

# **S. 3289: Children's Mental Health Accessibility Act:**

## **Modifying the 1915c Home and Community-Based Services Waiver and Reflecting language changes from Rosa's Law in the Social Security Act**

### **What does the legislation do?**

Includes children and adolescents in an existing Medicaid waiver option that is focused primarily on the aged, elderly and disabled populations. The waiver for those populations can be utilized to provide them with in-home and community-based services as opposed to their equivalent out-of-home placement. **Bottom line: It provides states with an avenue to avoid the institutionalization of children and youth.**

Makes the important mandatory statutory language changes to the Social Security Act to reflect the use of the term 'intellectual disability' instead of 'mental retardation' to more meaningfully refer to the disabilities these individuals face.

### **Why is this legislation needed?**

Currently the 1915c Medicaid Home and Community-Based Services waiver option does not specifically include children and adolescents as a covered population or reference a psychiatric residential treatment facility (PRTF) as an institutional placement states can choose to provide home and community-based services in lieu of to children identified at risk of entering a PRTF.

Since 2007, nine states have been demonstrating that this Medicaid waiver can be used to serve children safely and cost effectively using in-home and community-based services as opposed to being placed in the institutional placement of a psychiatric residential treatment facility (PRTF).

Findings to date of the demonstration indicate that serving children in the home as opposed to through placement into a PRTF has enabled children and youth to either **maintain or improve their functional status**. Additionally, **in-home intervention costs are on average less than a third of the cost of PRTF institutional costs**.

The nine states, Alaska, Georgia, Indiana, Kansas, Maryland, Mississippi, Montana, South Carolina and Virginia, have served over 5,000 children and youth in this demonstration project with the Centers for Medicare and Medicaid Services (CMS).

This legislation would allow these nine demonstration states to seamlessly continue providing home and community-based services to children in their communities along with giving other states the opportunity to include such an option in their own Medicaid systems.

The outdated and obsolete term 'mental retardation' is also important to officially remove from our dialogue. In 2010, there was bipartisan agreement through passage of Rosa's Law, of the need to replace this phrase with 'intellectual disability' across all federal laws and this legislation reflects this belief by removing the outdated term and replacing it with this more accurate description in the U.S. code.

### **Questions?**

Many children now in PRTFs could be at home with their families and in their communities and it is time that we uphold the dignity of individuals with intellectual disabilities by appropriately referring to the disabilities they have. The Children's Mental Health Accessibility Act addresses both of these important issues!

**To learn more about supporting this important piece of legislation contact:**

**Megan Thompson, Senator Kerry's office**  
megan\_thompson@kerry.senate.gov

**Rodney Whitlock, Senator Grassley's office**  
Rodney\_whitlock@grassley.senate.gov

**Nicole Truhe, Youth Villages**  
Nicole.truhe@youthvillages.org