

Governor Andrew Cuomo
New York State Capitol Building
Albany, NY 12224

Assembly Speaker Carl Heastie
LOB 932
Albany, NY 12248

Senate Majority Leader Andrea Stewart-Cousins
188 State Street, LOB Room 907
Albany, NY 12247

Dear Governor Cuomo, Majority Leader Stewart-Cousins, and Speaker Heastie:

As children's advocates, behavioral health providers, pediatricians, and parents and caregivers in New York, we are urging you to address the children's behavioral health crisis before it is too late.

Children in New York have faced a year of loss, fear, isolation, disrupted learning, and financial distress. The harms of this pandemic to children's emotional and mental wellbeing are widespread and undeniable. [Fewer](#) children are able to access care, even as [more](#) children are experiencing mental health crises at [younger ages](#). The result has been [a surge](#) of children on [waitlists](#) or entering Emergency Rooms and hospitals in severe psychiatric distress.

Child psychiatrists, parents, pediatricians, and educators have been ringing the alarm about the long-term effects of this pandemic on children, especially when children were already part of a deeply underserved system. Over and over, we hear from state leaders about their concerns for the mental health of young people. Yet when it comes to the State Budget – the primary place where our state can make a substantive difference in the daily lives of struggling children and families – we are forced year after year to oppose cuts rather than advance transformative investments in children's behavioral health.

SAMHSA recently announced state awards of over \$3.3 billion from the December stimulus package. In New York, \$46 million will be awarded to the Community Mental Health Block Grant and \$104 million will be awarded to the Substance Abuse Prevention and Treatment Block Grant. New York State will also soon receive similar amounts as the result of another \$1.5 billion (\$3 billion nationwide) in the American Rescue Plan for each block grant. Between the December stimulus package and the American Rescue Plan, New York State will receive approximately \$300 million for mental health and addiction services. The American Rescue Plan also allocates \$2.7 billion in Medicaid FMAP increases for New York State. Finally, the state is saving another \$40 million from residential treatment facility closures.

Given this influx of funding and considering the urgent and pressing behavioral health needs of our state's children, we believe New York has a moral imperative to make substantial and long-lasting investments in behavioral supports for children and families.

First, we believe Medicaid FMAP increase provide an opportunity to ensure that CHIP covers the same Early Periodic Screening Detection and Treatment (EPSDT) services that are covered by Medicaid, including new Children and Family Treatment and Support Services (CFTSS). We also urge state leaders to strategically leverage Medicaid dollars to not only protect investments in the public health infrastructure, but also to shore up a sorely under-resourced children's behavioral health continuum.

Second, we believe 50% of funding dedicated to mental health and substance use from the December stimulus and the American Rescue Plan should be directed towards services for children and families. Only by investing in supports for the youngest New Yorkers can our state break the cycle of behavioral health crisis that turns struggling children into adults without recourse or adequate support.

We recommend the following purposes for federal block grant and recurring state revenues:

Establishing a Revolving Start-up Grant Program for School Based Satellite Clinics (\$8 million)

– to support the anticipated need for school-based service delivery expansion by giving one-time grants to establish new sites, including preparing space, buying equipment, training school staff, setting expectations, establishing claiming.

Funding for school-based supports that are not billable (\$10 million) – for consultation and training of school employed social workers and psychologists, de-escalation techniques, culturally appropriate outreach and engagement by family peers, expansion of screening and early identification usage as a post-pandemic effort to prevent long-term needs.

Infrastructure expansion grants (\$3 million) – hiring and training new staff & adding services.

COVID and Opioid Child Victim Care Coordination/Family Care Coordination Program (\$10 million) - OMH currently has a small allocation for non-Medicaid care coordination. Target families with children who lost a family member/caregiver; have long term illness or disability; lost employment, housing, or insurance; have been impacted by incarceration; cannot access or sustain remote educational contact; or are hard-to-serve because of their immigrant status. This time-limited care coordination effort would respond to the needs of the family unit so they can take advantage of temporary and/or permanent opportunities that address their individualized situations.

Prioritizing investment in Evidence Based Practices (\$10 million) - expenses including but not limited to staff training, fidelity fees, adherence to staffing and reporting.

Add to existing, effective community-based services and supports (\$8 million) – for additional family peer and youth peer services and training, youth and young adult clubhouses & safe spaces, flexible funds that respond to one-time family needs, ameliorate a barrier to treatment plan adherence, or support activities that re-establish relationships.

Emergency and Crisis Response Designed for Youth & Families (\$10 million) – expand funding for mobile crisis and Youth Act teams so they can have a family peer and/or youth peer advocate available at response and to provide unique models of care for follow-up with the family and children with challenging behavioral such as leaving home; to expand the operating hours of existing teams; to add mobile crisis and youth act teams where none exist; expand alternatives to crisis removal that are trauma informed.

Thank you for your time and consideration.

Respectfully submitted by the undersigned:

Astor Services for Children and Families
The Children's Agenda
Children's Defense Fund – New York
Citizens' Committee for Children of New York
Families Together in NYS
Institute for Community Living
Integrated Community Alternatives Network
JCCA
The Jewish Board of Family & Children's Services
Liberty Resources, Inc.
The New School Center for New York City Affairs
The New York Center for Child Development
Northern Rivers Family of Services
NYS American Academy of Pediatrics, Chapters 1, 2 & 3
NYS Coalition for Children's Behavioral Health
Rising Ground
Vanderheyden Inc.
Vibrant Emotional Health