June 14, 2021

The Honorable Roy Cooper  
Governor of North Carolina  
20301 Mail Service Center  
Raleigh, NC 27699-0301

The Honorable Phil Berger  
Senate President Pro Tempore  
NC General Assembly  
16 West Jones St., Rm. 2007  
Raleigh, NC 27601

The Honorable Tim Moore  
Speaker of the House  
NC General Assembly  
16 West Jones St., Rm. 2304  
Raleigh, NC 27601

Governor Cooper, Senator Berger and Speaker Moore,

As North Carolina continues with pandemic recovery, the state now faces a second public health crisis: skyrocketing demand for mental health services in an environment where it can’t meet the escalating needs for treatment. Quite simply, the behavioral health crisis across North Carolina has reached a state of emergency, and we urgently need your leadership and collaboration to address it.

While mental illnesses are highly treatable, North Carolina has fallen short in providing a behavioral health system that is accessible and accountable for its outcomes. For example, a 2021 State of Mental Health in America Report by Mental Health America has ranked North Carolina 44th among states for access to mental health care. The same report ranked North Carolina 45th in the country for youth mental health.

Sadly, what we have today is failing our patients and our communities. The past piecemeal approach to building a behavioral health system is now grossly failing patients at a time when we are in a full-blown state of emergency with climbing suicide rates, emergency rooms filled with children in crisis, and diminishing behavioral health services close to home.

For decades, the criminal justice system and hospital emergency departments have been the default safety net to respond to children and adults struggling to cope with issues like anxiety, depression and suicidal ideation. Despite the state’s recent population growth, North Carolina hospital data underscores continued erosion of community services. As of December 2020, nearly 40% of all ED discharges for children were for behavioral health concerns. Reports also indicate a 91% increase in involuntary commitments in the last decade. This “second pandemic” is also a health equity crisis, with a disproportionate number of uninsured, Medicaid, and people of color relying on emergency rooms for their long-term behavioral health care while also facing barriers preventing them from using telehealth options.

This trend cannot continue. Across the state, healthcare providers, school systems, law enforcement, county governments and other sectors agree that North Carolina’s current approach to providing behavioral health care services is unsustainable. Moreover, building more acute care beds isn’t going to solve the crisis. Given the once-in-a-lifetime federal resources to address health inequities exacerbated by COVID-19, we have an extraordinary opportunity to build the comprehensive treatment system our citizens deserve.

Hoping that this crisis will get better or expecting those who are saddled with the immense responsibility to care for individuals with behavioral health issues to fix the problems, is not a solution.
The people who all of us serve deserve better. We need the State as a convener and committed partner to help create and support the vision, policies and infrastructure for a truly comprehensive and integrated mental health system.

Now is the time for the Executive branch and legislative leaders to come together with the public and private sectors to tackle this emergency head-on. We are calling on you to bring bipartisan leadership and dedicate the needed resources to move from band-aid approaches to true system reform.

We request a meeting of state leaders and our organizations to immediately address this crisis. We look forward to working with you to create a system of care that works for everyone.

Sincerely,

North Carolina Medical Society