



Children's Aid
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Joint Legislative Public Hearing on Health
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Thank you for the opportunity to comment on the 2022-23 Executive Budget Proposal on pertinent issues related to the health and wellness of children. For nearly 170 years, Children's Aid has been committed to ensuring that there are no boundaries to the aspirations of young people, and no limits to their potential. We are leading a comprehensive counterattack on the obstacles that threaten kids' achievements in school and in life. We have also constructed a continuum of services, positioned every step of the way throughout childhood that builds well-being and prepares young people to succeed at every level of education and every milestone of life. Today over 2,000 full and part time staff members empower nearly 40,000 children, youth and their families through our network of 40 locations including early childhood education centers, public schools, community centers and community health clinics in the New York City neighborhoods of Harlem, Washington Heights, the South Bronx, the north shore of Staten Island, Bedford Stuyvesant/Williamsburg and downtown Brooklyn.

As a multi-service agency, we employ a holistic strategy that serves children and their families at every stage of development—from cradle through college and career—and in every key setting—home, school, and community. This cross-sector approach is more vital than ever, as the COVID-19 pandemic destabilizes the communities that we serve and exacerbates existing racial and socioeconomic inequity. In this critical period, young people and their families need a trusted partner like Children's Aid to provide a network of resources that they can turn to when experiencing the relentless challenges that have permeated this crisis—from food insecurity to remote learning challenges to the grief that comes with losing a loved one. Our staff has the expertise and tools to help clients overcome these struggles, keeping them on track to realizing their promise.

In light of the health, economic, and academic challenges around COVID-19, Children's Aid offered an array of timely and holistic interventions in response to the pandemic beginning in March 2020. Adjusting rapidly to continue serving our clients while observing social distancing guidelines, we provided ongoing health and behavioral health services throughout the pandemic. Our community health clinics in Harlem and the South Bronx have remained open throughout the pandemic. Our six school-based health centers re-opened to serve students during the 2020-2021 school year. Our clinics have provided COVID-19 testing to symptomatic youth, while also delivering the essential health care services including medical, dental, and behavioral health services year-round. In addition to in-person services, clinicians continued to provide remote medical and behavioral health supports for clients receiving routine treatments. Children's Aid's licensed clinical staff helped meet a heightened need for behavioral health services as the COVID-19 crisis continued to exacerbate anxiety, depression, and other such challenges among youth. In an effort to expand access to COVID-19 testing and vaccination for our communities, we partnered with NYC Health & Hospitals Test + Trace corps. As we work to overcome the

deleterious effects of this health and socio-economic crisis, we rely on our government partners to deliver the critical resources our communities deserve.

As an agency with a strong state advocacy agenda, we are members of and support the platforms of the New York School-Based Health Alliance, Citizens Committee for Children Healthy Minds, Healthy Kids campaign and the Coalition for Behavioral Health. Together, we are on a mission to connect children with what they need to learn, grow, and lead successful, independent lives.

We would like to first acknowledge Children's Aid's support of the proposals released in the Governor's FY 22-23 Executive Budget:

- We applaud the Governor's commitment to the human services workforce with the inclusion of a one-time 5.4% COLA for human services workers including those working with OMH and OASAS providers.
- We support the proposed bonuses for Healthcare Workers, including OMH & OASAS providers, a new program for frontline health and mental hygiene workers, focused on those with an annual base salary of less than \$100,000 during the calendar year 2021.
- We thank the Governor for acknowledging the importance of telehealth as a critical modality for the provision of health services. We applaud the proposals for Telehealth Parity including reimbursement parity for telehealth services by requiring health plans, including those in Medicaid, to reimburse providers for services delivered through telehealth on the same basis, and at the same rate, as services delivered in person. Our behavioral health staff's ability to quickly pivot to meet the needs of youth and families underscores a key tenet that has spanned all innovation throughout the pandemic: the need for flexibility and support from government partners to best serve our communities.
- We support proposals in the Governor's Executive Budget that would enhance reimbursement rates, including a 10.4% rate increase for Article 31 outpatient clinics.
- We support the Executive's investment in Child Health Plus (CHP) Behavioral Health. The Executive Budget proposes to invest \$11 million in FY 22-23, growing to \$44 million in FY 2024, in mental health and other critical services – including ambulance services, to expand orthodontia coverage, and add Children and Family Treatment and Support Services, children's Home and Community-Based Services, Assertive Community Treatment services and residential rehabilitation for youth services, and services provided by voluntary foster care agencies – for children in the CHP Program. These investments will align with the Medicaid benefits with regard to mental and behavioral health services. Children's Aid successfully launched our Children and Family Treatment and Support Services (CFTSS) program in July of 2019. The program has enabled access for hard-to-reach families by providing clinical services in the home and community. Under CFTSS we provide children and youth therapy services and rehabilitation services, which have been critical lifelines throughout the pandemic. We were able to continue our in-person services throughout the pandemic and in calendar year 2021, we served 272 families through 9,323 sessions.

