

Mental Health Matters Act (H.R. 7780)

A comprehensive proposal to confront America's ongoing mental health crisis and help students, families, and educators thrive.

The pandemic had a severe impact on students' and educators' mental health needs.

PreK-12 Children & Students: The COVID-19 pandemic and opioid crisis took a serious toll on students' social and emotional development. In 2021, over [44 percent of students](#) experienced persistent feelings of sadness or hopelessness, almost 20 percent seriously considered suicide, and 9 percent attempted suicide. In 2016, roughly [1 in 6 U.S. children](#) aged 2-8 years had a diagnosed mental, behavioral, or developmental disorder. Given the life-long consequences of adverse experiences and trauma on children, it is crucial that we improve the mental health of our nation's young people.

Educators & School Staff: The COVID-19 pandemic intensified the unique mental health challenges that school personnel face, including the difficult task of addressing learning loss and supporting students' heightened social and emotional needs. The pandemic has also personally affected educators and staff, resulting in greater levels of stress and trauma. School staff need strengthened mental health support to improve their wellbeing and prevent staff shortages.

College Students with Mental Health Challenges: The pandemic underscored the need to remove barriers for college students with mental health challenges face when accessing reasonable accommodations that help them learn. While K-12 students with mental health challenges are guaranteed reasonable accommodations under the *Individuals with Disabilities in Education Act*, colleges students currently lack the same protections they need to ensure that they can fully participate in their education.

To meet the increased demand, our schools need additional resources and support to better serve educators and their students.

Schools play an outsized role in providing mental health services, particularly when nearly 80 percent of youth in need of mental health services do not have access in their communities. Unfortunately, our schools do not have sufficient resources to respond to the increased prevalence and complexity of students' mental health needs.

According to a [2019 ACLU study](#), no state met the student-to-social worker ratio of one social worker for every 250 students, as recommended by the National Association of Social Workers. Furthermore, the national ratio of school psychologists per students in the 2020-2022 school year was one psychologist per every 1,162 students—more than double the ratio recommended by the National Association of School Psychologists.

Far too many Americans suffer from insufficient access to the mental health and substance use disorder benefits, to which they are legally entitled.

Under the *Employee Retirement Income Security Act (ERISA)* and *Mental Health Parity and Addiction Equity Act (MHPAEA)*, group health plans and insurance companies must offer workers and their families the same access to mental health and substance use disorder benefits as physical health benefits. Unfortunately, workers and families continue to face barriers—from forced arbitration to inadequate enforcement—to holding retirement and benefit plan sponsors accountable for parity in access to behavioral health benefits.

In a recent [report](#) to Congress, the Departments of Labor, Health and Human Services, and the Treasury found widespread violations of the MHPAEA by group health plans and insurers who are failing to maintain parity between mental health benefits and physical health benefits. The report further recommended that Congress enhance the Secretary of Labor’s capacity to enforce mental health parity, including providing authority to impose civil monetary penalties for violations.

The *Mental Health Matters Act* includes a series of critical solutions that would help students, educators, and families confront America’s ongoing mental health crisis.

The *Mental Health Matters Act* (H.R. 7780) would take wide-ranging steps to support the behavioral health of children and school staff, strengthen school-based behavioral health care, and ensure access to mental health and substance use disorder benefits for workers and families. Specifically, the legislation:

- Directs the Department of Education to award grants to build a pipeline of school-based mental health services providers and increase the number of mental health professionals serving in elementary and secondary schools in high-need areas;
- Directs the Department of Education to award grants to state educational agencies to recruit and retain school-based mental-health-services providers at high-need public elementary and secondary schools;
- Requires institutions of higher education to allow incoming students with existing documentation of a disability to access disability accommodations and requires institutions to adopt more transparent policies around the accommodations process;
- Creates a grant program to increase students’ access to evidence-based trauma support and mental health services by developing innovative initiatives to link schools and local educational agencies with local trauma-informed support and mental health systems;
- Requires the Department of Health and Human Services to identify evidence-based interventions for Head Start programs and help Head Start agencies implement these interventions to improve the health of children and staff;
- Provides the Department of Labor with strengthened authority to ensure that private, employer-sponsored group health plans fulfill their responsibility to provide mental health and substance use disorder benefits under MHPAEA and ERISA; and
- Strengthens the ability of Americans with private, employer-sponsored health and retirement plans to hold plan sponsors accountable when they are improperly denied benefits by banning forced arbitration agreements and ensuring a fair standard of review by the courts.