

117TH CONGRESS
1ST SESSION

S. 1821

To amend title XIX of the Social Security Act to provide a consistent standard of health care to incarcerated individuals, and for other purposes.

IN THE SENATE OF THE UNITED STATES

MAY 25, 2021

Mr. BOOKER introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XIX of the Social Security Act to provide a consistent standard of health care to incarcerated individuals, 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 “Humane Correctional
5 Health Care Act”.

6 **SEC. 2. REPEAL OF MEDICAID EXCLUSION RELATING TO IN-**
7 **CARCERATED INDIVIDUALS.**

8 (a) IN GENERAL.—Section 1905(a) of the Social Se-
9 curity Act (42 U.S.C. 1396d(a)) is amended, in the matter
10 following paragraph (31), by striking “such term does not

1 include—” and all that follows through “patient in an in-
 2 stitution for mental diseases” and inserting “such term
 3 does not include any such payments with respect to care
 4 or services for any individual who has not attained 65
 5 years of age and who is a patient in an institution for
 6 mental diseases”.

7 (b) CONFORMING AMENDMENTS.—Section 1902(a)
 8 of the Social Security Act (42 U.S.C. 1396a(a)) is amend-
 9 ed—

10 (1) by striking paragraph (84); and

11 (2) by striking subsection (nn).

12 (c) EFFECTIVE DATE.—The amendments made by
 13 this section shall apply with respect to medical assistance
 14 provided on or after January 1, 2022.

15 **SEC. 3. REPORT BY COMPTROLLER GENERAL.**

16 Not later than the date that is 3 years after the date
 17 of enactment of this Act, and annually thereafter for each
 18 of the following 5 years, the Comptroller General of the
 19 United States shall submit to Congress a report con-
 20 taining the following information:

21 (1) The percentage of incarcerated individuals
 22 that receive medical assistance under a State plan
 23 under title XIX of the Social Security Act (42
 24 U.S.C. 1396 et seq.).

1 (2) The access of incarcerated individuals to
2 health care services, including specialty care, and
3 health care providers.

4 (3) The quality of health care services provided
5 to incarcerated individuals.

6 (4) Any impact of coverage under such a State
7 plan on recidivism.

8 (5) The percentage of incarcerated individuals
9 who, upon release, are—

10 (A) enrolled under such a State plan; and

11 (B) connected to a primary care provider
12 in their community.

13 (6) Trends in the prevalence and incidence of
14 illness and injury among incarcerated individuals.

15 (7) Any other information the Comptroller Gen-
16 eral determines necessary regarding the health of in-
17 carcerated individuals.

18 **SEC. 4. SENSE OF CONGRESS ON INCARCERATION AND**

19 **COMMUNITY-BASED HEALTH SERVICES.**

20 It is the sense of Congress that—

21 (1) no individual in the United States should be
22 incarcerated for the purpose of being provided with
23 health care that is unavailable to the individual in
24 the individual's community;

1 (2) each State and unit of local government
2 should establish programs that offer community-
3 based health services (including mental health and
4 substance use disorder services) commensurate with
5 the principle stated in paragraph (1); and

6 (3) Federal reimbursement for expenditures on
7 medical assistance made available through the
8 amendments made by this Act should not supplant
9 an investment in community-based services.

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