

Texas Budget Priorities that will Keep Children Safe and Families Together

Testimony to the Senate Finance Committee Article II

Recommendations Relating to the HHSC Budget - Children's Mental Health

Texas must address the growing crisis in children's mental health with dedicated funding for behavioral health support and services for children and their caregivers. We offer recommendations based on the Children's Behavioral Health Strategic Plan – a legislatively-required Plan developed by a subcommittee of the Texas Statewide Behavioral Health Coordinating Council (SBHCC) – for the Senate Finance Committee to consider as it shapes the budget for the Health and Human Services Commission (HHSC). These recommendations will improve the state's capacity for serving children with complex mental health challenges so that they can remain safe at home with their families and out of foster care. First, the committee should increase support for the Youth Empowerment Services (YES) Waiver, which effectively prevents or reduces the need for out-of-home care, including placement in foster care for children across the state. Second, we urge lawmakers to increase funding for three key types of children's mental health services: intensive mental health services, community-based services, and crisis services.

Increase Access to Community-Based Mental Health Services to Address the Rise in Children's Mental Health Challenges and Keep Children With Their Families and Safely Out of Foster Care

Children's mental health challenges have been on the rise nationally and across the state. In Texas, nearly a quarter of parents surveyed from 2021-2022 (23 percent) reported their child had one or more mental, emotional, developmental, or behavioral problem.¹ From 2005 to 2023, the number of Texas high school students reporting suicide attempts rose by 31 percent.² Mental health crisis visits at Texas Children's Hospital in Houston increased by 800% from 2019 to 2022.³ If left unaddressed, mental health struggles can escalate to a point where parents are at a loss about how to help their children, potentially resulting in the child entering the foster care or juvenile justice system.

While most children enter foster care because of concerns about abuse or neglect, in FY 2024, **6 percent of youth who entered foster care did so because they have complex mental health challenges that their families are unable to manage without additional support.**⁴ The Child and Family Services Review Process, a periodic federal review of state child welfare systems, found that one of the biggest challenges for the Texas foster care system is connecting children to needed mental health services.⁵ In its Mental Health Services Team Report, one of the Department of Family and Protective Services' (DFPS) key recommendations was to work with HHSC to build a full array of behavioral health services.⁶

The Children’s Behavioral Health Strategic Plan Outlines the Following Areas as Priorities for Increased Funding:

Intensive Mental Health Services for Texas Youth

- Increased funding for Intensive Outpatient Programs (IOP) and Partial Hospitalization Programs (PHP) would increase access to intensive mental health services for Texas youth. These services, offered in clinics or hospitals, would help youth “step down” from a higher level of care (such as mental health hospitalization) and back to their daily lives. Services like IOP and PHP help children who are struggling get more intensive therapies if they need more than regular therapy but do not need 24-hour hospital care. Therapeutic support and treatment are available for several hours daily so that children can go to school and return home to their families at night.

Effective Community Services for Youth with High Needs

- Funding evidenced-based therapies like Multisystemic Therapy (MST) and Functional Family Therapy (FFT) would increase access to home- and community-based interventions. These therapies improve family dynamics, reduce youth behavioral issues, and prevent foster care placements.
- MST focuses on youth with serious mental health challenges, enhancing family and school outcomes. **Studies have shown that 86 percent of children at risk of entering foster care who receive MST targeted to help families involved with Child Protective Services remain at home and avoid placement in the foster care system.**⁷ As of August 2024, 22 MST teams in Texas were actively accepting referrals, with 280 total youth served since the project’s inception in September 2022.⁸ About 7,000 Texas youth and their families could utilize MST services, but Texas would need about 140 total teams to meet this need.⁹
- FFT targets family relationships and has demonstrated a reduction in criminal recidivism and out-of-home placements. Research indicates that children in families who participate in FFT are 3.5 times less likely to be removed from their homes and 50 percent less likely to face new abuse or neglect allegations when mental health concerns are involved.¹⁰

Crisis Services

- Increased funding for Crisis Stabilization and Crisis Respite Services would help avoid costly emergency room visits, hospital stays, and jails to address mental health crises.¹¹ These services also reduce severe symptoms of mental or behavioral health challenges, which will allow more youth to stay safely with their caregivers in their homes and communities.
- Crisis stabilization provides immediate support to address acute symptoms through face-to-face counseling at a crisis stabilization unit, home, or school.
- Crisis respite services offer short-term relief for families struggling to care for a loved one with severe mental illness, either in-home or out-of-home. Expanding access to crisis respite is a key recommendation of the DFPS Mental Health Services Team.¹²

