## ARIZONA HOUSE OF REPRESENTATIVES Fifty-fifth Legislature - Second Regular Session

#### TEEN MENTAL HEALTH HOUSE AD HOC COMMITTEE

Report of Interim Meeting Thursday, December 8, 2022 House Hearing Room 1 (58) -- 9:00 A.M.

Members Absent

Dr. Chhatwal

Mrs. Harrison

Mr. z-13 Other

Ms. Corieri

Ms. Espino

Convened 9:12 A.M.

Recessed Reconvened

Adjourned 10:15 A.M.

MINUTES RECEIVED CHIEF CLERK'S OFFICE

12-8-22

Members Present

Representative Osborne, Chairman

Representative Grantham

Representative Blackwater-Nygren

Ms. Blalock

Ms. Breitwieser Cutshall

Ms. Coggins

Ms. Godbehere

Ms. Guy

Representative Hernandez

Ms. Jones Mellon

Dr. Kirkilas

Ms. McPherson

Ms. McWilliams

Pastor Nunez

Mr. Sampson

Sergeant Tyler

#### **Agenda**

Original Agenda - Attachment 1

#### Request to Speak

Report – Attachment 2

#### **Committee Attendance**

Report - Attachment 3

**Presentations** 

Name Organization Attachments (Handouts)

Sheila Hedstrom-Pelger n/a 4

(statement read by Rep.

Osborne; w/photo)

Randy Spencer Alice Cooper's Teen Rock Centers 5

**Committee Recommendations** 

<u>Action</u> <u>Attachment</u>

Adopt Committee Recommendations

Julie Ryberg, Committee Secretary

December 8, 2022

(Original attachments on file in the Office of the Chief Clerk; video archives available at http://www.azleg.gov)

## **ARIZONA HOUSE OF REPRESENTATIVES**

# INTERIM MEETING NOTICE OPEN TO THE PUBLIC

Convened 9:12 am Adjourned 10:15 am

#### TEEN MENTAL HEALTH HOUSE AD HOC COMMITTEE

Date:

Thursday, December 8, 2022

Time:

9:00 A.M.

Place:

HHR<sub>1</sub>

Members of the public may access a livestream of the meeting here: <a href="https://www.azleg.gov/videoplayer/?clientID=6361162879&eventID=2022121005">https://www.azleg.gov/videoplayer/?clientID=6361162879&eventID=2022121005</a>

#### **AGENDA**

- 1. Call to Order
- Minute for Good
- 3. Public Testimony
- 4. Speakers:
  - Sheila Pelger, Mother of Tyler Hedstrom, Registered Nurse
  - Alice Cooper's Solid Rock Teen Centers
- 5. Discuss, Review and Adopt Committee Recommendations
- 6. Final Comments from Committee Members
- 7. Adjournment

#### Members:

Representative Joanne Osborne, Chair Representative Travis W. Grantham, Co-Chair Representative Jasmine Blackwater-Nygren Representative Alma Hernandez Jennifer Blalock Lisa Breitwieser Cutshall Dr. Jasleen Chhatwal Bernadette Coggins Christina Corieri Candy Espino Gina Godbehere
Kristina Guy
Sally Harrison
Shelley Jones Mellon
Dr. Gary Kirkilas
Katey McPherson
Kimberly McWilliams
Pastor Ryan Nunez
Solomon Sampson
Sergeant Sean Tyler

12/02/2022 RA

People with disabilities may request reasonable accommodations such as interpreters, alternative formats, or assistance with physical accessibility. If you require accommodations, please contact the Chief Clerk's Office at (602) 926-3032 or through Arizona Relay Service 7-1-1.

## Committee Agenda

**Committee Name:** 

Teen Mental Health House Ad Hoc Committee

**Agenda Date:** 

12/8/2022

Agenda Time:

9:00 A.M.

