



House Mental Health Committee Subject Matter Hearing: Mental Health in the School System

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On behalf of EverThrive Illinois, I thank you for the opportunity to provide testimony at this hearing on Mental Health in the School System. My name is Nadeen Israel and I am the Policy Director at EverThrive Illinois.

EverThrive Illinois is a non-profit organization that has worked relentlessly over the past 29 years to improve the health of Illinois mothers, children, and families. One of the ways we work to achieve our mission is by staffing the Illinois School-Based Health Alliance, which brings together a broad-based coalition of organizations and individuals to advocate for and support school health centers (SHCs) as school and community assets.

SHCs are primary care offices located in or linked to a school. The 66 SHCs in Illinois provide access to primary care, behavioral health, dental, nutrition, and preventive services to an estimated 50,000 children and adolescents across the State. Many SHCs in Illinois employ full- or part-time Licensed Clinical Psychologists (LCPs) and/or Licensed Clinical Social Workers (LCSWs) to provide integrated behavioral health services where students spend the majority of their time: schools. SHCs function as neutral school partners, offering safe spaces for students, staff, and parents and invite everyone into non-judgmental dialogue. SHCs are viewed as a place where everyone can receive help and support because the SHC business is health and healing to optimize school and life success. Staff also often know how to connect families to additional services to fulfill unmet social needs.

As you consider the topic of mental health in schools, it is worthwhile to note that beyond providing care to individual students, SHCs are well positioned to lead efforts to ensure that schools continue to address the impact of trauma on the mental and physical health of their entire student bodies and communities. SHC staff often report that one of the primary drivers of both physical and mental health concerns amongst their patients is exposure to trauma. One SHC recently shared:

"A 15 year old girl who recently emigrated from Central America came to the school-based community health center for pain in her knee. Upon getting more history regarding her background, the medical provider learned the incredibly traumatic story of how she crossed the border and was detained at this young age along with her older sister, who is 17. As for so many parents, the girls' parents wanted them to come to this country for better opportunities, safety and freedom. They felt the incredible risk was worth the potential benefits.

There was a significant amount of organized crime in her city in Central America, and she and her sister were not safe. A couple of weeks after moving to Chicago, the patient received pictures of her aunt, who had been murdered in their home town. Her aunt received several gunshot wounds and was found dead in her vehicle. Her aunt was her primary caregiver for the last few years, and hence, our patient considered her like a second mother.

As one can imagine, all of these experiences have been extremely traumatic for this patient. Fortunately, the patient has been able to initiate behavioral health therapy with our team. Also, our financial counselor helped the patient's mother obtain health insurance, so the patient can have the necessary imaging and consultation with a specialist regarding the knee. Our medical provider also has been able to develop a positive relationship with the patient. Our hope is that our relationship can serve as an additional safety net, as well as motivation

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and support so the patient can accomplish her dreams."

In addition to offering trauma-informed services to clients, including prevention, screening, and treatment, SHCs can partner with school personnel to learn about trauma-informed services, champion trauma-informed care, train school personnel, and help schools develop a trauma-informed milieu.

As you can see, SHCs are well positioned to support efforts to address mental health in school settings. However, to leverage SHCs most effectively, SHCs need better supports to ensure that they are able to sustain the staffing levels they need to meet the demand.

One opportunity we see to improve access to behavioral health services through SHCs relates to the State's Rule 132 reform effort. Rule 132 code has historically excluded SHCs, due to the stringent criteria for designation as an eligible provider and the administrative burden eligible providers face. While SHCs directly employ or have arrangements with highly qualified licensed behavioral health professionals, their lean infrastructure limits their ability to comply with extensive administrative reporting.

Based on our review of the draft regulations, it appears that FQHC sponsored SHCs will likely be able to bill for more services, and that Type 56 SHCs (non-FQHC sponsored) may also be able to seek designation and bill for services as a "behavioral health clinic" under Part B of Section 140.460. We are thrilled to see these draft changes, and as the State continues to refine changes to Rule 132, we urge the State to ensure that the final definition of a "behavioral health clinic" included in the code be inclusive of both FQHC and Type 56 SHCs. Ensuring that SHCs are included in this definition will increase access to services for the thousands of students and community members seeking behavioral health services in the 66 SHCs across the state.

Last but certainly not least, the State currently invests roughly \$4.3M annually in the SHC model of care through the Illinois Department of Public Health's School Health Grant program. We encourage the State to further its commitment by protecting and increasing this funding and also considering innovative ways to leverage the SHC model to address the mental health needs of students across our state.

We at EverThrive Illinois and the Illinois School-Based Health Alliance thank you for the opportunity to provide testimony today and welcome further conversations to explore how SHCs can be part of the solution to address mental health in schools.

Sincerely,

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