FY23 Budget Recommendations

Support School-Based Health Centers (SBHCs)

Children’s Aid believes that one of the best and most effective ways to keep kids healthy is by making high-quality physical, mental, and dental health care as accessible as possible. For many children, that means building health care services into their schools because it is the place where they spend the most time. School-Based Health centers (SBHCs) ensure that kids miss as little class time as possible if they need medical care. They also reduce the burden on working parents, who know their kids can get high-quality professional care without having to take time off from work.

Children’s Aid operates six SBHCs that provide an array of medical, dental and behavioral health services. Our School-Based Health Centers are all located in low-income neighborhoods where access to health care can be an ever-present roadblock for families. In the 2020-2021 school year, our SBHCs served 2,824 students and saw a total number of 10,291 visits, including nearly 4,644 medical visits, 2,512 behavioral health visits and nearly 538 dental visits, as well as 2,597 first aid care visits. Throughout the COVID-19 pandemic, our School-Based Health Centers have played a pivotal role, with some remaining operational in limited capacities. Many of our students engaged in counseling at the onset of the pandemic and were able to continue to receive uninterrupted mental health support through the school year and beyond as needed thanks to our swift embrace of tele-mental health services.

As schools reopened in the fall, our School Based Health Centers shifted to provide COVID-19 testing for symptomatic students, telehealth services, and behavioral health referrals for students and families. They remained open for scheduled clinical appointments when schools were closed, except in instances where the schools were closed due to a COVID-19 outbreak. As we continue to weather the COVID-19 pandemic, supporting health care services in community-based settings is critical to ensuring our communities remain healthy and connected to primary and preventive health care services.

As a member of the New York School-Based Health Alliance (NYSBHA), Children’s Aid strongly urges the adoption of the following priorities:

- Maintain the \$17,098,000 in non-Medicaid grant funding appropriated in Governor Hochul’s FY 22- 23 proposed State Executive Budget for School-Based Health Centers (SBHCs).
- Support \$5 million in new funds in the final FY 22-23 State Budget to fully restore cuts to SBHC sponsors whose non-Medicaid State grants funds were disproportionately reduced in 2017 due to the combination of: 1) a 20% across the board cut in the final 2017-18 State budget: and 2) an administrative action by the Department of Health to impose additional cuts on some SBHCs ranging from 25% to 70% of total grants funds.

School-Based Health Centers have been lifelines for youth and communities during the pandemic. Sustainable funding for SBHCs must be prioritized and the state must remediate the painful deficits SBHCS have incurred as a result of cuts in previous budget cycles. Non-Medicaid grant funding for the State's 262 SBHCs for the delivery of core primary, preventive, mental and dental health care services to over 250,000 children has been reduced by over 25%, (\$5.8 million), since 2013. SBHC sponsoring organizations had non-Medicaid grants funds disproportionately reduced in 2017 as a result of a 20% across the board cut in the final 2017-18 State budget; and 27 SBHC sponsors saw additional cuts ranging from 25% to 70% of total non-Medicaid grant funds due to a distribution methodology change that same year. Further Medicaid cuts to SBHCs are unsustainable and we ask you to hold SBHCs harmless from any Medicaid cuts in the FY 22-23 State Budget.

The combined impact of these cuts has been a reduction in access to services for underserved youth. Many of the children and adolescents that we serve are emotionally and physically vulnerable. They live in communities that report high incidences of drug and alcohol abuse, violence, adolescent pregnancy, and sexually transmitted disease. All of these issues are being compounded by the ongoing COVID-19 pandemic. The non-Medicaid State grant funds are used by centers to help cover the deficits incurred by the SBHC commitment to serve all children, including those who are immigrants and uninsured or underinsured. Amidst the ongoing pandemic, our SBHCs remain important hubs for health care access for our youth. SBHCs are needed now more than ever as our youth have experienced – and continue to experience – grief, isolation and anxiety about the future, and as many services, including well-child visits, dental care and other preventive health care services took a back seat during the pandemic.

Increased Investment in Children's Behavioral and Mental Health

Children's Aid's commitment to strong families and communities spans the health and wellness continuum. We provide behavioral health services in school-based and community health centers to help children cope with behavioral, mental and emotional challenges so they can build a solid foundation to realize their potential.

