

119TH CONGRESS
1ST SESSION

S. 931

To amend title XVIII of the Social Security Act to provide incentives for behavioral health integration.

IN THE SENATE OF THE UNITED STATES

MARCH 11 (legislative day, MARCH 10), 2025

Ms. CORTEZ MASTO (for herself and Mr. CORNYN) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to provide incentives for behavioral health integration.

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 “Connecting Our Med-
5 ical Providers with Links to Expand Tailored and Effec-
6 tive Care” or the “COMPLETE Care Act”.

7 **SEC. 2. MEDICARE INCENTIVES FOR BEHAVIORAL HEALTH** 8 **INTEGRATION WITH PRIMARY CARE.**

9 (a) INCENTIVES.—

(1) IN GENERAL.—Section 1848(b) of the Social Security Act (42 U.S.C. 1395w–4(b)) is amended by adding at the end the following new paragraph:

“(13) INCENTIVES FOR BEHAVIORAL HEALTH INTEGRATION.—

“(A) IN GENERAL.—For services described in subparagraph (B) that are furnished during 2027, 2028, or 2029, instead of the payment amount that would otherwise be determined under this section for such year, the payment amount shall be equal to the applicable percent (as defined in subparagraph (C)) of such payment amount for such year.

“(B) SERVICES DESCRIBED.—The services described in this subparagraph are services identified, as of January 1, 2024, by HCPCS codes 99484, 99492, 99493, 99494, G2214, and G0323 (and any successor or similar codes as determined appropriate by the Secretary).

“(C) APPLICABLE PERCENT.—In this paragraph, the term ‘applicable percent’ means, with respect to a service described in subparagraph (A), the following:

1 “(i) For services furnished during
2 2027 , 175 percent.

3 “(ii) For services furnished during
4 2028, 150 percent.

5 “(iii) For services furnished during
6 2029, 125 percent.”.

7 (2) WAIVER OF BUDGET NEUTRALITY.—Section
8 1848(c)(2)(B)(iv) of such Act (42 U.S.C. 1395w–
9 4(c)(2)(B)(iv)) is amended—

10 (A) in subclause (V), by striking “and” at
11 the end;

12 (B) in subclause (VI), by striking the pe-
13 riod at the end and inserting “; and” and

14 (C) by adding at the end the following new
15 subclause:

16 “(VII) the increase in payment
17 amounts as a result of the application
18 of subsection (b)(13) shall not be
19 taken into account in applying clause
20 (ii)(II) for 2027, 2028, or 2029.”.

21 (b) TECHNICAL ASSISTANCE FOR THE ADOPTION OF
22 BEHAVIORAL HEALTH INTEGRATION.—

23 (1) IN GENERAL.—Not later than January 1,
24 2026, the Secretary of Health and Human Services
25 (in this subsection referred to as the “Secretary”)

1 shall enter into contracts or agreements with appro-
2 priate entities to offer technical assistance to pri-
3 mary care practices that are seeking to adopt behav-
4 ioral health integration models in such practices.

5 (2) BEHAVIORAL HEALTH INTEGRATION MOD-
6 ELS.—For purposes of paragraph (1), behavioral
7 health integration models include the Collaborative
8 Care Model (with services identified as of January
9 1, 2024, by HCPCS codes 99492, 99493, 99494,
10 and G2214 (and any successor codes)), the Primary
11 Care Behavioral Health model (with services identi-
12 fied as of January 1, 2024, by HCPCS codes 99484
13 and G0323 (and any successor code)), and other
14 models identified by the Secretary.

15 (3) IMPLEMENTATION.—Notwithstanding any
16 other provision of law, the Secretary may implement
17 the provisions of this subsection by program instruc-
18 tion or otherwise.

19 (4) FUNDING.—In addition to amounts other-
20 wise available, there is appropriated to the Secretary
21 for each of fiscal years 2025 through 2029, out of
22 any money in the Treasury not otherwise appro-
23 priated, such sums as are necessary, to remain avail-

- 1 able until expended, for purposes of carrying out
- 2 this subsection.

