THE GENERAL ASSEMBLY OF PENNSYLVANIA

No. 168 Session of 2019

INTRODUCED BY BROOKS, LEACH, BLAKE, LANGERHOLC, J. WARD, ARGALL, COLLETT, YAW, TARTAGLIONE, AUMENT, COSTA, KILLION, BREWSTER, YUDICHAK, MENSCH AND MUTH, JUNE 14, 2019

REFERRED TO HEALTH AND HUMAN SERVICES, JUNE 14, 2019

A RESOLUTION

1 2 3 4	Directing the Joint State Government Commission to establish an advisory committee to conduct a study on the mental health care provider shortage in this Commonwealth and to issue a report.
5	WHEREAS, The National Survey on Drug Use and Health for 2016-
6	2017 estimates that approximately 17.68% of adults in
7	Pennsylvania, or 1,786,000 individuals, have a mental illness;
8	and
9	WHEREAS, The National Survey on Drug Use and Health for 2016-
10	2017 also estimates that approximately 4.3% of adults in
11	Pennsylvania, or 441,000 individuals, have a serious mental
12	illness; and
13	WHEREAS, According to the National Alliance on Mental
14	Illness, over 20% of youths between 13 and 18 years of age
15	experience a severe mental disorder at some point during their
16	life; and
17	WHEREAS, Mental health care providers, including
18	psychiatrists, psychologists, licensed clinical social workers,

marriage and family therapists and licensed professional
 counselors, render crucial services to residents across this
 Commonwealth; and

WHEREAS, The National Council for Behavioral Health reported a shortage in the number of psychiatrists in 2012, estimating that the United States needs 6.4% more psychiatrists and, by 2025, the United States will need between 12% and 25% more psychiatrists; and

9 WHEREAS, There are shortages of professionals to treat 10 persons with serious mental illnesses, including those residing 11 in the State hospitals in Pennsylvania and within the Department 12 of Corrections, which is one of the largest providers of mental 13 health services in this Commonwealth; and

14 WHEREAS, Adequate access to mental health care is essential 15 to maintaining the overall health and well-being of 16 Pennsylvanians; and

WHEREAS, Despite the growing demand for mental health treatment across the United States, a mental health care workforce crisis has been developing, largely due to a shortage of mental health care providers; and

21 WHEREAS, Pennsylvania ranks 35 out of all 50 states and 22 Washington, DC, for mental health care workforce availability, 23 with a patient to mental health care worker ratio of 600 to 1; 24 and

25 WHEREAS, Pennsylvania has a Statewide average of 179 mental 26 health care providers per 100,000 people, which is below the 27 national average of 214 providers per 100,000; and 28 WHEREAS, According to Mental Health America, an estimated 29 53.9% of the adult population with a mental illness in 30 Pennsylvania did not receive treatment for their mental illness

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1 in 2018; and

2 WHEREAS, Other factors contributing toward the mental health 3 care workforce crisis include higher demand for mental health 4 care providers, high turnover rates, an aging workforce and low 5 compensation for workers in the field; and

6 WHEREAS, The shortage of mental health care providers also 7 has direct and indirect costs on the economy, including a loss 8 of efficiency and productivity for employees and employers; and 9 WHEREAS, Serious mental illness costs the nation more than 10 \$193 billion in lost earnings per year; and

11 WHEREAS, Mental, substance-use and general health problems 12 and illnesses are intertwined, and coordination of all these 13 types of health care is essential to improved health outcomes; 14 and

WHEREAS, The prevalence of mental illness in individuals can impact their overall health, as individuals with a serious mental illness face an increased risk of having chronic conditions; and

19 WHEREAS, Adults in the United States living with a serious 20 mental illness die on average 25 years earlier than those without, largely due to treatable medical conditions; and 21 22 WHEREAS, Research has identified a definite connection 23 between mental health and the use of addictive substances, as 24 many patients with disruptive or uncomfortable mental health 25 symptoms tend to self-medicate by using alcohol, drugs or 26 tobacco; and

27 WHEREAS, The use of drugs and alcohol does not address the 28 underlying mental health symptoms and often causes additional 29 health and wellness problems for the patient, while also 30 increasing the severity of the original mental health symptoms;

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1 and

2 WHEREAS, The mental health care provider shortage is 3 considerably more prevalent in rural counties and a significant 4 discrepancy exists between access to mental health care in rural 5 counties as compared to urban and suburban counties; and 6 WHEREAS, While the mental health care provider shortage is 7 pervasive, it impacts certain populations to a larger extent; 8 and