Recommendations

- 1) Fully fund HHSC's \$61.9 million Exceptional Item #12 request to expand critical services like the Youth Empowerment Services (YES) Waiver.** The YES Waiver effectively supports youth with complex mental health challenges through specialized therapies and supports tailored to prevent out-of-home placements and ensure youth remain with their families. Studies have shown that youth enrolled in the YES Waiver demonstrated significant improvements in emotional and behavioral problems.¹³ Additionally, recent data show the effectiveness of YES Waiver services in preventing crises. Youth who participated in the program saw a 48% decrease in crisis service use, demonstrating the program's impact in stabilizing children in their communities.¹⁴ **Unfortunately, the number of Texas children served in the program is falling — even as demand rises.** There's been a sharp increase in families asking for YES Waiver services, with 3,109 inquiries in FY 2023 — a 43% increase since 2021.¹⁵ However, despite the growing need, the number of enrolled children dropped by 19% during the same period, with only 2,227 youth served in FY 2023.¹⁶ Mental health providers cite low reimbursement rates set by HHSC as a major obstacle preventing them from serving more children. **Unfortunately, the Senate's base budget decreases YES Waiver funding compared to the last biennium and is lower than HHSC's requested amount by \$5 million.** The Legislature should increase funding in the YES Waiver to support youth with complex mental health needs and keep more children safely at home.
- 2) We support the added funding in the Senate budget to provide for additional Youth Crisis Outreach Teams (YCOT) and enhance crisis mental health services within existing Teams.** We are grateful for this increased funding from last session. Additional funding is needed to enhance capacity for all youth with complex mental health needs. The House proposes YCOT at a funding level \$18 million higher, and we are hopeful that lawmakers will work towards that higher amount in future versions of the budget. In 2023, the Legislature funded state grants to some local mental health authorities to operate YCOTs, designed to address the immediate needs of youth facing crisis and provide up to 90 days of support. Current funding supports eight total teams, including three prioritizing children involved in DFPS, giving families more options than they had 10 years ago to help their child facing a mental health crisis. Yet, large portions of the state are untouched or have limited access to crisis stabilization.¹⁷ Increased YCOT funding will enable more youth and families to access crisis services in more areas of Texas.
- 3) Increase funding for three key types of children's mental health services – intensive mental health services, crisis services, and community services for youth with complex mental health needs – which the Children's Behavioral Health Strategic Plan identified as priority areas for increased funding.** We are glad to see state leaders prioritize children's mental health by increasing funding in the base budget bills. The funding allocated in Strategy D.2.1 (Community Mental Health Services) can be used to deliver a range of mental health services, including therapy sessions at a Local Mental Health Authority or to operate Youth Crisis Outreach Teams (mentioned above). However, the *full range* of services must be available so parents can choose what is medically necessary and best for their child. By funding more intensive mental health services, community-based services for youth with more complex needs, and crisis services, more children will have access to the care they need when and where they need it.

Endnotes

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3. Children's Health Care Report (2023) <https://kidshealthcarereport.ccf.georgetown.edu/states/texas/#:~:text=Employer%2DSponsored,children%20participate%20in%20Medicaid/CHIP>
4. Department of Family and Protective Services. (FY 2024). Number of Children Removed During Fiscal Year By Age and Removal Reason. https://databook.dfps.texas.gov/views/cps_sa_19_dfps/fyagereasonsummary?%3Adisplay_count=n&%3Aembed=y&%3AisGuestRedirectFromVizportal=y&%3Aorigin=viz_share_link&%3AshowAppBanner=false&%3AshowVizHome=n.
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11. Crisis Now: Transforming services is within our reach. National Action Alliance for Suicide Prevention: Crisis services task force; 2016. <https://crisisnow.com/wp-content/uploads/2020/02/CrisisNow-BusinessCase.pdf>
12. Department of Family and Protective Services. (2024, October). Mental Health Services Team Report. https://www.dfps.texas.gov/About_DFPS/Reports_and_Presentations/Rider_Reports/documents/2024/2024-10-01_Rider_44_Report.pdf.
13. Youth Empowerment Services Program Evaluation. <https://sites.utexas.edu/mental-health-institute/files/2013/02/YES-Evaluation-Report-Jan-2013.pdf>
14. Texas Health and Human Services Presentation to the House Youth Health & Safety Select Committee. <https://www.hhs.texas.gov/sites/default/files/documents/presentation-to-house-youth-health-safety.pdf>
15. Enrollment data provided by HHSC from FY 2018 - FY 2023. (on file with author).
16. Id.
17. Texas Health and Human Services Presentation to the House Youth Health & Safety Select Committee <https://www.hhs.texas.gov/sites/default/files/documents/presentation-to-house-youth-health-safety.pdf> (slide 5 and 15)