pediatricians and physicians as recommended by the American Academy of Pediatrics," they wrote.

Fontanella said she is presently involved in a study that is exploring primary care professionals’ screening practices for suicidality.

**Supports universal screening**

Fontanella said that while the study paper stops short of recommending universal behavioral health screening for youths, she said she is a “big proponent” of that concept.

She said this study was the first to examine service use patterns and clinical profiles of young suicide victims in the Medicaid population. She believes the findings from the group of 16 states are generalizable to Medicaid populations in other states, but it cannot be concluded that they also can be generalized to the privately insured or uninsured population. However, she said, many of this study’s findings resemble those that have been reached in adult suicide studies.

Fontanella and colleagues pointed out that despite strong recommendations from the Joint Commission and other entities for more widespread use of screening for suicide risk in a variety of settings, routine screening has remained the exception and not the rule. They stated that emergency departments and in-patient care settings could produce significant results in identifying at-risk youths.

They cited as an example of a successful initiative the Emergency Department Safety Assessment and Follow-up Evaluation (ED-SAFE), which combines a suicide risk screening with a brief intervention administered during and after the emergency visit. A study of ED-SAFE, published in JAMA Psychiatry in 2017, found that the screening and brief intervention significantly reduced the risk of subsequent suicidal behavior, the researchers reported.

**BRIEFLY NOTED**

**APA calls for telecommunications use to prevent virus spread**

The American Psychological Association (APA) on March 24 called on states and insurers to move quickly to allow people to connect with their mental health providers remotely using telehealth as the need for mental health services rises during the COVID-19 pandemic. “We are asking state policymakers to temporarily suspend state licensing requirements for telepsychological services, which would allow patients greater access to their providers and ensure continuity of care during this crisis,” Arthur C. Evans Jr., Ph.D., APA’s CEO, said in a statement. “The federal government has just identified psychologists as critical, essential workers in the U.S. response to COVID-19. But this does not mean that psychologists and psychology trainees must do work in person,” he said. “Essential psychological services can, and in many cases, should be delivered through telehealth. It is critically important that psychologists are able to meet the needs of their patients and communities during this difficult time, without further increasing the risk of contagion.”

**Senate approves coronavirus relief bill**

The U.S. Senate approved an estimated $2 trillion stimulus package to battle the harmful effects of the COVID-19 pandemic, though concerns with the unemployment provisions remain, according to the National Conference of State Legislature. A few highlights of what’s included in the package:

• Provides an additional $4.3 billion, thorough the Centers for Disease Control and Prevention, to support federal, state and local public health agencies to prevent, prepare for, and respond to the coronavirus.

• Creates a $150 billion Coronavirus Relief Fund for state, local, and tribal governments.

• Provides $30 billion for an Education Stabilization Fund for states, school districts and institutions of higher education for costs related to the coronavirus.

• Provides $45 billion for the Disaster Relief Fund for the immediate needs of state, local, tribal and territorial governments to protect citizens and help them respond and recover from the overwhelming effects of COVID-19.

• Expands unemployment insurance from three to four months, and provides temporary unemployment compensation of $600 per week, which is in addition to and the same time as regular state and federal UI benefits.

• Establishes a $500 billion lending fund for businesses, cities and states.

**CMS approves additional state Medicaid waivers**

The Centers for Medicare & Medicaid Services on March 26 approved an additional 10 state Medicaid waiver requests under Section 1135 of the Social Security Act (Act), bringing the total number of approved Section 1135 waivers for states to 23. The waivers were approved within days of states’ submitting them, and offer states new flexibilities to focus their resources on combating the outbreak and providing the best possible care to Medicaid beneficiaries in their states. The waivers were approved within days of states’ submitting them, and offer states new flexibilities to focus their resources on combating the outbreak and providing the best possible care to Medicaid beneficiaries in their states. These waivers support President Trump’s commitment to a COVID-19 response that is locally executed, state managed and
Continued from previous page

federally supported. In addition, keeping with its commitment to ensure states have the necessary tools to respond to the COVID-19 pandemic, CMS also approved one additional Appendix K Amendments requests to existing Home and Community Based Services (HCBS) waivers under Section 1915 (c) of the Social Security Act (Act), bringing the total to six approved waivers to date. Appendix K is a tool states may use to temporarily modify approved HCBS Waivers during emergency situations.

