

American Association of
Child & Adolescent
Psychiatry

December 8, 2022

The Honorable Charles Schumer
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker
United States House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Minority Leader
United States Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
United States House of Representatives
Washington, DC 20515

Dear Majority Leader Schumer, Speaker Pelosi, Minority Leader McConnell, and Minority Leader McCarthy:

On behalf of the American Association of Child and Adolescent Psychiatry (AACAP), the professional organization for 10,000 U.S. child and adolescent psychiatrists, thank you for your bipartisan efforts to advance youth mental health reforms this year. We write to encourage you to advance additional urgent reforms needed to address youth mental health before the end of the 117th Congress.

October 2022 marked the one-year anniversary of the declaration of a National State of Emergency in Children's Mental Health issued by AACAP along with partnering organizations. While we appreciate initial congressional efforts to pass reforms into law, we need Congress to continue to treat the youth mental health crisis as a national emergency and work to initiate additional bipartisan reforms this calendar year during the lame duck session. **We offer for your consideration our list of priority youth mental health reforms that have already advanced on a bipartisan basis this session.**

As you consider our requests, it is important to note that the COVID-19 pandemic worsened already troubling trends in child and adolescent mental health. Between 2016 and 2022, children experienced significant increases in anxiety (27%) and depression (24%), according to a recent study published in JAMA Pediatrics. [\[1\]](#) According to the CDC, in 2021, 1 in 5 children reported that they had contemplated suicide, a notable increase from previous years. [\[2\]](#) Unfortunately, children frequently go years without treatment for mental and behavioral health conditions after symptoms begin, and persistent shortages across many pediatric mental and behavioral health professions continue to impact timely access to care for children and youth.

AACAP's three priority policy areas are: Ensuring Access to Care; Expanding the Mental Health Workforce; and Ensuring Equity, Diversity, and Inclusion. Within these issue areas, we outline urgent policy reforms that we strongly believe can be achieved in a bipartisan manner this year.

Ensuring Access to Care

- **Mental Health Parity:** Support protections to ensure equitable access to mental health care, provide resources to states to enforce existing mental health parity laws, and initiate civil penalties for those plans that do not comply with statutory mental health parity requirements. The House passed needed mental health parity provisions in the *Restoring Hope for Mental Health and Well-Being Act of 2022* (H.R. 7666), and such reforms are also included in the *Mental Health Reform Reauthorization Act* (S. 4170). Ongoing analyses and reporting of reimbursement disparities, including payment rate differentials, between mental health and physical health services is also critical to ensuring equitable access to mental health benefits, as supported in the Senate Finance Committee's working draft legislation "Mental Health Parity Improvements Act."
- **Integrated and Collaborative Care:** Support continuation of Collaborative/Integrated Care Models, where a primary care physician, a psychiatrist consultant, and a care manager work as a team to identify and provide evidence-based treatment for mental health conditions, measure patients' progress and adjust care when appropriate. Grant funding is authorized for these models through the House-passed *Restoring Hope for Mental Health and Well-Being Act of 2022* (H.R. 7666). In addition, the Senate Finance Committee's working draft legislation "Improving Integration, Coordination and Access to Care Act" addresses temporary payment for integrated care services, waiving budget neutrality, and provides for technical assistance to be provided to primary care practices to ensure they can successfully adopt behavioral health integration models.
- **Telehealth Extension:** Support a two-year extension of current telehealth flexibilities authorized through the COVID-19 Public Health Emergency (PHE) to ensure stability for children's access to mental health services. This extension was included in the House-passed *Advancing Telehealth Beyond COVID-19 Act of 2021* (H.R. 4040). AACAP also urges the following adjustments be made to ensure children's access to needed mental health services, particularly children residing in rural geographic locations or without other means of maintaining access to their treating child and adolescent psychiatrists and needed therapies:
 - Removal of the statutory six-month, in-person service requirement imposed on telehealth for mental health services in the *Consolidated Appropriations Act of 2021* (Pub. L. 116-260). Removal of this requirement is included in the Senate Finance Committee telehealth legislative discussion draft.
 - Continuation of the Drug Enforcement Agency (DEA) exception to the *Ryan Haight Act* that has permitted DEA-registered prescribers to prescribe controlled

substances without first conducting an in-person patient evaluation if specific conditions are met to ensure legal parameters and patient care needs are met. In 2020, Congress passed the *SUPPORT for Patients and Communities Act* (Pub.L. 115-27) that requires the DEA to issue a special registration process to permit providers to legally prescribe a controlled substance via telehealth. The DEA has yet to put such a process in place, and a proposed rule that possibly addresses this process remains at the Office of Management and Budget (OMB) without finalization. Congressional protection is needed to ensure that the DEA exception remains in effect until a final regulation is in place to establish a suitable special registration process. Support for this extension has solid bipartisan support; it is included in pending Senate legislation and gained strong support in numerous stakeholder and legislator letters to the DEA.

Expanding the Mental Health Workforce

- Medicare Graduate Medical Education for Child and Adolescent Psychiatry: Provide 400 new Medicare-supported graduate medical education (GME) slots for psychiatry and psychiatry subspecialties, including child and adolescent psychiatry. This proposal is included in the Senate Finance Committee workforce proposed legislation.
- Mental Health Professionals Loan Repayment: Initiate support to repay up to \$250,000 in eligible student loan repayment for mental health professionals who work in mental health professional shortage areas and establish incentives to keep mental health professionals in underserved locations as determined through the Health Resources and Services Administration (HRSA). Legislation titled the *Mental Health Professionals Workforce Shortage Loan Repayment Act* to establish this program was introduced on a bipartisan basis in the House and Senate (H.R. 3150/S. 1578).
- Investments in Medicaid: Support additional, proposed investments in Medicaid to assist pediatric mental health providers to expand access to timely mental and behavioral health care for children and youth in appropriate settings. Bipartisan legislation supported by AACAP that promote these investments include the *Strengthen Kids' Mental Health Now Act of 2022* (H.R.7236) and the *Investing in Kids' Mental Health Now Act of 2022* (S. 4747).

Ensuring Equity, Diversity, and Inclusion

- SAMHSA Minority Fellowship Program: Reauthorize the Substance Abuse and Mental Health Services Administration (SAMHSA) Minority Fellowship Program and increase funding for the program to allow the agency to prioritize and increase child and adolescent psychiatry placements to help address the youth mental health crisis for

communities in need. This reauthorization passed the House as part of the bipartisan *Restoring Hope for Mental Health and Well-Being Act of 2022* (H.R. 7666) and the *Pursuing Equity in Mental Health Act* (H.R. 1475).

AACAP stands ready to work with Congress to see these reforms enacted this session and to continue working with Congress next year to advance additional mental health reform efforts. For any questions or additional information, please contact Alexis Geier Horan, AACAP Chief of Advocacy and Practice Transformation at ahoran@aacap.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'WYK Ng', with a stylized flourish at the end.

Warren Y.K. Ng, MD, MPH
President, American Association of Child and Adolescent Psychiatry

Cc: Chairman Ron Wyden
Ranking Member Mike Crapo
Chairwoman Patty Murray
Ranking Member Richard Burr
Chairman Frank Pallone
Ranking Member Cathy McMorris Rodgers