



April 25, 2022

Governor Gavin Newsom
1021 O Street, Suite 9000
Sacramento, CA 95814

Re: TCP May Revision Recommendations

Dear Governor Newsom:

The Children's Partnership (TCP), a California-based children's advocacy organization dedicated to advancing child health equity through public policy, research, and community engagement, respectfully reiterates the following recommendations to be included in the May revise, which would help move us closer to a California where all children—regardless of their race, ethnicity or place of birth—have the resources and opportunities they need to grow up healthy and thrive.

Expand infant and early childhood mental health and trauma-informed care investments. We request further investment in infant and early childhood mental health with no less than \$250 million in additional General Fund spending on top of the \$4.4 billion approved last year for the Children & Youth Behavioral Health Initiative (CYBHI). Senator Josh Newman and Assemblyman Marc Levine are championing this request on behalf of TCP along with a coalition of children's mental health thought partners. Early prevention and treatment are more beneficial and cost-effective than attempting to treat emotional difficulties and their effects on learning later on. California should pursue a multilayered approach to promoting protective factors for young children, including their parents and caretakers, to stem the tide of accumulating toxic stress and build off the work of the Office of the Surgeon General to expand screening for Adverse Childhood Experiences (ACES). The CYBHI offers the promise of transforming and vastly expanding children's mental health services, however, the CYBHI may miss serving the critical needs of infants and toddlers, as the majority of funding directed to programs rely on partnerships with TK-12 school settings and higher education. The proposed \$250 million expansion is complementary to the CYBHI and would serve young children ages 0 to 5 and their families through a variety of community-based interventions, including Infant and Early Childhood Mental Health Consultations (IECMHC), an evidence-based approach that has been identified as a way to address disproportionate rates of preschool suspension and expulsion for

Black children and children of color, and improve children’s social-emotional wellbeing. The expanded investments would also support childhood provider training and capacity building so that the spectrum of professionals serving young children and their families can respond to and address the socioemotional and behavioral health needs of young children, setting them up for greater well-being as they grow.

Provide multi-year continuous Medi-Cal coverage for children ages 0-5. We request the provision of multi-year continuity of Medi-Cal coverage for children 0-5 within the 2022-23 Budget Act for the 2022-23 budget year and ongoing. Cost for this policy change is estimated to be \$10 million General Fund in the budget year, and upon full implementation, an annual General Fund cost of \$20 million. Assemblywoman Blanca Rubio is championing this budget request as well as authoring AB 2402 to advance this policy. Continuous coverage will improve health outcomes while addressing the disproportionate impact of the COVID-19 pandemic on communities of color by removing barriers to enrollment for families and helping California more effectively respond to Medi-Cal’s historically low preventive care rates for children, which the pandemic has further exacerbated. Stable coverage is particularly critical for young children when frequent well-child care is most important for healthy early childhood development. With Medi-Cal serving mostly children of color, avoiding gaps in coverage can set children of color off on a healthy start in life, ensuring early identification of social needs and addressing them in a timely manner.

Fund child health training for community health workers. We request additional funding for CHW/Ps to be recruited, trained and certified in child health and development in order to address access and equity gaps in children’s preventive services and invest upstream to prevent health inequities from occurring later in life. With the inclusion of Community Health Workers and Promotores (CHW/P) as a Medi-Cal benefit in the proposed State Plan Amendment (SPA), we look forward to working with the administration to create a dedicated community health worker benefit that is available to all children enrolled in Medi-Cal and works to meet children’s unique needs. We are excited about the Governor’s additional budget investments to recruit, train and certify 25,000 new community health workers by 2025 in climate health, homelessness and dementia to meet the goal of a more ethnically and culturally inclusive workforce by 2025. However, with Medi-Cal serving nearly 4 in 10 children, child health and development must also be a specific area in which CHW/Ps are trained and recruited. This would position California to maximize current investments and initiatives for the advancement of child health equity, including proposed policies that integrate CHW/Ps into child health within the proposed CHW preventive services State Plan Amendment, the [Children and Youth Behavioral Initiative](#) and [Medi-Cal’s strategy to support health and opportunity for children and families](#).

Maintain the critical quality assurance and education functions of the Child Health and Disability Prevention Program (CHDP). The CHDP proposed sunset would leave a gap in pediatric care quality assurance and training functions that Medi-Cal managed care plans do not

appear to have the capacity to fill. The CHDP's pediatric care quality assurance and training services require providers to be child-focused and meet the American Academy of Pediatrics *Bright Futures* standards. TCP is extremely concerned that the lack of pediatric quality assurance will further impede Medi-Cal children's access to quality pediatric preventive care - inequities in access to services disproportionately impact young children of color. Additionally, the proposed CHDP elimination does not offer alternative means for delivering the care coordination services now provided by CHDP to children in fee-for-service Medi-Cal, which includes about 10% of children statewide.

Your January 2022-2023 budget proposal was a promising step toward addressing the pressing needs of children and families currently facing the greatest challenges and we stand ready to work with you on implementing those proposals. We request that your May Revision continue that commitment by adopting the above recommendations. Please contact Gabriella Barbosa, Managing Director of Policy, at gbarbosa@childrenspartnership.org or (310) 597-7760 if you have any questions about our May Revision recommendations.

Sincerely,



Mayra E. Alvarez, MHA
President

cc: Richard Figueroa, Office of Governor Gavin Newsom
Tam Ma, Office of Governor Gavin Newsom
Ben Chida, Office of Governor Gavin Newsom
Keely Bosler, Director, Department of Finance
Members and Consultants of the Senate Budget Subcommittee on Health and Human Services
Members and Consultants of the Senate Budget Subcommittee on Education Finance
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