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November 2, 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 220 children's hospitals the Children's Hospital Association (CHA) serves, we write to request action this year on long sought-after, bipartisan, bicameral policies designed to improve children's mental and physical health, strengthen their health coverage and support the pediatric health care workforce. At a time when our children's hospitals are flooded with children dealing with respiratory illnesses, mental health crises and other health care needs, congressional action is urgently needed before the end of the year to ensure children's hospitals have the resources and capacity they need to best take care of our nation's children. Our children cannot wait for needed federal support.

Congress can best support the immediate needs of our nation's children by:

- **Making investments to address the children's mental health emergency.**
- **Bolstering support for the pediatric workforce.**
- **Safeguarding children's health coverage.**

[Making Investments to Address the Children's Mental Health Emergency](#)

Recently, CHA, along with the American Academy of Pediatrics and the American Academy of Child and Adolescent Psychiatry, marked the one-year anniversary of declaring a national state of emergency in child and adolescent mental health. The mental health challenges facing our children continue to grow and our hospitals are seeing it firsthand in their emergency departments (EDs). Visits for youth suicide attempts have increased dramatically, eating disorder visits have doubled and we are seeing an increase in suicide rates for children and teens—especially for Black boys and girls under age 12. As the crisis continues, we need urgent, robust and comprehensive support from Congress to help America's children.

Addressing the children's mental health crisis is our top priority. We have worked closely with key committees and a number of congressional offices on bipartisan, bicameral solutions to address this ongoing crisis through investments in Medicaid, boosting the pediatric behavioral health workforce and bolstering community-based and inpatient services and support.

Champions for Children's Health

Federal Medicaid Investment in Pediatric Mental Health Care

Children's hospitals appreciate your commitment to addressing the mental health needs of America's children and youth. We strongly recommend meaningful Medicaid investments to enhance the low reimbursement rates that pediatric behavioral health providers currently receive and tailored approaches to recruit and retain a robust pediatric behavioral health workforce. This investment is critically needed now to support the workforce and increase children's access to needed care.

Medicaid is the largest payer for children's behavioral health services, but there continues to be serious access issues. In 2018, only 54% of non-institutionalized children on Medicaid and the Children's Health Insurance Program (CHIP) who experienced a major depressive episode received mental health treatment.¹ We must enhance Medicaid reimbursement to keep existing mental health providers engaged in the Medicaid program and to show potential participants an appropriate and consistent financing stream for their work. This is crucial to make measurable improvements for the millions of children who rely on Medicaid.

Another way to invest in Medicaid is to reduce barriers for children who must travel across state lines to receive lifesaving and often time-sensitive medical treatment. CHA strongly supports the bipartisan, bicameral Accelerating Kids' Access to Care Act, which will streamline out-of-state enrollment of Medicaid providers, removing unnecessary administrative barriers to care for kids, including children in mental health crisis.

Recommendations: Enhance Medicaid reimbursement for children's mental health and pass Accelerating Kids' Access to Care Act.

Support the Pediatric Mental Health Workforce

A robust, diverse pediatric behavioral health workforce is required to meet the needs of children's unique mental, emotional and behavioral health across the full continuum of care. To ensure children can receive developmentally appropriate care, Congress must invest in a specialized pediatric behavioral health workforce now. We need tailored federal investments, like workforce grants specific for pediatrics, to support the recruitment and retention of a diverse workforce across pediatric behavioral health professional fields, including both clinical and non-clinical roles.

Recommendation: Workforce grant tailored and dedicated to children.

Bolster Community-based Systems of Pediatric Mental Health Care

All too often, federal resources to address mental health do not make their way to children or the providers who serve them. While the flexibility of block grant dollars can be beneficial, what we see in the field is that pediatric care does not match the population of children needing help. For example, community mental health board dollars in the home county of one of our largest members spends 90% on adult care, leaving only 10% of funding for children. We encourage Congress to direct funds to strengthen community-based pediatric mental health services, allowing communities to develop new or improve existing programs and policies to meet the mental and behavioral health needs of children locally. Targeted pediatric funding could help states with large rural areas and fewer mental health providers since children often have to travel out of state and long distances to receive more intensive mental health services and they frequently face long waiting lists for all levels of care.

Recommendation: Enact community-based mental health funding focused on children's needs.

¹ MACPAC: [Response to Senate Finance RFI on behavioral health](#). November 2021.

