HEALTHY MINDS HEALTHY KIDS Ensuring New York Children's Right to Behavioral Health Care

Response to the New York State FY 2020/2021 Executive Budget

New York's Behavioral Health System for Children is in Crisis

Across New York State, too many families find it impossible to get the mental health and substance use disorder services their children desperately need. Suicide is the second leading cause of death for children age 15-19, and the third leading cause of death for children ages 5-14. Over half of children in New York diagnosed with a mental/behavioral health condition do not receive the treatment they need.

An under-resourced children's behavioral health system leads sick kids to become sick adults, and the human and financial costs are felt by families, the State's healthcare systems, and communities more broadly. All children have a right to receive the behavioral health supports they need, when they need them. However, our state cannot improve the health and wellbeing of its children, nor can it truly contain Medicaid costs, if it *continues to not only fail to invest, but to repeatedly cut funding for children's behavioral health care*.

The Healthy Minds, Healthy Kids Campaign calls for an immediate moratorium on cuts to children's behavioral health services.

We urge the Legislature to negotiate a budget with the Governor that, at a minimum, protects and invests in critical children's services and programs through the following actions:

1. Fulfill the State's commitment to fully fund and implement the Children's Medicaid Redesign Plan. The stated promise of children's Medicaid redesign was to increase access to services through Medicaid and provide more service coverage under Medicaid Managed Care. In order to achieve this promise, the State estimated the cost of implementation would be \$63.7 million, yet ultimately funded only \$15 million for the transition. **New York must provide the remaining \$48.7 million the State committed to support the Medicaid transition.** New York is in fact at risk of serving *fewer* children than were served prior to Medicaid transition if it does not commit the resources promised to expand access.

2. Place a moratorium on cuts to any services or programs redesigned by the children's behavioral health Medicaid Redesign Team subcommittee, and restore cuts that have already occurred. The work of the children's Medicaid redesign committee is still underway, and the full array of planned services have not yet reached their intended targets. New York cannot afford to cut any of these services and programs before they have been fully implemented. Already, the State has moved forward with cuts to new Children and Family Treatment and Support Services (CFTSS), even though these services have reached less than 4% of the 200,000 children who were intended to receive care. Restoring cuts to CFTSS for 12 months would require an estimated \$2 million in state funding. Additionally, all children's services planned through Medicaid redesign – including CFTSS, Home and Community Based Services, Children's Health Homes, and Article 29-I Medical Services for Foster Children – must be fully funded and given the opportunity to reach the children who need them.

The Campaign for Healthy Minds, Healthy Kids is a statewide coalition of behavioral health providers, advocates, and New York families, joining together to create the public and political will necessary to ensure that all children and adolescents in New York receive the high-quality behavioral health services they need.



3. Hold harmless children's programs and restore funds for service impacted by the 1% across-theboard Medicaid cuts. Though many Mental Hygiene Law programs were not impacted by these cuts, the children's behavioral health system experienced cuts to both Children's Health Homes and behavioral health supports provided through Article 28 clinics. Cuts to Health Homes amounted to approximately \$522,350, and the full impact to Article 28 clinics is not yet known. Health Homes were designed to facilitate access to a wide range of services for children for complex needs, and cutting funding for them will impede access, as well as potentially drive up utilization of other high-cost services. With behavioral health care in too short supply, cuts to Article 28 clinics will further restrict access. **The Campaign urges New York to restore the funds for these services and hold children's services harmless from any future across-the-board Medicaid cuts.**

4. Ensure the children's MRT subcommittee continues its work, without being impacted by cuts proposed through MRT II. Children's Medicaid redesign occurred on a different timeline and through a separate process than the redesign of the adult system, and New York is still in the midst of this transition. As such, it is not appropriate to upend the ongoing work of children's redesign or threaten to cut services and programs before they have been fully implemented. As the State contemplates savings through massive Medicaid cuts, it must recognize the necessity and benefit of early and consistent investment in children. Cuts to children's behavioral health care not only cause immediate harm to the health and wellbeing of children, but they also result in an increased likelihood that these children will become sick adults with complex needs, requiring significant and costly health care. The Campaign urges the State to allow the children's Medicaid Redesign Team to continue the work of implementation without the threat of cuts proposed through MRT II.

5. Furthermore, we urge the State to ensure there is substantive engagement of children's behavioral health experts in the development of the MRT II's recommendations. The current composition of the MRT II lacks any significant inclusion of children's behavioral health experts. Communities and impacted families must also be meaningfully represented in the decision-making of the MRT II – New York cannot largely exclude consumer voices as it did in the first iteration of Medicaid redesign.

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