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Meadows Mental Health Policy Institute Applauds Passage of Historic Mental Health Legislation
Early Intervention and Access to Care Will Save Lives

AUSTIN - The Meadows Mental Health Policy Institute (MMHPI) applauded the final passage of SB 11, which will improve access to mental health care from the family doctor, expand the mental health workforce, and provide real-time help to families and schools for high risk children and youth with mental health needs. This is a historic step to improve outcomes for Texas children and families affected by mental illness by meeting needs far earlier than the eight to ten years that families must wait today for care.

“Texas lawmakers took a bold step forward for Texas children and parents by passing SB 11,” said MMHPI President and CEO Andy Keller, PhD. “We are thankful to Gov. Greg Abbott for making children’s mental health an emergency item this session, Lt. Governor Dan Patrick for making this bill a priority in the Texas Senate, and for the unwavering leadership of Sen. Nelson as she championed a bipartisan effort, alongside Rep. Zerwas, that will both save and improve lives through early intervention.”

Undiagnosed and untreated mental illness carries heavy human and economic costs. Youth across the nation are facing tragic levels of suicide, depression, and anxiety and wait years for help today. Inadequately treated mental illness and substance abuse costs Texas local governments over $2 billion a year in emergency and justice system expenses. Most importantly, the earlier mental illness is detected, the more effective care will be.

“Half of all mental health conditions manifest by age 14, so early intervention is key to achieving the best outcomes, and SB 11 makes it easier to detect and treat children’s issues earlier and more effectively,” said MMHPI Senior Fellow of Pediatric Health Policy Seema Shah, MD. “Our thanks to Sen. Nelson, Sen. Taylor, Rep. Zerwas, Rep. Bonnen and leaders in both chambers for ensuring Texas children and families have access to SB 11’s critically-needed programs.”
SB 11 establishes the Texas Child Mental Health Care Consortium, which establishes the following:

- **Child Psychiatry Access Networks (CPAN):** Care is best detected and treated early by the family doctor, but pediatricians and primary care providers often face tough questions that require consultation on the best treatment options. By creating child psychiatry consultation and treatment hubs at our leading medical schools, CPAN will encourage early intervention and better treatment decisions. A similar statewide program in Washington State helped reduce antipsychotic medication use by 49% for children served.

- **Texas Child Health Access Through Telemedicine (TCHATT):** At the direction of parents, schools will have access to health providers through telemedicine and telehealth to help identify and meet the mental health needs of at-risk children and youth.

- **Child Psychiatry Workforce Expansion:** The bill expands funding for child and adolescent psychiatrists to serve as academic medical directors for community mental health providers, as well as new resident rotations positions under the academic medical director’s supervision.

- **Child and Adolescent Psychiatry Fellowships:** Establishes funding to train new physicians to specialize in child and adolescent psychiatry.

**About MMHPI**

Since its public launch in 2014, MMHPI has helped Texas legislators, government officials, members of the judiciary, and local leaders identify systemic mental health needs and solutions, quickly becoming Texas’s most trusted source for data-driven mental health policy. The Institute is helping Texas leaders address the mental health crisis in our jails and emergency rooms, improve access to care for veterans and their families, shift the focus of new investments toward early intervention, and expand the mental health workforce. Learn more at [www.texasstateofmind.org](http://www.texasstateofmind.org).