

# Improving the Delivery of Children's Mental Health Services Will Help Parents Desperately Seeking Help for Their Kids

Testimony to the Senate Finance Committee on June 28, 2022

**Children, families, schools, and communities need state leaders to continue making children's mental health a priority in the 2023 legislative session.** The Legislature needs to address gaps in community-based mental health services for children with significant mental health needs, including those in crisis. Texas leaders must help provide students with safe and supportive schools and ensure parents have school-based tele-mental health options for their children. It will take more than a single innovative program, state agency, legislative session, or budget cycle to close these gaps. However, there are key steps the Texas Legislature can take in the 2023 legislative session to continue building a statewide system of children's mental health care.

**Thanks to the Texas Legislature, families have more options today than they did 10 years ago when seeking mental health care for their children.** In recent sessions, Texas lawmakers passed laws and provided funding to make it easier for parents to obtain mental health services for their children in school settings, pediatrician's offices, community mental health providers, and psychiatric facilities.

**Parents in Texas are worried about their children's mental health.** Feelings of hopelessness, depression, and thoughts of suicide among Texas youth have risen at an alarming pace over the past decade.<sup>1</sup> In the decade prior to the pandemic, from 2009 to 2019, there was a 35 percent increase in the number of Texas high school students who reported that they attempted suicide.<sup>2</sup> An estimated 350,000 Texas kids and adolescents experience severe mental health needs in a given year.<sup>3</sup> National, state, and local experts are ringing the alarm over the surge of children's mental health concerns.<sup>4</sup>

**While progress has been made, significant gaps remain.** As more children are struggling with their mental health, a shortage of appropriate programs and services<sup>5</sup> – and the shortage of qualified people who can deliver them<sup>6</sup> – prevents many families from accessing the help their children need. When children's mental health needs go unmet, it puts their health and wellbeing at risk and creates ripple effects that put pressure on schools, communities, and the state.

## Leaders Should Address Gaps in Community-Based Mental Health Services for Children with Significant Mental Health Needs, Including Those in Crisis.

Despite increased investment in recent years, there are still significant gaps in mental health care for children with more intensive needs. **For example, YES Waiver services help keep kids with their families and out of hospitals, residential treatment centers, and foster care – but many Texas families are stuck waiting for these services.** From April 2021 to March 2022, 2,656 children statewide were on YES Waiver Program inquiry lists,<sup>7</sup> nearly double the number of children who were enrolled in the program in any given quarter during those twelve months. HHSC and mental health providers identify workforce challenges and low reimbursement rates for YES services as top barriers.<sup>8</sup> Texas leaders should increase HHSC funding to shore up capacity within Local Mental Health Authorities (LMHAs) to increase the number of children served in YES Waiver programs.

**There are also delays in implementing mental health services envisioned in SB 1177 (2019).** This law directs Medicaid health plans to cover cost-effective mental health services “in lieu of” – or as an alternative to – inpatient hospitalization or outpatient services with parental consent. HHSC has identified services to be rolled out in phases – including Multisystemic Therapy; pediatric crisis stabilization, and coordinated specialty care for youth experiencing a mental health crisis – but implementation is way behind schedule. The Legislature’s pending proposals in response to the Uvalde tragedy include funding for those same three services: Multisystemic Therapy, coordinated specialty care, and pediatric crisis stabilization. Those important mental health services will reach more children if the Legislature also ensures that HHSC moves quickly and efficiently to add these treatment options as Medicaid benefits, as directed by SB 1177, and ensures that reimbursement rates are high enough for mental health providers to offer the service. Adding these services as Medicaid benefits would also help offset general revenue costs.

## Texas Leaders Must Also Reach Children Before They Are in a Mental Health Crisis.

Many of the services currently in place in Texas focus on stabilizing children when they are in crisis. It’s a key goal but can’t be the only approach.

The Texas Child Mental Health Care Consortium’s TCHAT tele-mental health program, which currently reaches 40 percent of Texas school districts, is an important step to reaching children before a crisis. We appreciate the Legislature’s pending proposal to expand TCHAT statewide so that more families can access tele-mental health options at school. Over \$56 million in federal pandemic relief funding allocated to TCHAT during the 2021 legislative sessions will lapse in 2023. The Legislature should adopt sustainable funding strategies that enable TCHAT to continue its expansion statewide, reach more schools and students in areas with limited mental health services, and reach more children before they are in a crisis.

However, TCHAT on its own – even as it expands to more districts – cannot be the entirety of the state’s strategy for reaching children before they are in a mental health crisis.

## To Reach Children Before They Are in Crisis, the Legislature Should Provide Dedicated School Mental Health Funding.

Schools can play a critical role in reaching children before they are in crisis by providing low-intensity, non-clinical support to students and – for students who need a little more support – giving parents the opportunity to sign their kids up for mental health treatment. Some school districts are able to identify local funding sources to partner with community mental health providers, but **Texas currently does not provide dedicated funding to support these school-based mental health services.**

The Legislature passed comprehensive student mental health legislation in 2019 (HB 18 and SB 11). But school districts are not able to implement and sustain comprehensive mental health strategies because the state does not provide a reliable or sufficient source of funding for them. Instead, districts receive school safety funding from the state (the School Safety Allotment), which is unpredictable, limited to about \$10 per student, and intended to cover everything from building security and cameras to school counselors. The per-student allotment to smaller districts with lower student enrollments is not enough for districts to hire staff to support mental health. For example, a district serving 1,000 students receives an annual allotment of \$9,720 that would be used to support school security **and** student mental health strategies.

The Legislature should provide dedicated, sustained school mental health funding by increasing the School Safety Allotment funding **and** directing a portion of the Allotment to promote student mental wellness.

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<sup>1</sup> Texas Department of State Health Services and the Centers for Disease Control and Prevention. 2011 and 2019 Texas Youth Risky Behavior Surveillance Surveys; HHSC (May 2020) Report on Suicide and Suicide Prevention in Texas; Joseph Tkacz, Brenna L. Brady, Increasing rate of diagnosed childhood mental illness in the United States: Incidence, prevalence, and costs, Public Health in Practice, Volume 2, 2021. Available at <https://www.sciencedirect.com/science/article/pii/S2666535221001294#bib8>.

<sup>2</sup> Texas Department of State Health Services and the Centers for Disease Control and Prevention. 2011 and 2019 Texas Youth Risky Behavior Surveillance Surveys.

<sup>3</sup> Meadows Mental Health Policy Institute. <https://mmhpi.org/work/children-youth/>.

<sup>4</sup> American Academy of Pediatrics. (10/19/2021) AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health.

<sup>5</sup> Texas Health and Human Services Commission. Community Resource Coordination Groups of Texas Biennial Report, 2020. Available at <https://www.hhs.texas.gov/reports/2020/11/community-resource-coordination-groups-texas-biennial-report-2020>. While the report does not identify specific programs or services in which families are having difficulty accessing, it points to broad challenges families face in being able to access the services their children need.

<sup>6</sup> Hogg Foundation for Mental Health. (2016). The Texas Mental Health Workforce: Continuing Challenges And Sensible Strategies

<sup>7</sup> YES Waiver Annual Inquiry List data provided by HHSC for April 2021-March 2022.

<sup>8</sup> Conversations with the Texas Health and Human Services Commission and the Texas Council of Community Centers in May 2022. Children’s Mental Health Crisis Services Task Force (2018). Recommendations to Improve Children’s Mental Health Crisis.