



The children’s behavioral health system in New York is in desperate need of investment to retain and build capacity



There is a national state of emergency for children’s mental health.¹ Demand for children’s behavioral health services has skyrocketed while New York’s capacity to provide them continues to shrink. A problem decades in the making has become so severe it can no longer be ignored. Serving children - especially the most complex children - requires coordination with multiple service systems, providers, and care managers, as well as the child’s guardian(s). This coordination is essential to provide quality care, but the work required to do it is not compensated. Every visit requires substantial unpaid care team labor, which has led to long wait lists and providers unable to expand capacity to serve children. Tens of thousands of New York children lack the care, treatment, and support they need to thrive.

Enable the behavioral health system to expand to meet the urgent demand

The **Healthy Minds, Healthy Kids Campaign**, a collaboration between 19 of New York’s leading children’s and behavioral health advocacy groups, is requesting immediate enhancements to the existing rate structure for children’s behavioral health clinics (Article 31 and Article 32-822) services, Children’s Home and Community Based Services (HCBS), and Child and Family Treatment and Support Services (CFTSS).

Trend rates to keep pace with inflation

Trends maintain, but do not advance, the children’s behavioral health delivery system

- 3.2% trend for children’s behavioral health clinic services: \$10,749,230
- 3.2% trend for children’s HCBS and CFTSS services: \$2,107,748

Establish a care team coordination fee

Providers are responsible for coordinating with a growing array of care managers. They should be compensated for the time it takes to do so.

- \$7.50 Per Served Member Per Month (PSMPM) fee for children’s clinics \$12,112,200
- \$7.50 PSMPM for CFTSS and children’s HCBS \$8,324,766

Adjust children’s clinic rates to reflect the extra effort children require

Account for the additional costs of serving children and their families. Enable providers to expand their capacity to meet the need.

- 35% enhancement for clinic visits provided to children \$117,569,701

Adjust CFTSS and children’s HCBS to account for actual volume

Enable providers to expand capacity by acknowledging that the anticipated volume efficiencies have not materialized.

- Increase in CFTSS and children’s HCBS rates to reflect the lack of economies of scale \$44,460,329

Total investment in children’s behavioral health \$195,264,778

¹ The National State of Emergency was declared by the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, and the Children’s Hospital Association.