

## **BILL ANALYSIS**

Senate Research Center  
88R1816 MM-D

S.B. 113  
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Education  
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As Filed

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

In 2021, U.S. Surgeon General Vivek Murthy reported that up to 1 in 5 children ages 3 to 17 in the United States have a reported mental, emotional, developmental, or behavioral disorder - with only half receiving adequate treatment. In addition, national surveys of youth have shown major increases in suicidal ideation. From 2009 to 2019, 36 percent of the high school students surveyed shared that they seriously considered attempting suicide. Furthermore, youth psychiatric visits to emergency departments for mental health challenges increased by 28 percent between 2011 and 2015, with suicide as the second leading cause of death in children.

The cost of providing mental health services is an extreme barrier for many public schools and is often sacrificed unless grants are offered. The Texas Education Agency recommends there be at least one counselor per 250 students, but 98 percent of students attended districts that did not meet this ratio, leaving millions of children without the mental health services they need. This disproportionately impacts low-income and racially marginalized students the hardest. Similarly, socioeconomically disadvantaged children and adolescents are two to three times more likely to develop mental health conditions than peers of higher socioeconomic status. Mental health care is crucial to children's health, as it compromises their well-being, participation and success in school. and long-term risk factors for homelessness, unemployment, and incarceration.

S.B. 113 allows public school districts to contract with a local mental health authority to provide mental health services to those in the district. It would also allow the school district to receive Medicaid reimbursements for these services.

As proposed, S.B. 113 amends current law relating to the provision of on-campus mental health services by a school district and reimbursement under Medicaid for certain services provided to eligible students.

### **RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter A, Chapter 38, Education Code, by adding Sections 38.037 and 38.038, as follows:

Sec. 38.037. ON-CAMPUS MENTAL HEALTH SERVICES. (a) Authorizes a school district to contract with a local mental health authority to provide mental health services on a campus of the district.

(b) Requires a local mental health authority providing on-campus mental health services that conducts a mental health or behavioral health assessment of a student or provides mental health or behavioral health services to the student, at the request of the student's parent or guardian, to provide to the student's primary care physician the results of the assessment conducted and, if applicable, the results of any services provided.

Sec. 38.038. REIMBURSEMENT UNDER MEDICAID. Requires the Health and Human Service Commission to allow a school district to enroll as a provider under the medical assistance program under Chapter 32 (Medical Assistance Program), Human Resource Code, to provide and receive reimbursement for the provision of mental health services to district students who are medical assistance recipients.

SECTION 2. Effective date: upon passage or September 1, 2023.