



NYS Coalition
for Children's Behavioral Health

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About the Organization

The New York State Coalition for Children's Behavioral Health (CCBH) is the voice for children, families, and service providers in New York's children's behavioral healthcare continuum. The Coalition represents 50 provider agencies that collectively provide residential and community-based services to nearly 200,000 children and their families per year and employ over 21,000 staff. We work collaboratively with families, state government, and advocates to secure funding and implement policies that best serve the needs of children and families who need all levels of behavioral health support.

FY 2026-27 Budget Priorities

New York's children and families with behavioral health needs are in a devastating access to care crisis: a [2024 analysis](#) shows the vast majority of youth who need outpatient care are simply unable to receive it, and those who do access care have to wait months or even longer. We must do better, starting with the following recommendations.

- **Invest \$200m to implement rate enhancements and reforms across the children's continuum of care** – including but not limited to Article 31, Article 32 (822), CFTSS, and HCBS programs – to create a sustainable children's behavioral health system that enhances quality and access to services across the state. See additional details from the Healthy Minds, Healthy Kids rate study in the attached sheet.
- **Provide a 2.7% targeted inflationary increase (TII) for behavioral health rates and contracts** to help providers reduce staff vacancies and turnover, and support rising operational costs. This investment is necessary to increase the wages of our hardworking staff and to counter cost inflation in everything from utilities to cybersecurity.
- **Raise Reimbursement Rates Across Peer Support Services.** Align peer support reimbursement rates across all programs, including CFTSS, with the 150% rate increase provided for offsite peer services under the Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS) Program.
- **Create a \$5m scholarship program for students pursuing mental health practitioner degrees, including graduate education.** Similar to the "Nurses for Our Future" Scholarship program. Scholarships would enable students who might otherwise be unable to attend college at all to pursue degrees in much-needed professions, which is critical to creating a representative diverse workforce, and including Masters level education would support more diversity in supervisory roles.
- **Expand Non-Medicaid funding for family peer support by adding \$5.5M in flexible Aid to Localities** funding under program code 1650 to allow for flexible approaches to supporting families and young people regardless of their insurance.
- **Support continued investment in the OMH Community Mental Health Loan Repayment Program**, including targeted funding for all practitioners serving youth in nonprofit agencies.

Ideas for Revenue Sources

- Enact a tax on digital advertising revenue from addictive social media platforms, and direct the proceeds to investing in youth behavioral health services. This will build on the work of the Governor and legislature to reign in the negative impact of social media and improve youth mental health.
- Direct civil penalties collected by the Office of the Attorney General resulting from enforcement actions against addictive social media platforms under the SAFE For Kids Act toward youth behavioral health services.



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FY 2026-27 Budget Priorities continued

CCBH Policy Solutions

- **Enact A.7603/S.7978 (Hevesi/Brouk) to improve the cross-systems delivery of children's behavioral health services.** Children's healthcare needs rarely fit neatly within a single silo to begin with, and those with complex behavioral health needs often require services through multiple state and local government agencies in order to reach and maintain wellbeing. We are proposing statutory and regulatory changes to improve this process for families and providers via enhanced data collection on the needs of young people and available service capacity; collaboration and communication between government agencies, providers, families, and payors; clear deadlines for screenings, decisions, and referrals to appropriate care; and adequate funding to effectuate the resulting care.
- **Enact legislation to require commercial insurance coverage of all children's behavioral health services covered by Medicaid, including CFTSS and HCBS.** New York needs to close the gap in services available to children on Medicaid vs private insurance, which currently does not cover a wide range of critical behavioral health services. Building on the enactment of a commercial insurance rate floor for outpatient services in the SFY 2025 budget, and the addition of the Children and Family Treatment and Support Services (CFTSS) and Children's Home and Community Based Services (HCBS) to Child Health Plus plans in the SFY 2023 budget, we propose legislation enabling families with commercial insurance to access the full continuum of children's behavioral health care available to families with Medicaid starting with the services included in **A.5389/S.5114 (Weprin/Hinchey)**.
- **Enact legislation to eliminate copays and coinsurance on behavioral health services to improve access to care.** A similar measure was enacted in the SFY 2025 Adopted Budget to eliminate copays for people who rely on insulin for their health.
- **Enact legislation to safely increase service capacity and support entry of new clinicians into the field.** We propose allowing licensed clinicians to supervise additional limited permit holders gaining experience towards their full professional licensure, thereby safely increasing service capacity.

For Further Information, Contact:



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