9 WHEREAS, One in four older adults experiences some mental 10 disorder, including depression, anxiety disorders and dementia, 11 and this number is expected to double to 15 million older adults 12 by 2030; and

13 WHEREAS, Two-thirds of older adults with mental health 14 problems do not receive the treatment they need and have limited 15 access to current preventative services; and

16 WHEREAS, Adults who are at least 85 years of age have high 17 suicide rates, especially older caucasian men, who have a 18 suicide rate four times that of the general population; and 19 WHEREAS, According to the Centers for Disease Control and 20 Prevention, suicide is the third leading cause of death for 21 youths between 10 and 24 years of age; and

22 WHEREAS, It is believed that telemedicine, which involves the 23 use of electronic communications and software services for 24 patients without an in-person visit, will expand the mental 25 health care workforce by offering flexibility to work from home 26 and will enable collaboration between licensed mental health 27 care providers and primary care providers; and

28 WHEREAS, Encouraging the growth and retention of the mental 29 health care workforce in Pennsylvania will ensure that more 30 individuals have access to timely and adequate mental health

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1 screening and treatment; therefore be it

2 RESOLVED, That the Senate direct the Joint State Government 3 Commission to establish an advisory committee to conduct a study on the mental health care provider shortage in this 4 Commonwealth. The advisory committee should include, but need 5 not be limited to, the following members: 6 7 the Secretary of Education or a designee; (1)8 (2) the Secretary of Health or a designee; 9 the Secretary of Human Services or a designee; (3) 10 (4) the Secretary of Corrections or a designee; 11 (5) the Secretary of Drug and Alcohol Programs or a 12 designee; 13 (6) a representative from the Pennsylvania Psychiatric 14 Society; 15 a representative from the Pennsylvania Psychological (7) Association; 16 17 (8) a representative from the Pennsylvania Counseling Association; 18 19 a representative from the Pennsylvania Chapter of (9) 20 the American Association for Marriage and Family Therapy; 21 (10) a representative from the Association of School 22 Psychologists of Pennsylvania; 23 (11)a representative from the Rehabilitation and 24 Community Providers Association; 25 a representative from the Pennsylvania Association (12)26 of County Administrators of Mental Health and Developmental 27 Services; a representative from the National Alliance on 28 (13)29 Mental Illness Keystone Pennsylvania; 30 (14) a representative from the Mental Health Association

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1 in Pennsylvania;

2 (15) a representative from the Pennsylvania School3 Boards Association;

4 (16) a representative from the Pennsylvania State System
5 of Higher Education;

6 (17) a representative from the Hospital and Healthsystem
7 Association of Pennsylvania;

8 (18) a representative from the Pennsylvania Medical9 Society;

10 (19) a representative from the Pennsylvania Mental 11 Health Consumers' Association; and

12 (20) any other individual or organization selected by13 the Joint State Government Commission;

14 and be it further

RESOLVED, That the advisory committee conduct a minimum of four public input hearings at geographically dispersed locations in this Commonwealth; and be it further

18 RESOLVED, That the advisory committee issue an advisory 19 report to the Joint State Government Commission; and be it 20 further

21 RESOLVED, That the Joint State Government Commission review 22 the advisory report and prepare a final report of its findings 23 that shall include, at a minimum:

(1) identification of the factors behind the mentalhealth care provider shortage in this Commonwealth;

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(2) projections on the number of licensed mental healthcare providers in Pennsylvania in 5 and 10 years;

(3) how telemedicine can be used to extend the mental
health care workforce and provide recommendations on how to
overcome current barriers of use;

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(4) recommendations on how Pennsylvania can encourage
 more individuals to enter and remain in both the public and
 private mental health care workforce;

4 (5) recommendations on how to solve the disparity in the
5 number of licensed mental health care providers in rural
6 counties compared to urban and suburban counties;

7 (6) recommendations on how to ensure there are
8 sufficient numbers of licensed mental health care providers
9 available in schools, including eliminating barriers to
10 direct employment by schools and proposed staffing ratios of
11 mental health care providers to student population;

12 (7) recommendations on how to train or attract mental 13 health professionals to work in integrated care and other 14 emerging areas; and

15 (8) recommendations on how to stop and reverse the 16 mental health care shortage in Pennsylvania;

17 and be it further

18 RESOLVED, That the Joint State Government Commission report 19 its findings and recommendations to the Senate no later than one 20 year after the adoption of this resolution.

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