**STATE NEWS**

**New York MH groups launch campaign to help people stay connected**

The Coalition for Behavioral Health and the New York Association of Psychiatric Rehabilitation Services (NYAPRS) announced last week the launch of a new campaign to help New Yorkers to reach out, connect and comfort one another as New Yorkers work their way through the COVID-19 crisis and social distancing, advocates announced in a news release. The “Strive for Five” campaign aims to educate and encourage New Yorkers to use a variety of strategies, such as phone, text, web, social media, and other applications and Zoom technologies to reach out and offer mental health support to at least five people over the next 30 days. As movement is increasingly restricted, virtual check-ins grow more important each day, advocates stated. “We encourage New Yorkers to connect with people who may be isolated, lonely or live alone, and to reach out to neighbors, friends, families and co-workers. First responders, health care workers and other individuals who are courageously keeping our essential services open also need support now, as do caregivers who are hard at work taking care of others,” said NYAPRS and the coalition.

**Michigan county to continue services during ‘stay home’ order**

Residents of Muskegon County in Michigan will still have access to mental health services to combat the negative effects of social isolation during the three-week mandate, mlive.com reported March 24. HealthWest, a community mental health center in Muskegon, will continue to provide behavioral health and substance use treatment during the stay-at-home order issued March 24 by Gov. Gretchen Whitmer, the center announced in a news release. Whitmer banned all non-essential travel and ordered the closure of most businesses for three weeks to slow the spread of COVID-19 across the state. “Extended isolation puts the individuals we serve at risk, and our staff is here to help make sure those we serve know they are not alone,” HealthWest Executive Director Julia Rupp said in a released statement. "While we may have closed most of our facilities, our staff is still working around the clock to assist those in services," Rupp said. “We want those we serve to have the support they need during this crisis.”

**In case you haven’t heard…**

A World Health Organization (WHO) official says the United States has the potential to become the new epicenter of the COVID-19 crisis as a large acceleration of infections is occurring in the nation, Changing America reported March 24. “We are now seeing a very large acceleration in cases in the U.S. So, it does have that potential,” WHO spokeswoman Margaret Harris told reporters when asked whether the United States could become the new epicenter, according to Reuters. At the time this issue of MHW went to press, the United States had more than 46,500 confirmed cases, with nearly 600 deaths, according to Johns Hopkins University data. New York state on March 23 saw an increase of more than 4,000 confirmed cases since the day before, according to The New York Times. At press time, only China and Italy had recorded more cases than the United States. China had tallied more than 81,000 cases, with more than 3,200 deaths, while Italy had more than 63,900 confirmed cases, with more than 6,000 deaths. Worldwide, more than 395,000 cases have been confirmed, with more than 17,000 deaths.

**Coming up…**

**Mental Health America** has rescheduled its 2020 annual conference, “From Resiliency to Recovery,” from June 11-13 to Sept. 3-5 in Washington, D.C. For more information, visit https://www.mhanational.org/2020/annual-conference.

The **National Alliance on Mental Illness** will host its annual convention, NAMICon 2020 July 15-18 in Atlanta, Georgia. Visit https://www.nami.org/convention for more information.

The **New Jersey Association of Mental Health and Addiction Agencies** has postponed The Information Technology (IT) Conference, “No Fooling — IT is Critical!” originally planned for April 1. It is now scheduled for Oct. 21 in Edison, N.J. Its annual conference, “Reimagining Health Care,” originally scheduled for April 23–24 is now planned for Oct. 29–30 in Iselin, N.J. For more information, visit www.njmhhaa.org/events.