

Texas Children and the 2023 Legislative Session

Review of Policy Progress During
the 2023 Texas Legislative Session:

Children's Mental Health

June 19, 2023



Review of Policy Progress During the 2023 Texas Legislative Session:

Children's Mental Health

After the height of the COVID pandemic and the 2022 school massacre in Uvalde, state leaders have publicly emphasized the importance of addressing the state's decade-long rise in children's mental health challenges. With a \$33 billion surplus, the Legislature also had funding available to make big investments in mental health this session. However, there were mixed results on children's mental health policy this session. The Legislature deserves credit for increasing the state's investment in mental health. Our greatest disappointment, however, was the Legislature's failure to provide dedicated funding to school districts to support student mental health.

The largest mental health investment this session for children and adults was through SB 30, the supplemental budget bill. It provided \$2.2 billion to expand the number of hospital beds at existing mental health hospitals, build new mental health hospitals and facilities, and make other mental health infrastructure investments. Staffing those beds and facilities, however, will continue to be a challenge.

The Legislature took a number of other modest steps in the right direction on children's mental health. Legislators bumped up funding for community mental health services for children (through Local Mental Health Authorities) by \$33 million, for a total of \$221 million. The Legislature passed SB 26 to create an "Innovation Grant" program to expand access to mental health services for children and families statewide and appropriated \$15 million for it. Lawmakers also increased funding for youth mobile crisis outreach teams from \$8 million to \$14 million in the two-year budget, which will help support three additional youth mobile crisis outreach teams for children in foster care. To support student mental health, the Legislature increased funding for the important TCHATT telehealth program from \$50 million to \$142 million for the biennium with the aim of extending TCHATT to all school districts. They also increased Mental Health First Aid training requirements for teachers through HB 3. To begin to address shortages in the mental health workforce serving children and adults, the

Legislature passed multiple bills expanding access to the state's Loan Repayment Program for Mental Health Professionals.

We applaud those steps to support children's mental health, but they leave a significant gap.

The Legislature made little progress on prevention and other strategies that reach children before a crisis. Additionally, the Legislature's efforts on children's mental health this session will only reach a narrow population of students at a time when a large proportion of the state's students are facing mental health challenges. Consider that the TCHATT telehealth program with school districts championed by the Legislature provided services to 0.3 percent of the students on the campuses it served in fiscal year 2022. However, in 2021, 33 percent of Texas high school students reported persistently feeling stressed, anxious, or depressed during the previous month and 22 percent seriously considered suicide, according to the Texas Youth Risk Behavior Survey.

To fill in this gap, we joined with our partners in calling for the Legislature to create a Student Mental Health Allotment to provide dedicated funding to school districts to support mental health, particularly as federal pandemic relief funding for student mental health expires. If passed, the funding would have helped districts hire TCHATT liaisons; hire social workers and licensed counselors; and collaborate

with community-based organizations like Local Mental Health Authorities to provide options for parents who decide to seek mental health support for their kids. If the Legislature provided this direct funding to districts, it could have also gone towards implementing programs to prevent suicide, bullying, and substance use and helping students develop skills to manage anxiety and conflict in order to promote a positive school climate. Campuses would see significant benefits in learning and academic performance, student health and safety, and student behavior.

Unfortunately, the Legislature did not create the Student Mental Health Allotment or take other steps to provide direct mental health funding to school districts.

The Legislature did consider proposals to significantly increase funding for the School Safety Allotment, which districts can use for school security as well as mental health. However, through HB 3, the Legislature only marginally increased school safety funding while also pushing all school campuses to provide an armed guardian, making it even harder for districts to use a portion of the school safety funding for mental health strategies. The Legislature also failed to pass bills that would have expanded school districts' ability to bill Medicaid for student mental health services. Additionally, the Legislature did not provide overall funding for school districts to a level that keeps up with student enrollment growth and inflation, despite the shortage of teachers in many schools and other challenges.

