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Members of the House Human Services Policy Committee:

We are grateful that your committee is taking the time to learn about the children's mental health system during the interim. Many important provisions passed in the 2023 session to expand the children's mental health system, but as you already know, we still have a lot of work to do to build a system that all children and their families can access in a timely manner. Mental health impacts every part of our lives, and when we are talking about children's mental health, we are really talking about the entire family's mental health, and the networks of support that are essential for a child's development – networks that are often under resourced in rural communities.

Fortunately, there are many concrete actions that the legislature can take to fill the gaps in our system and support equity across the state. Support should begin at the earliest stages of development, so it is critical to fund early childhood mental health consultation and treatment. School-linked mental health is another essential service to provide prevention and ongoing treatment to K-12 students all around our state. While the legislature provided new funding this year, there is less money dedicated to school-linked in the tails. This will exacerbate an already existing challenge for grant-funded services – school linked is funded through competitive grants which inherently creates inequities. The legislature should work with the Department of Human Services and communities to find sustainable ways to fund these services for the long term.

The state also uses competitive grants to fund mobile crisis teams, which respond to children and adults in every county. This creates great barriers in rural communities where costs for travel and technology are not adequately covered through grants and Medicaid reimbursement. Low reimbursement rates continue to be one of the greatest barriers to building out our mental health system. We cannot have a fully built system if we cannot attract and retain a diverse and skilled workforce. This is particularly true in rural areas. When providers close their doors, there may not be another similar service for hundreds of miles.

To end the crisis of children boarding in emergency departments, the legislature must continue to invest in intensive services. Last session, the Transition to Community grant was expanded to include children, but with no additional funding. Investments must also be made in specialized settings for children with complex needs and paying personal care assistants who work with children who exhibit aggression a higher wage. Families need investments in respite care and culturally specific services.

Finally, it cannot be overstated that the vitality of our mental health system is directly tied to our juvenile justice system. Children and youth who cannot access timely services often end up in our juvenile justice system. Over 70% of youth in juvenile justice have one or more mental health diagnoses. They deserve to access mental health treatment in this system as well. The Mental Health Legislative Network, which NAMI Minnesota co-chairs, will again be coming to the legislature with solutions to address our children's mental health crisis. We look forward to working with you to that end in the 2024 session.

Sincerely,

Sue Abderholden, MPH
Executive Director

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