September 29, 2021

The Honorable Charles Schumer  The Honorable Nancy Pelosi
Majority Leader Speaker
United States Senate United States House of Representatives
Washington, DC 20510 Washington, DC 20515

Dear Leader Schumer and Speaker Pelosi:

Thank you for your commitment to addressing the urgent challenges our country faces as we strive to recover from the COVID-19 pandemic. Throughout the pandemic, children and families have faced unprecedented circumstances. Social isolation, stress, uncertainty, and grief have taken a serious toll on children’s mental health and wellbeing. As organizations dedicated to the emotional, mental and behavioral health of children and their families, we urge you to prioritize their needs in the Build Back Better budget reconciliation package.

Children and adolescents are experiencing a serious mental health crisis which has worsened as a result of the pandemic, including significant increases in symptoms of anxiety, depression, and suicidal ideation. Over the course of the pandemic, demand for pediatric inpatient mental health services and other levels of crisis care has risen dramatically. In the first half 2021, children’s hospitals have seen 16.7% increase in mental health related emergencies and inpatient admissions among kids ages 5 to 17, compared to the same period in 2019. Similarly, beginning in May 2020, the CDC found that emergency department visits for suicide attempts began to increase among adolescents ages 12 to 17, with visits 39% higher than during the same period in 2019. As the need for inpatient care and other more intensive services has increased, many children are left boarding in emergency departments, awaiting space to become available in appropriate pediatric mental health care settings.

Childhood and adolescence are important periods for the prevention and treatment of mental health conditions, with 50% of mental illnesses presenting before age 14, and 75% before age 24. Unfortunately, many children do not receive the mental health services they need. Our nation’s pediatric mental health infrastructure is fragmented and has not received adequate support for decades. Shortages in essential mental health professionals and gaps in mental health services across the continuum of care delay kids’ access to critical mental and behavioral health services. Black, Hispanic, and indigenous children are disproportionately impacted by the limitations of our current system, leading to inequities in access to care and a lack of culturally appropriate care options.

As the public health emergency continues into another school year, the stressors of the pandemic persist for many children and adolescents. We urge Congress to act quickly to enact legislation that addresses the urgent crisis in children’s mental health and improves children’s access to culturally and developmentally appropriate mental and behavioral health services, both now and in the long term. We recommend that the House and the Senate incorporate these critical policies in budget reconciliation:
➢ **Strengthen mental health investment in Medicaid** – The Medicaid program is the largest payer of mental health services for children. We recommend strengthening federal support for pediatric mental health care by increasing Medicaid reimbursement rates for pediatric mental, emotional and behavioral health services to 100% of Medicare levels for similar services.

➢ **Invest in pediatric mental health infrastructure** – Incorporate **H.R. 4943, the Children’s Mental Health Infrastructure Act of 2021**, which provides $2 billion annually for five years in grants to children's health care providers to increase their capacity to provide pediatric mental health services, including through the construction and modernization of sites of care, as well as enhancements to digital infrastructure and security.

➢ **Enhance systems of care** – Children and adolescents need timely access to mental health services at the right level and in the appropriate setting, which cannot be achieved without access to a full range of mental and behavioral health services and robust coordination and integration of services in their communities. Congress should include **H.R. 4944, the Helping Kids Cope Act of 2021**, which provides flexible funding for communities to support a range of child and adolescent-centered, community-based prevention and treatment services, as well as to support efforts to better integrate and coordinate across the continuum of care.

➢ **Support the pediatric mental health workforce** - Shortages in the mental health workforce are persistent, more severe within pediatric specialties and projected to increase over time. **H.R. 4944, the Helping Kids Cope Act of 2021**, would also provide $100 million in funding annually for five years through HRSA grants dedicated to pediatric mental health workforce training and development, across a wide array of pediatric mental health fields.

➢ **Extend and enhance telehealth flexibilities** - Extend telehealth flexibilities in Medicare beyond the Public Health Emergency, including coverage for audio-only services and lifting originating site restrictions and geographic limitations. Enact **S. 1798, the Telehealth Improvement for Kids’ Essential Services (TIKES) Act**, which would promote access to telehealth services for children through Medicaid and CHIP, as well as study children’s utilization of telehealth to identify barriers and evaluate outcomes.

The state of children’s mental health is troubling. Congress must take swift action to strengthen pediatric mental health care capacity and ensure children receive the right care, in the right setting, at the right time. We, the undersigned organizations, urge you to prioritize the mental health and wellbeing of children and their families in the forthcoming Build Back Better budget reconciliation package.

American Association of Child and Adolescent Psychiatry
American Counseling Association
American Foundation for Suicide Prevention
American Mental Health Counselors Association
American Muslim Health Professionals (AMHP)
American Psychological Association
A New Deal for Youth Changemakers
Association for Ambulatory Behavioral Healthcare
Catholic Health Association of the United States
Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)
Children's Hospital Association
CLASP (The Center for Law and Social Policy)
Eating Disorders Coalition for Research, Policy, and Action
Family Voices
First Focus
International OCD Foundation
International Society for Psychiatric Nursing
The Jed Foundation
The Kennedy Forum
Mental Health America
National Alliance on Mental Illness
The National Alliance to Advance Adolescent Health
National Association for Behavioral Healthcare
National Association for Children’s Behavioral Healthcare
National Association for Pediatric Nursing Practitioners
National Association of State Mental Health Program Directors
National League for Nursing
Sandy Hook Promise
SMART Recovery
United Way Worldwide

CC:
Chairwoman Patty Murray
Chairman Ron Wyden
Chairman Frank Pallone