

2019 Legislative Action Agenda

Access to Appropriate Services and Medication

- ◆ Ensure prescriber prevails language for Medicaid services in final budget.
- ◆ Continue oversight in monitoring insurance parity violations.
- ◆ Ensure the availability of inpatient hospital beds for those with serious mental illness and crisis beds.
- ◆ **Support Legislation (Bill#TBA)**-Regulating private insurance providers making changes to prescription drug formulary during a contract.
- ◆ **Support Legislation (Bill#TBA)**-Expanding a pharmacy to administer injectable medications.
- ◆ **Support Legislation (Bill#TBA)**- Amending the

Continued Investments in Community Services and the Mental Health Workforce

- ◆ Too many New Yorkers are unable to access appropriate community-based services. New York must invest in the full range of services to meet the needs of those on all points of the spectrum of psychiatric disorders.
- ◆ Continuity of care is vital to recovery and service providers must be able to hire and retain skilled and caring staff.
- ◆ The FY 2019/20 state budget should include the statutory human services COLA that would pay direct care staff.
- ◆ In November, it was announced that NYS's hospitals and nursing homes will receive \$675m for Medicaid rate increases to cover workforce salary and benefits. NAMI-NYS is calling for 25% of the state's share of the investment, roughly \$169m be used to support community-based care.
- ◆ NAMI-NYS is calling for investments in the following programs all of which are necessary for adequate community care: Assertive Community Teams (ACT Teams), Mobile Intervention Teams, Respite Centers, Crisis Centers, Certified Community Behavioral Health Clinics (CCBHCs), Telepsychiatry, First Episode Psychosis Programs, Integrated psychiatric services in the primary care setting and mental health clinics in schools.

Mental Health Housing With Wraparound Support Services

- ◆ Housing programs incorporating recovery support services are crucial to successful recovery from a mental illness within the community setting.
- ◆ Investing in mental health housing saves taxpayers money as programs are 40% - 94% less expensive (depending on housing model) than the alternatives: state psychiatric institutions, other hospitals, ERs, nursing homes, jails and prisons.
- ◆ The state has not kept its promise to fund the system adequately.
- ◆ 25 years of flat-funding have led to housing providers to operate at 43% below where they should be, causing access to be a serious challenge.
- ◆ 40,000 Mental health community-based housing units are in jeopardy due to years of inadequate funding.

Improve the Criminal Justice – Mental Illness Interface

- ◆ More than 60% of those incarcerated have a diagnosable mental illness. We must do better to divert people with mental illness from jails and into treatment and improve interactions between police and people with mental illness.
- ◆ **NAMI-NYS supports the expansion of Crisis Intervention Teams (CIT)** which would save lives, reduce harm, and result in better outcomes for the individuals and the police.
- ◆ **Support the HALT Bill** to reform the use of solitary confinement. Cap the amount of time someone serves in solitary and ensure people with mental illness are not put in solitary.
- ◆ **Enhanced discharge planning** for people living with a mental illness exiting jails and prisons and connecting them to Medicaid and appropriate services. This will help ensure they engage in recovery and prevent recidivism .

Enact Extreme Risk Protection Orders (ERPO)

- ◆ NAMI-NYS supports the enactment of an ERPO law which would remove guns from the homes of people with mental illness during vulnerable times of crisis.

Expand Joseph P. Dwyer Veteran's Mental Health Program

- ◆ Expand NY's innovative veteran's peer support program to more counties.