While the Student Mental Health Allotment did not pass, this session showed that there is growing awareness at the Legislature about the need to provide this dedicated mental health funding to school districts.

It was the first session that the bill was filed, and during debates on school safety legislation on the House floor and Senate floor, there were important conversations about the need for policymakers to work during the interim to ensure schools have the necessary resources to support student mental health.



The Legislature's work on student mental health also fell short in other areas.

We are disappointed that the Legislature failed to provide any additional funding to increase reimbursement rates so YES Waiver services can reach more children with complex mental health challenges. The House and Senate proposed small increases for YES Waiver services in their respective budgets but removed the funding in the conference committee. Moreover, a number of bills to support children's mental health passed the House but not the Senate. For example, the Senate did not pass bills that were filed to ensure that health insurance, including Medicaid, covers certain children's mental health services such as Multisystemic Therapy or legislation that was filed to allow schools to bill Medicaid for mental health services in more circumstances.

As the Legislature considers its next steps on children's mental health after this legislative session, we are hopeful that it will build off the initial discussions this session regarding a Student Mental Health Allotment and commit to prioritizing children's mental health.

OUTCOMES FOR KEY CHILDREN'S MENTAL HEALTH LEGISLATION

* Indicates a bill aligns with a recommendation of the Texas School Readiness Dashboard.

PASSED

Support Children

HB 1211 by Rep. Guillen

Extends eligibility for the Loan Repayment Program for Mental Health Professionals to include licensed specialists in school psychology.

HB 2059 by Rep. Price

Expands eligibility of individuals who can participate in the state's mental health first aid training program, including youth, first responders, and military service members and veterans who want to participate.

HB 2100 by Rep. Price

Similar to SB 804 by Sen. Schwertner
Also passed as an amendment to SB 532

Extends eligibility for the Loan Repayment Program for Mental Health Professionals to include mental health professionals working in every Local Mental Health Authority and state hospital.

SB 26 by Sen. Kolkhorst

Develops a Quality Incentive Payment Program for local mental health providers; requires audits for Local Mental Health Authorities and Local Behavioral Health Authorities; and establishes an Innovation Matching Grant Program to help community-based mental health programs provide early intervention and treatment for children and families.

SB 532 by Sen. West

Similar to HB 1551 by Rep. Anchia

Reduces the number of years (from five to three) required for a person to participate in the Loan Repayment Program for Mental Health Professional and requires public universities to share information about mental health services on campus.

Impact Children

SB 798 by Sen. Middleton

Similar to HB 5006 by Rep. Buckley

Eliminates the requirement of 2 years of classroom teaching experience before becoming a certified school counselor.

SB 850 by Sen. Blancox

Adds Educational Service Centers to the Texas Child Mental Health Care Consortium.

SB 1727 by Sen. Schwertner

Continues the functions of the Texas Juvenile Justice Department (TJJD) for two more years, setting up another Sunset review for the 2025 session, and makes additional juvenile justice policy changes.

Raise Concerns

HB 3 by Rep. Burrows

Takes the positive step of requiring district employees who interact with students to complete Mental Health First Aid training but also pushes campuses to provide an armed guardian on school campuses and only marginally increases school safety funding for districts. As a result, the bill makes it even harder for districts to use a portion of the school safety funding for mental health strategies.

DID NOT PASS

Support Children

HB 15 by Rep. S. Thompson

Would have created a Texas Mental Health and Brain Research Institute.

HB 98 by Rep. Moody *

Similar to SB 113 by Sen. Menéndez

Would have allowed schools to seek Medicaid reimbursement under the School Health and Related Services (SHARS) program for mental health services provided to students enrolled in Medicaid.

HB 340 by Rep. S. Thompson

Would have required health insurance plans to cover mental health services for serious emotional disturbance of a child.

HB 1898 by Rep. Jetton

Similar to SB 1365 by Sen. Hinojosa

Would have established a grant program to fund children's hospitals' delivery of mental and behavioral health services.

