

# Children's Mental Health: The Time is Now

Massachusetts Consortium for Children with Special  
Health Care Needs Meeting

March 27<sup>th</sup>, 2007

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## Goals of the presentation

- Why is the time right-NOW?
- Quick overview of the campaign milestones
- Explain the details of the bill and budget requests
- Discuss ways you can get involved

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## The time is right: all public policy streams are aligned

Problem stream →

Political stream →

Policy Stream →



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## There is a need

- System seriously flawed and highly fragmented-well documented
- Estimated 100,000 MA children not receiving necessary services
- Children with mental health care needs more prevalent than leukemia, diabetes, and AIDS combined
- Landmark Rosie D decision has broad implications for children with SED-expected to profoundly alter the mental health system for children with public insurance

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## Campaign Launch: Background and milestones

- January, 2006, MSPCC and CHB joined forces to bring much needed reform to the field of children's mental health
  - Conducted extensive literature review, survey, and focus groups to further identify the major, persistent problems that needed to be addressed
- November, 2006-Policy paper released->50 groups endorsed
- November, 2006- Partnered with HCFA to launch a legislative/advocacy campaign
- January, 2007-Legislation filed by Rep Balsler and Sen. Tolman-60 legislators co-signed
- February, 2007-3 budget items requested
- May 7<sup>th</sup>, 2007-hearing date for the bill

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## Policy Paper to Legislation

- Builds on past reports
  - "Re-Recommendations" steps, actions, measures that have been said before, were never implemented and are still needed
- Moves the issue forward
  - Makes new recommendations based on the status of children's mental health and the fluid nature of the field
  - Creates a platform for advocates to combine forces around and campaign for better mental health services for children and families.
- "An Act Improving and Expanding Behavioral Health Services for Children in the Commonwealth"
  - HB 1872 - filed by Representative Ruth Balsler
  - SB 1133 -filed by Senator Steve Tolman
- Referred to Joint Committee on Mental Health and Substance Abuse

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## 4 themes from the bill

- 1) **Identify mental illness earlier in children by reaching them in familiar and easily accessible settings, especially schools, early education programs, and pediatricians' offices.**
- 2) **Ensure that when identified, the illness is treated in the least restrictive, appropriate setting.**
- 3) **Improve insurance coverage for children with mental health needs.**
- 4) **Restructure the oversight, evaluation and management of children's mental health services administered by the State.**

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## 1) Early Identification

- **Requires the Department of Early Education and Care to Provide Behavioral Health Consultations**
  - What this means: children will be screened for behavioral health problems in pre-schools and childcare settings. If they "screen positive" they will be referred to services.
- **Promotes Pediatric Provider Screening for Behavioral Health Problems**
  - What this means: children will be screened for behavioral health problems during their regular visits to pediatricians. If they "screen positive" they will be referred to services.
- **Promotes the Provision of Mental Health Consultative Services to Schools**
  - What this means: if someone (a teacher, guidance counselor, nurse, or principal) thinks that there is a mental health issue with a student, they will be able to access a mental health consultation. If the consultation leads to a "positive screen", the family will be connected to the appropriate services.
- **Evaluates Capacity of Schools to Meet Educational Needs of Children with Behavioral Health Issues**
  - What this means: we will find out if schools are meeting the mental health needs of children. If they are not meeting those needs, we will develop a plan to do so.

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## 2) Treatment in More Appropriate Settings

- **Creates a Fund to Move Children from Inpatient to Residential Facilities or community settings**
  - What this means: some children are "stuck" in acute care hospitals because state agencies can't agree on which agency pays for the appropriate treatment. This fund will pay to get children to the appropriate setting while long term plans are being worked out
- **Creates an Office of Compliance to Facilitate Implementation of recommendations with *Rosie D. v. Romney***
  - What this means: by creating an "office of compliance" we will ensure that this tremendous win and new plan is appropriately and quickly implemented.

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### 3) Improve insurance for children with mental health needs

- **Requires Insurers to Cover Mental Health Services on a Non-Discriminatory Basis**
  - What this means: insurers will have to treat mental health problems the same way they treat physical health problems.
- **Requires Insurers to Reimburse Mental Health Professionals for Collateral Behavioral Health Services for Children**
  - What this means: Insurers will pay for mental health professionals to spend more time coordinating care with the child/family, teachers, pediatricians, etc to maximize the treatment plan.
- **Expands MassHealth to Cover Youth Through Age 20**
  - What this means: children who receive MassHealth will not be cut off on their 18<sup>th</sup> birthday.

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### 4) Restructuring oversight, evaluation, and provision of services

- **Designates DMH as the leading voice for children's mental health**
  - What this means: DMH will oversee all state agency programs related to mental health. This will ensure that one agency is accountable and services are not missing or duplicated.
- **Grants DOI authority to regulate mental health carve out companies**
  - What this means: the "carve out" companies will be held to the same standards and regulations as the parent company
- **Permanently Establishes the Mental Health Commission for Children**
  - What this means: children's mental health issues will have a voice and presence in the Governor's office
- **Creates a Children's Behavioral Health Research and Evaluation Council**
  - What this means: Services will be better evaluated and rely on proven best practices

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### First Steps: Three budget requests

- **Setting up mental health consultative services to schools-\$1 million**
- **Creates a Fund to Move Children from Inpatient to Residential Facilities-\$2 million**
- **Creates an Office of Compliance to Facilitate Compliance with *Rosie D. v. Romney* -\$1 million**

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## Next Steps

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Your voice and support are needed

- Work with us on the campaign
- Join CHAC-sign up, get involved and receive regular updates
- Raise awareness of the campaign-get the word out
- Get involved in grassroots advocacy
- Contact your legislators-making calls or visits
- Keep track of your involvement
- Work with us on the campaign

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