

Transition Truths: Mental Health

The mental health system provides care for the mental health of all individuals, including those who have been diagnosed with mental health conditions or mental health needs.

How this System Works

This system is made up of the people, places, policies, and programs that work together to ensure that everyone is healthy. Maintaining physical and mental health and well-being is important for people to pursue their independent living and life goals.

Like many other systems, mental health can be broken down into a system serving children and youth and a separate system serving adults. This distinction is important because of the widespread gap in service delivery for youth with mental health needs transitioning from youth to adult services. Youth with mental health needs are often diagnosed and served through special education, mental health services, or both. They may also be involved in Foster Care, Juvenile Justice, Workforce Development, Social Security, or other systems with different terminology and deadlines for transition. Often, youth with mental health needs experience a gap when their services end once they reach a certain age between 18 and 22, even though adult Healthcare and mental health systems might be inaccessible or difficult to navigate. For more information on working with youth to navigate the mental health system, see the guide, *[Tunnels & Cliffs: A Guide for Workforce Development Practitioners and Policymakers Serving Youth with Mental Health Needs.](#)*

People and Places

The people in this system include patients, clients, consumers, beneficiaries, healthcare providers, nurses, doctors, pharmacists, personal assistants, home health aides, policymakers, and insurance companies. The work of this system takes place in hospitals, counseling centers, and with peers. At the federal level, the [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#) in the U.S. Department of Health and Human Services is charged with advancing and protecting the behavioral and mental health of the American people.

Policies and Programs

The origins of the mental health system trace back to the [Community Mental Health Act of 1963](#), which provided funding for community health centers in the United States. This Act was part of a movement called deinstitutionalization that allowed people with mental health disabilities to receive care in community-based centers, rather than forcing them to be locked away or hospitalized in order to receive treatment.

In 1983, the National Institute of Mental Health started the [Child and Adolescent Service System Program \(CASSP\)](#), which provided funds and assistance to states and territories to develop systems of care for children with serious emotional disturbances, which is another term that has in the past been used to describe children with mental health needs. Because these children, like many children with disabilities, are often involved in multiple public systems (such as Education, Foster Care, and Juvenile Justice), it is important that these systems work together effectively to provide services.

In 1992, Congress created the [Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances Program](#), which expanded community-based care for these children and their families. This is the major mental health services program that continues today. Individualized service plans dictate the range of services provided and can include non-mental health services like education, vocational counseling and rehabilitation, protection and advocacy, and cultural and linguistic proficiency.

The [Mental Health Parity Act of 1996](#) requires that the amount of money insurance companies spend on mental health coverage cannot be less than what they spend on medical or surgical procedures for physical health services. The Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) generally prevents group health insurance plans that provide mental health and substance use disorder benefits from setting more limitations on these services than on medical and surgical services. The Affordable Care Act of 2010 (ACA) significantly extended the reach of MHPAEA's requirements. Starting in 2014, the ACA required Qualified Health Plans offered through the health insurance Marketplaces in every state to include coverage for mental health and substance use disorders as one of the 10 categories of Essential Health Benefits, and to comply with the federal mental health parity requirements of the MHPAEA. Learn more.

The [Children's Health Act of 2000](#) provides grants for states to deliver substance abuse (alcohol and drugs) treatment, prevention, and mental health services according to regional and national significance priorities. This Act also created SAMHSA, the federal agency introduced above.

Eligibility

The Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances Program is designed for youth under age 22 and their families.

Under the Children's Health Act, substance abuse treatment, prevention, and support to families and children are included in eligible services. For mental health services, regional and national significance priorities determine eligibility.