Hospitals around the State are experiencing significant disruptions in their functioning due to the influx of children with high behavioral health needs. The biggest concern is that hospitals are unable to transition these children to lower levels of care for a variety of reasons, including, but not limited to, diminished capacity in mental health residential facilities due to the workforce crunch and limited community based support systems. Since 11/17/21, DHS has been helping Fairview Hospital to transition children from their Emergency Department (ED) to appropriate levels of care. Fairview had 20 children in the hospital (ED and inpatient) who did not need hospital level of care, resulting in patients boarding in the hallways of the ED. Despite full involvement of DHS, by 11/26/21, we were successful in transitioning only 4 children out of hospital. It is worth highlighting, that DHS was able to secure placements for 12 children, but most of them fell through at the last minute due to staffing shortages and COVID related complications. We also noticed that each day we were transitioning children out of ED, new children continued to show up at the ED due to behavioral health concerns. Unfortunately, this situation is not unique to Fairview Hospital. HCMC, Allina Hospitals and Children’s Hospital, have also reported the same struggles. Data generated from Medicaid claims, indicate that from January 1, 2020 to November 26, 2021, there were 6,762 individuals under 18 years of age who were treated for mental health emergencies in hospitals. From January 1, 2020 to November 26, 2021, there were 2,167 individuals under 18 years of age who were admitted to the Emergency Room for overdose diagnosis and treatment.

Based on our consult with stakeholders, here is our request:

Two temporary FTE for CSA ($360,000 for FY2022-23): The task of transitioning children from ED (Emergency Departments) involves maneuvering of complicated systems while maintaining active contact with the family. Mental health professional and grant management experts well-versed in the medical eligibility and child development will be hired to perform transition related functions.

Stop-gap funds focused on children in crisis situations including but not limited to EDs: Two PRTFs are functional right now and three new PRTFs are on track of opening their doors in near future. Based on our consult with providers and review of the information submitted by them we believe that one time funding to accommodate transition of children from EDs and other places including but not limited to CABHH (Children and Adolescent Behavioral Health Hospital) will have meaningful, positive impact on the well-being of children and also open up beds across the continuum. We are requesting $2,500,000 as stopgap funding to support this work. The funding will be distributed among operational PRTFs and will be furnished through reimbursement of the costs submitted by them in the realm of facilitating transition of children in the needed levels of care. Each PRTF will be eligible to access up to $500,000, based on actual costs incurred during a 12 month period starting from the date of the grant award. PRTFs will have to be operational and accepting admissions prior to June 2022 to access these funds. Additional funds may be made available to the operational PRTFs, beyond $500,000 if others are not able to accept admissions by June 2022. This funding will be exclusively focused on needs of children with behavioral health issues, in EDs and other facilities across the State.