

117TH CONGRESS
1ST SESSION

S. 836

To amend subpart 1 of part B of title IV of the Social Security Act to ensure that mental health screenings and assessments are provided to children and youth upon entry into foster care.

IN THE SENATE OF THE UNITED STATES

MARCH 18, 2021

Mr. BLUNT (for himself, Ms. STABENOW, Mr. BOOZMAN, and Mr. CASEY) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend subpart 1 of part B of title IV of the Social Security Act to ensure that mental health screenings and assessments are provided to children and youth upon entry into foster care.

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 “Timely Mental Health
5 for Foster Youth Act”.

1 **SEC. 2. TIMELY MENTAL HEALTH SCREENINGS AND AS-**
2 **SESSMENTS FOR CHILDREN AND YOUTH**
3 **UPON ENTRY INTO FOSTER CARE.**

4 (a) STATE AND TRIBAL PLAN REQUIREMENT.—Sec-
5 tion 422(b)(15)(A) of the Social Security Act (42 U.S.C.
6 622(b)(15)(A)) is amended—

7 (1) in clause (i), by inserting “and that require
8 that an initial mental health screening of any child
9 in foster care be completed not later than 30 days
10 after the date the child enters into foster care and,
11 in the case of any child in foster care for whom a
12 mental health issue is identified in such initial
13 screening, that a comprehensive assessment of the
14 mental health of the child be completed not later
15 than 60 days after the date the child enters into fos-
16 ter care” before the semicolon; and

17 (2) by striking clause (ii) and inserting the fol-
18 lowing:

19 “(ii) how health needs identified
20 through such screenings and assessments
21 will be monitored and treated for the dura-
22 tion of a child’s placement in foster care,
23 including through annual mental health
24 screenings, with respect to emotional trau-
25 ma associated with a child’s maltreatment
26 and removal from home, and, as appro-

1 priate, follow-up assessments and treat-
 2 ment;”.

3 (b) TECHNICAL AMENDMENT.—Section
 4 422(b)(15)(A) of such Act (42 U.S.C. 622(b)(15)(A)) is
 5 further amended in the matter before clause (i), by strik-
 6 ing “provides” and inserting “provide”.

7 (c) EFFECTIVE DATE.—

8 (1) IN GENERAL.—Except as provided in para-
 9 graph (2), the amendments made by this section
 10 shall take effect on October 1, 2020.

11 (2) DELAY PERMITTED IF STATE LEGISLATION
 12 REQUIRED.—In the case of a State plan approved
 13 under subpart 1 of part B of title IV of the Social
 14 Security Act which the Secretary of Health and
 15 Human Services determines requires State legisla-
 16 tion (other than legislation appropriating funds) in
 17 order for the plan to meet the additional require-
 18 ments imposed by this section, the State plan shall
 19 not be regarded as failing to comply with the re-
 20 quirements of such part solely on the basis of the
 21 failure of the plan to meet such additional require-
 22 ments before the first day of the first calendar quar-
 23 ter beginning after the close of the first regular ses-
 24 sion of the State legislature that begins after the
 25 date of enactment of this section. For purposes of

1 the previous sentence, in the case of a State that has
 2 a 2-year legislative session, each year of such session
 3 shall be deemed to be a separate regular session of
 4 the State legislature.

5 **SEC. 3. TECHNICAL ASSISTANCE TO STATES.**

6 The Assistant Secretary for the Administration for
 7 Children and Families and the Administrator for the Cen-
 8 ters for Medicare & Medicaid Services jointly shall provide
 9 technical assistance to States on how to comply with the
 10 amendments made by section 2(a) of this Act. The Assist-
 11 ant Secretary and Administrator should consult with other
 12 relevant Federal agencies on the development of such tech-
 13 nical assistance, which should take into account evidence-
 14 based best practices.

15 **SEC. 4. DATA COLLECTION.**

16 (a) IN GENERAL.—The Secretary of Health and
 17 Human Services, in consultation with State and local pub-
 18 lic officials responsible for administering child welfare pro-
 19 grams, child welfare advocates, pediatric mental health ex-
 20 perts, and researchers shall—

21 (1) identify data elements needed to track—

22 (A) the number of children receiving an
 23 initial mental health screening required under
 24 section 422(b)(15)(A)(i) of the Social Security

1 Act (42 U.S.C. 622(b)(15)(A)) (as amended by
2 section 2(a) of this Act);

3 (B) whether or not such required initial
4 mental health screening occurs within 30 days
5 of a child's entry or re-entry into foster care;

6 (C) the number of children who receive a
7 follow-up comprehensive assessment required
8 under section 422(b)(15)(A)(i) of the Social Se-
9 curity Act (42 U.S.C. 622(b)(15)(A)) (as so
10 amended);

11 (D) whether or not such required follow-up
12 comprehensive assessment occurs within 60
13 days of a child's entry or re-entry into foster
14 care;

15 (E) the number of children in foster care
16 who are referred for mental health services; and

17 (F) the number and characteristics of such
18 children who receive mental health services
19 after being referred for such services; and

20 (2) develop a plan to collect the information de-
21 scribed in paragraph (1) from States administering
22 a State plan under subpart 1 of part B of title IV
23 of the Social Security Act (42 U.S.C. 621 et seq.)
24 beginning with the second fiscal year that begins
25 after the date of enactment of this Act.

1 (b) REPORT TO CONGRESS.—Not later than 12
2 months after the date of enactment of this Act, the Sec-
3 retary of Health and Human Services shall submit to the
4 Committee on Finance of the Senate and the Committee
5 on Ways and Means of the House of Representatives a
6 report detailing the plan and timetable for collecting the
7 information described in subsection (a)(1) from States.

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