Agenda Room:

HHR 1

Show All ○ Show Bills ○ Show Executive Nominees ○ Show Discussion Items

	Discussion Item		Public Testimony		1		
Sp	k	Position	Name	Representing	Comments	Status	
lf Neces	sary	For	Patti Serrano	Self	As a proud public school Mom to a		

Attachment 2

## ARIZONA STATE LEGISLATURE

Fifty-fifth Legislature - Second Regular Session COMMITTEE ATTENDANCE RECORD

COMMITTEE ON AD HOC C		COMMITTEE ON TEEN MENTAL HEALTH					
CO-CHAIRMAN: Joanne Osborne		_ CO-CHAIR	MAN:	Travis Grantham			
D	ATE	12/08/22	/22	/22	/22	/22	
C(	CONVENED		m	m	m	m	
RE	ECESSED						
RE	ECONVENED						
Aĭ	DJOURNED	10:15 am					
MEMBERS:							
Blackwater-Nyg	gren, J	V					
Hernandez, A		bing.					
Ms Blalock, J		V					
Ms Breitwieser-	Cutshall, L	V	ļ				
Dr. Chhatwal, J		bau-a					
Ms Coggins, B		V					
Ms. Corieri, C							
Ms Espino, C							
Ms Godbehere,	G	V					
Ms Guy, K		V					
Ms Harrison, S		Marriel					
Ms Jones Mello	n, S	V					
Dr. Kirkilas, G		V					
Ms McPherson,	K	V					
Ms McWilliams	, К	V					
Pastor Nunez, R		V					
Mr Sampson, S		V					
Sgt. Tyler, S		V					

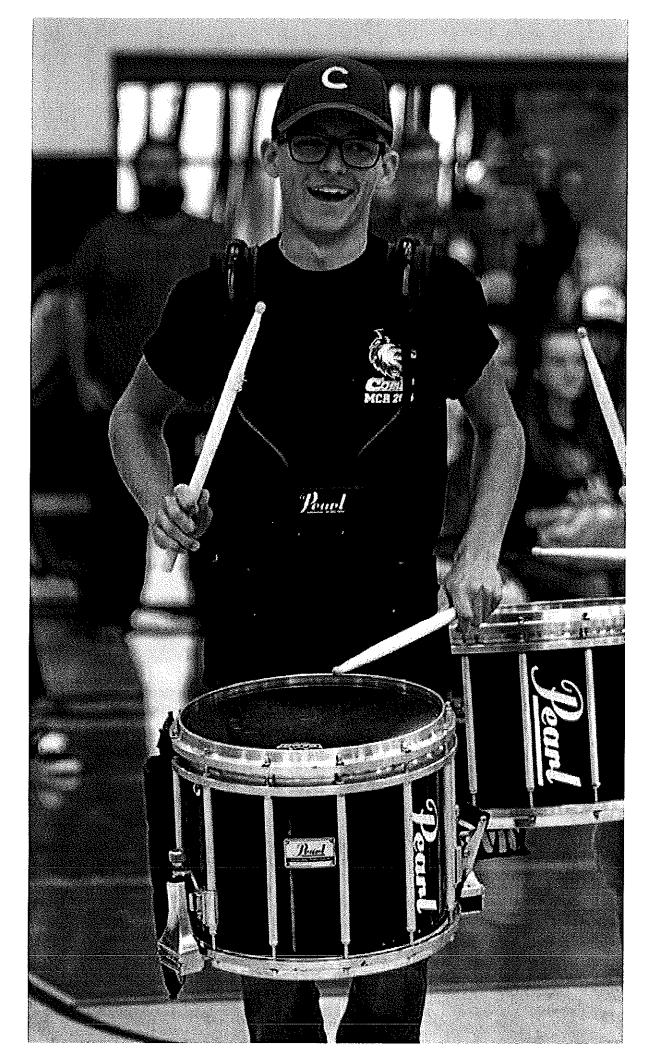
Grantham T, Co-Chairman					
Osborne J, Co-Chairman	V				
√ P	resent	Abs	ent e	xc Excuse	ed