Dedicated Support for Pediatric Mental Health Infrastructure

According to a study published by the Centers for Disease Control and Prevention (CDC),² the proportion of children who arrived in emergency departments with mental health issues increased by 24% from March through October 2020, compared with the same period in 2019. Among preteens and adolescents, it rose by 31%. Challenges caused by the pandemic have only accelerated these alarming trends. Children's hospitals recommend that lawmakers take additional actions this year to strengthen pediatric behavioral health infrastructure and improve access to care, both immediately and long-term. We specifically urge Congress to provide resources to support efforts to scale up inpatient care capacity, including costs associated with the conversion of general beds to accommodate mental health patients.

There is also a vital need to increase access to alternatives to inpatient and emergency department care including stepdown, partial hospitalization, intensive outpatient services and day programs. What we see in the field is a system in turmoil. Many of our members have 20 patients or more that have been with them in an inpatient setting for over 90 days after their care has been completed. They continue to stay with us because there is no placement. Those children awaiting placement occupy beds that can then lead to additional kids boarding in the ED or children with respiratory syncytial virus (RSV) waiting for a medical bed to begin treatment. Programs like partial hospitalization and intensive outpatient treatment ensure that children and adolescents continue to receive intensive services and support they need in settings that are not more restrictive than they require, while also alleviating pressure on more costly acute care settings.

Recommendation: Support efforts to scale up inpatient and stepdown mental health services.

Bolstering Support for the Pediatric Workforce

The Children's Hospitals Graduate Medical Education program (CHGME) supports the training of more than half of the nation's pediatric physician workforce and is essential to the continued access for children to the much-needed pediatric specialists, including doctors to care for children in mental health crisis, treat complex pediatric medical conditions and respond to viral surges such as RSV. These are just a few examples of why we are asking lawmakers to support an increase for CHGME to meet children's needs. Unlike other federal investment in physician training for adult care, there is a growing shortfall in the level of federal support for pediatric training in children's teaching hospitals that must be addressed, which is why we are specifically asking for \$718.8 million for Fiscal Year (FY) 2023 appropriations funding to reduce the longstanding and growing gap between federal investments for physicians training in adult care versus children's care.

Additionally, our hospitals are continuing to see an influx of patients in emergency departments seeking care for the flu, RSV and other pulmonary infections, as well as the continued mental and behavioral health crises coupled with the growing medical workforce crisis—we simply do not have enough pediatric specialists to staff the beds in our children's hospitals, so we are requesting a one-time boost of \$200 million for FY 2023 to strengthen and grow the pediatric workforce and improve access to care for all children.

Recommendation: Provide \$718.8 million CHGME for FY 2023 appropriations and \$200 million one-time increase.

² Centers for Disease Control and Prevention, *Mental Health-Related Emergency Department Visits Among Children Aged <18 Years During the COVID-19 Pandemic – United States, January 17, 2020*, <https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6945a3-H.pdf> (last visited October 24, 2022).

Safeguarding Children's Health Coverage

12-month Continuous Eligibility in Medicaid and CHIP and Maternal Health Improvements

Together, Medicaid and CHIP provide health care coverage for more than 46 million children. Coverage gaps due to minor temporary fluctuations in household income or simple paperwork errors can have a real and deleterious effect on children's access to care. Extending 12-month continuous eligibility for children is a critical step to reduce coverage gaps and ensure stable health care coverage for children in Medicaid and CHIP. Additionally, including 12-month continuous eligibility for pregnant women and coverage for 12 months postpartum will safeguard the health of mothers and children alike. This will be particularly important as we look ahead to the eventual unwinding of the public health emergency and to the Medicaid eligibility redetermination process. No children should mistakenly lose critical Medicaid and CHIP coverage.

Recommendation: Enact 12-month continuous eligibility for children in Medicaid and CHIP.

CHIP Permanency

The Children's Health Insurance Program (CHIP) has significantly reduced the number of uninsured children since its inception. Permanently authorizing CHIP will ensure stable coverage for the nine million children and pregnant women from lower income families who rely on the program for high-quality, affordable coverage. Should Congress commit to permanently authorizing CHIP, it would renew the opportunity to provide flexibility for states to continue innovating their programs with the goal of improving access to affordable, comprehensive children's health insurance coverage, particularly for working families who are most in need of this support.

Recommendation: Permanently authorize CHIP.

We appreciate the down payment on mental health you have already undertaken this Congress; however, more support for the mental health needs of our children is urgently needed. We stand ready to partner with you to take additional steps necessary to promote children's health and to enact comprehensive, bold policy changes to address the national children's mental health emergency and all children's health issues.

Children need your help now. Thank you for your support on these important issues.

Very best regards,



Mark Wietecha
Chief Executive Officer
Children's Hospital Association

CC: Chairman Wyden
Chair Murray
Chairman Leahy
Ranking Member Crapo
Ranking Member Burr
Ranking Member Shelby

Chair DeLauro

Chairman Pallone

Ranking Member Granger

Ranking Member McMorris Rodgers