HB 1157 by Rep. Lozano

Similar to SB 891 by Sen. Zaffirini, SB 1101 by Sen. Paxton, and HB 2881 by Rep. Plesa

Would have allowed for excused absences from school for students to attend mental health care appointments.

HB 1167 by Rep. Romero

Similar to SB 47 by Sen. Zaffirini

Would have streamlined the licensing process for professional counselors, social workers, and other mental health professionals and updated standards for qualified mental health professionals that seek licensure reciprocity in Texas.

HB 1248 Rep. Guillen

Would have extended eligibility for the Homes for Texas Heroes home loan program to include social workers.

HB 1167 by Rep. Romero

Similar to SB 47 by Sen. Zaffirini

Would have streamlined the licensing process for professional counselors, social workers, and other mental health professionals and updated standards for qualified mental health professionals that seek licensure reciprocity in Texas.

HB 1248 Rep. Guillen

Would have extended eligibility for the Homes for Texas Heroes home loan program to include social workers.

HB 1358 by Rep. Harless

Would have added bullying prevention to school campus improvement plans.

HB 1502 by Rep. Plesa

Would have required trauma-informed care training for certain judges and attorneys.

HB 1571 by Rep. Lozano *

Would have allowed schools to seek Medicaid reimbursement under the SHARS program for health-related services, including mental health services, provided to students enrolled in Medicaid.

HB 1879 by Rep. Darby

Would have allowed licensed marriage and family therapist associates, licensed master social workers, and licensed professional counselor associates under clinical supervision to be reimbursed through Medicaid while completing their clinical training.

HB 2237 by Rep. S. Thompson *

Similar to SB 1384 by Sen. Miles

Would have created the Child First grant program, which would enable community organizations to provide early childhood mental health or prevention services for low-income, high-risk families.

HB 2337 by Rep. Oliverson

Would have required Medicaid coverage for certain intensive outpatient services and partial hospitalization services.

HB 2361 by Rep. Price

Would have allowed a Local Mental Health Authority to hire a person who is a licensed master social worker or who has been issued a licensed professional counselor associate license by the Texas State Board of Examiners of Professional Counselors if granted a waiver by the Health and Human Services Commission.

HB 2404 by Rep. A. Johnson

Similar to SB 2278 by Sen. Blanco

Would have required Medicaid coverage for functional family therapy services.

HB 2557 by Rep. Buckley

Similar to SB 1100 by Sen. Paxton

Would have added Texas to the Licensed Professional Counselors Compact, which aims to remove obstacles to licensed professional counselors practicing interstate via telehealth or physically moving between states and obtaining another state's license.

HB 2638 by Rep. A. Johnson

Similar to SB 2279 by Sen. Blanco

Would have required Medicaid coverage for multisystemic therapy services.

HB 3140 by Rep. K. King

Would have extended eligibility for the Teach for Texas Loan Repayment Assistance Program to include mental health professionals in public schools.

HB 3723 by Rep. Gerdes

Would have created the Rural Workforce Training Grant Program.

SB 948 by Sen. West

Similar to HB 2451 by Rep. Allison

Would have created a mental health allotment to provide school districts with dedicated funding to support comprehensive student mental health initiatives, including to support salaries of a school counselor or school social worker.

Raise Concerns

SB 595 by Sen. Kolkhorst

Similar to HB 1149 by Rep. Swanson and provisions of HB 890 by Rep. K Bell

Would have required written parental consent before providing any psychiatric or psychological test, exam, or treatment — a requirement supported by advocates — but is defined in a broad manner to include regular surveys, check-ins, or screenings. It could have unintended consequences in mental health crisis situations, in routine staff conversations with students about their mood or well-being, and other scenarios.



Texans Care for Children is a statewide, non-profit, non-partisan, multi-issue children's policy organization. We drive policy change to improve the lives of Texas children today for a stronger Texas tomorrow. We envision a Texas in which all children grow up to be healthy, safe, successful, and on a path to fulfill their promise. www.txchildren.org

CONNECT WITH US

