PROPOSAL

To address the college student mental health crisis and the expiration of COVID-19 era waivers, we ask Congress to authorize the interstate provision of telehealth services for students enrolled in institutions of higher education in any U.S. jurisdiction from health-care providers who are licensed to practice or provide such care in any one state or territory or through an interstate licensure compact.

FAST FACTS

• The COVID-19 pandemic exacerbated the college student mental health crisis, particularly among disadvantaged groups. In 2022–23, data indicate that 41 percent of college student screened positive for symptoms of depression, a 20 percentage point increase since 2014. Additionally, 36 percent screened positive for anxiety, a 14 percentage point increase since 2014. Notably, these shifts have disproportionately affected students of color and low-income students.

• Waivers enabling medically needed care have expired. During the pandemic, nearly every state instituted emergency waivers to facilitate interstate care. Institutions relied on those waivers to use telehealth to continue to provide needed mental health services to students who were away from campus and unable to access campus counseling services. Unfortunately, these waivers have expired, leaving many college students without access to medically necessary behavioral health care. Telehealth access to campus mental health services remains a critical need for students seeking treatment for depression, anxiety, and other mental health conditions.

• Remove barriers to access medically needed care. Many students encounter disruption in behavioral health treatment when they leave campus during breaks, participate in remote educational programs, or need to find a new behavioral health-care provider due to licensing restrictions preventing clinicians from practicing across state lines. In 2022–23, close to half (49 percent) of students screened positive for symptoms of anxiety or depression; of those students, less than half (46 percent) had received therapy or counseling in the past year. While state-by-state compacts represent a positive development, they do not answer this national need.

• Support student retention. Permitting colleges and universities to provide interstate telemental health services will address a unique challenge faced by students experiencing a behavioral health crisis and may also improve retention and graduation rates among affected students. Importantly, this flexibility will also help ensure continuity of care for students who have established therapeutic relationships with campus mental health providers or with health-care providers in their home state during the course of their education.

• Our request. For all of these reasons, we ask Congress to authorize interstate provision of behavioral telehealth services for students enrolled at institutions of higher education.