

TEEN MENTAL HEALTH AD HOC COMMITTEE FINAL RECOMMENDATIONS

In Arizona, youth suicide is the leading cause of death for ages 10 to 14 and ages 15-24. This Teen Mental Health Ad Hoc Committee (Committee) was established to be a solutions-based team to make recommendations to solve this growing problem. Three working groups were established to hone in on the following issues: bullying and social media, family support and substance abuse, and access to care, depression and mental illness. For months the Committee has heard from nonprofits, state agencies, students, and others on what they are doing and what should be done to address teen mental health issues and gaps in access to care. We as members of the Committee are making a Call to Action to our State, our communities, our schools and our families, and these are our recommendations.

GENERAL

1. That legislation be drafted to establish a Teen Mental Health Grant Program to be administered by the Arizona Department of Health Services to:
 - Provide funding to school districts or nonprofit organizations for mental health first aid training, youth resiliency training, substance misuse awareness training or peer to peer education to youth, staff, and parents.
 - Support school districts to develop/obtain an app for students to report safety issues as well as gain clinical support that is 24/7 and anonymous.
 - Provide supplemental funding to school districts/rural regions to have a primary prevention specialist.
 - Provide funding for children mental health service providers.
 - Support digital wellness marketing campaigns.
 - Collect data on outcomes and expenditures.
2. That the Legislature consider the following resources to fund the Teen Mental Health Grant Program:
 - Legislative appropriations, including the Consumer Remediation Subaccount (Opioid Settlement), Substance Use Disorder Fund, marijuana revenues, tobacco settlement funds, tobacco tax revenues, American Rescue Plan Act, or state General Fund monies (state insurance premium tax collections).
 - Private donations.
 - Grants.
 - Federal monies.
3. The Legislature should work with the Attorney General to ensure opioid settlement monies are utilized appropriately for these specified purposes.
4. Establish a community hub (Hub) of information and support on the following areas: 1) access to care, depression, and mental illness; 2) bullying and social media; and 3) family support and substance abuse. The Arizona Department of

Health Services, in collaboration with the Arizona Health Care Cost Containment System, Arizona Department of Education and the Governor's Office of Youth Faith and Family must gather all available resources and work with coalitions, non-profit organizations, and other community groups to provide information to the Hub. All resources must be included on each agencies/office website. (See more under Bullying and Social Media/Family Support and Substance Abuse)

5. The Child Fatality Review Team must work with the Suicide Mortality Review Team to obtain 18-year-old suicide data to include in their annual statistical report.

ACCESS TO CARE, DEPRESSION & MENTAL ILLNESS

6. The Teen Mental Health Grant Program may provide funding to school districts to offer mental health first aid training, substance misuse awareness training, peer to peer education and other direct services to youth, staff, and parents. Collect data on outcomes and expenditures.
7. The Teen Mental Health Grant Program may provide funding for Children's Mental Health Service Providers including but not limited to Center's for Excellence, crisis services, respite services, and in-patient services. All these different levels of care take specialized staff and training.
8. Children's Mental Health Providers need increased reimbursement rates from insurance companies (private commercial and Arizona Health Care Cost Containment System) due to their specialized training related to their areas of practice. Additional time is required for children's appointments including session time and consultation with parents.
9. Increasing incentive for mental health professionals in schools and communities by assisting with student loans or years of service awards in underserved communities at the new graduate level and a focus on certification and degree programs that serve children.
10. That the Legislature fully fund on an ongoing basis the Children's Behavioral Health Fund and consider non-General Fund sources such as the state insurance premium tax collections.
11. Amend [A.R.S. § 20-2322](#) to require all private health insurers provide reimbursement for services delivered through the psychiatric Collaborative Care Model, which shall include the following current procedural terminology (CPT) billing codes established by the American Medical Association (AMA):
 - 99492
 - 99493
 - 99494

BULLYING & SOCIAL MEDIA

12. School districts obtain or create an app that would assist with threat assessments and allow students to report safety issues as well as gain clinical support that is 24/7 and anonymous. The app must include resources for students and parents regarding mental health, bullying, and substance misuse. This will improve school violence and student mental health supports. [HB 2862](#) (Laws 2022, Chapter 313) funds a part of this through the Arizona Department of Education but needs to be amplified through the Teen Mental Health Grant to provide a robust tool for students, parents, and educators to access.
13. Support or create social media marketing campaigns on digital wellness geared to parents that include small clips from documentaries such as Childhood 2.0 and other public service announcements shown statewide on an ongoing basis.
14. Funding of White Ribbon Week — a week dedicated to digital wellness for students that will raise awareness and education for K-12 students and families.
15. Provide information to the Hub focused on different types of bullying, cyberbullying, social media impact, and bullying behaviors for parents and students. As well as strategies for students to mitigate incidents and timely reporting to school officials.
16. Increase the number of certified school counselors at every school level to improve caseloads.

FAMILY SUPPORT & SUBSTANCE ABUSE

17. Provide information to the Hub focused on prevention, education, crisis management and treatment, post treatment and support.
18. The Teen Mental Health Grant Program may provide funding to school districts and nonprofit organizations to offer mental health first aid training, youth resiliency training, and substance misuse awareness training to youth, staff, parents, and community stakeholders.
19. That legislation be drafted to develop tax credit deductions for substance misuse inpatient and outpatient treatment to relieve financial burden for families.
20. Utilize monies from the Opioid Settlement (Consumer Remediation Subaccount) to fund the Substance Use Disorder Services Fund to provide substance use disorder treatment services to underinsured or uninsured individuals.
21. The Teen Mental Health Grant Program may provide supplemental funding to school districts to have one or more primary prevention specialist on staff whose sole purpose is to work with local coalitions and nonprofits, to coordinate youth resiliency and primary prevention lessons/training.
22. More access to substance misuse inpatient and rehabilitation facilities for children/adolescents across the state, specifically in rural areas.

23. That legislation be drafted to permit 16-year-olds in crisis that lack a parent or legal guardian to consent for mental health treatment for stabilization only for a maximum of 4 months and to include talk therapy (no prescription medications).

December 8, 2022, Adopted at 9:50 A.M.