The isolation, grief, and trauma brought on by COVID-19 have fueled a youth mental health crisis. According to the CDC, the proportion of emergency room visits related to mental health among young people ages 12 to 17 increased by 31% from 2019 to 2020.[i] Without holistic mental health services, we are concerned that these immediate challenges could lead to negative outcomes over the long-term. Our mental health support has been crucial; many of our students and families are facing real loss, fear, anxiety about the future, and depression. In calendar year 2021 clinicians provided over 13,500 behavioral health sessions, helping to meet a persistent need for mental health support.

As we continue to forge a path of recovery from the pandemic we urge the State to make sustained investments in behavioral and mental health including:

- Ensuring all proposed rate increases are sustained and made permanent, and committing to reforming rate methodology to help ensure rates are sufficient to support much-needed capacity for children's behavioral health needs.

- Enacting the proposals in the Governor’s Executive Budget that would sustain and expand access to care, including funding for Home-Based Crisis Intervention, Residential Treatment Facilities, and aligning behavioral health services in Medicaid and Child Health Plus.
- Enhance funding for two-generational, multi-disciplinary models that integrate mental health in primary and pediatric settings.
- Including mental health and substance abuse providers in the 1% Medicaid Rate increase. We are deeply disappointed that these programs are not included, and urge the Legislature to support inclusion of these programs.

Family Planning

Children’s Aid offers comprehensive, age-appropriate sexuality education and reproductive health care services, as well as support for young people to build the tools they need to make healthy and informed choices. Our programs help young people prevent unplanned pregnancy, HIV, and STDs so they can focus on school, make safe, healthy decisions, and prepare for their future. We applaud the State’s commitment to maintaining and preserving access to high quality reproductive health services for low-income individuals across New York State.

We ask that the legislature commit to the following for the final FY 22-23 State Budget:

- Maintain the funding of \$37.4 million in base funding included in the proposed Executive budget and restore the nearly \$1 million provided by the legislature last year for family planning services.
- Provide a path to appropriate any new funds the State is awarded through the federal Title X program and that those funds primarily be used to shore up existing providers, who have not received any increases in more than 10 years, despite facing increased labor and other costs.
- Maintain the \$8.5M in level funding included in the FY 22-23 Executive budget proposal for adolescent pregnancy prevention programming including CAPP, PREP, and SRAE funds.

Workforce

The human services sector as a whole is experiencing severe workforce challenges including shortages of mental health professionals, and difficulty with recruitment and retention. Children’s Aid, like many providers across the state, is experiencing vacancies across our divisions and programs. A recent report by Children’s Aid’s Talent Management and Human Resources Team indicated that within our Health and Wellness division we had over 30 staffing vacancies for positions including nurse practitioners, nurses, LPNs, social workers, medical assistants, enrollment counselors, case workers, health educators and front desk staff. The shortage has had a direct impact on our ability to provide services, creating waiting lists for behavioral health, CFTSS and our health connections services. We have had to forego opportunities for expansion of behavioral health services in schools because we have not been able to fill social worker vacancies.

Without adequate staffing, we are not fully able to provide the much needed mental health services that our communities need at this time. To stem the tide on the challenges that providers are experiencing with workforce shortages, Children’s Aid stands with the Coalition for Behavioral Health and supports the following proposals for the FY 22-23 State budget:

- Resuscitate the existing workforce to address access and shortage issues by providing reimbursement rates that match costs of care.
- Authorize the 5.4% Consumer Price Index-U (CPI-U) Adjustment for Community Health Organizations funded by the Department of Health in the statutory Cost-of-Living Adjustment (COLA).
- Make the eFMAP workforce funding permanent for the OMH & OASAS adult and children’s workforce, programs and services and add funding for those services which did not qualify for funding.
- Invest in ongoing recruitment initiatives such as offering a pipeline, scholarships/loan forgiveness, career ladders, bonuses and other creative incentives that directly help workers. Fund training initiatives that promote diversity, equity and inclusion initiatives and social determinants of health for our workforce.

Closing Remarks

Children’s Aid sincerely thanks the NYS Legislature for their vigorous support of the most under-served families and communities in New York. The issues outlined above are of extreme importance to Children’s Aid and our children and families and we will do all that we can to advocate, protect and increase funding. It is the right and moral thing to do to ensure that our children and families in communities with limited resources have the best opportunity available to realize their full potential.

If you have any questions about this submitted testimony please contact Michelle Avila, Assistant Director of Public Policy at mavila@childrensaidnyc.org.

[i] Szabo, L. (2021, July 1). Damage to Children’s Education — And Their Health — Could Last a Lifetime. *Kaiser Health News*. Retrieved from <https://khn.org/news/article/covid-pandemic-children-education-health-setbacks>.