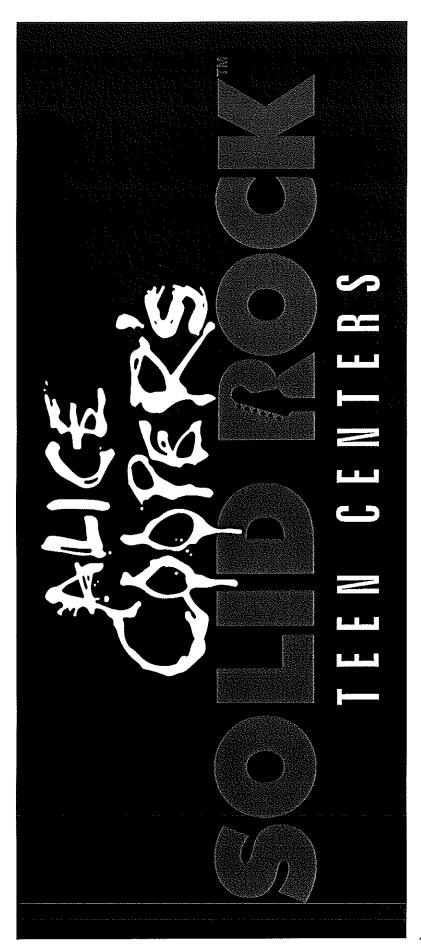
From: Sheila Hedstrom-Pelger

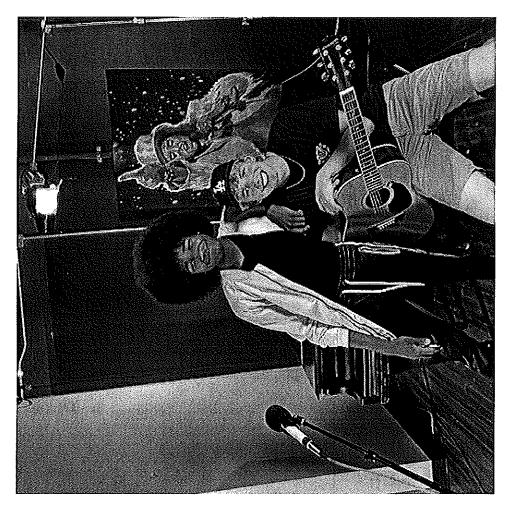
Date: December 7, 2022 at 8:14:26 PM MST Subject: Teen Mental Health Committee

My son Tyler died at 17 by suicide. He was a happy and popular kid on the outside but I found out after he died that he was suffering from anxiety and depression for quite some time. He cried at school several times and his friends even went to a teacher about it but it never got back to me. After he died, a lot of work was done in Arizona by parents like me, legislators, educators and community parents who were shocked by the increase of child suicides and wanted to try to do something, anything to stop the epidemic. Because of jakes law and the Mitch Warnock act, there is more access to care and Arizona school employees are required to be educated on the signs of kids who may be suicidal. For my son, I found out too late that he was self medicating with substances to numb his pain. One major symptom of depression and anxiety is substance abuse and it's not always addressed in a way that focuses on helping the child but more like punishing them. More education for parents and those who work with kids on the warning signs of substance abuse can help identify these at risk kids. Substance use is not just the "bad Kids" or kids just experimenting. I don't know what the answer is in regards to kids using drugs and alcohol, but if the experts could have more resources to educate parents and kids and teachers, progress could be made. There has to be something more than "kids don't do drugs" preached in middle school and then never mentioned again unless you get caught. I urge your committee to fight for more access to support and education for substance abuse and mental health education. I'm sorry I couldn't be there in person to share Tyler's story, but I'll help however I can. I do know that at least

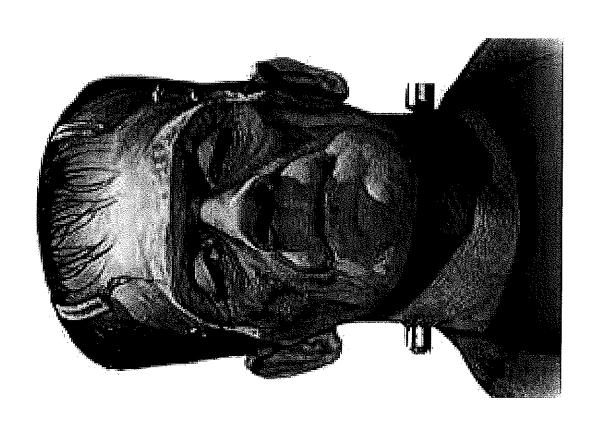
15 kids in the last few years have reached out to me, some I knew, some in never met, to tell me that losing Tyler made them fight harder and get help when their depression and drug use was hurting them. Somehow sharing these stories with kids and getting On their level helps and that's the best advice I can give because I wish I would have done that for Tyler when he was here. Thank you for your time.











### 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:
  - o 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.
  - o Support digital wellness marketing campaigns.
  - o 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).
  - o Private donations.
  - o 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

- 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.
- 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):
  - 0 99492
  - o 99493
  - 0 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.
- 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.