of such study; and
 - (3) publish such report.
-

About this report

- Report Generated: July 25, 2022 (2:12 p.m. EDT)*
- Version of the system: Posey Ramseyer Report Generator 2020-05-04; AMPL*

