



# New York State

## 2018 Legislative Action Agenda

### Access to Proper Psychiatric Services and Medications

NAMI-NYS firmly believes in a person centered approach to treating psychiatric disorders. **Integral to the goal of person centered care is the ability of someone living with a mental illness to access the most appropriate treatments to advance their specific recovery.** Though this sounds obvious, too many people are facing a myriad of obstacles to accessing services and medications.

Though medication is not needed for everyone living with a psychiatric disorder, for those who do require medication, it is of the utmost importance that they receive the medication their psychiatric provider determines to be most appropriate for their individual recovery. **Prescriber prevails is especially important in treating psychiatric disorders.** Specific mental illnesses can impact each person differently. Each case must be viewed and handled uniquely with doctor reviewing specific symptoms and other medications that person is taking. This is crucial as antipsychotic and antidepressant medications are not clinically interchangeable and many people with a mental illness also have co-occurring physical ailments and drug-to-drug interactions also must be considered when changing medication for someone with mental illness. **Both private insurance providers and the Medicaid system are threatening “prescriber prevails.”**

NAMI-NYS is very concerned about the practice of drug formulary switching by insurance providers during a contract year. This is not only dangerous but it is deceitful to consumers. **This is why NAMI-NYS supports A.2317A/S.022A-which would regulate drug formulary switching. The Governor’s budget proposes eliminating prescriber prevails from all medication including psychiatric medication. We urge the legislature to reinstate this in the final budget.**

It is also critical that people know what’s in the generic medication they are taking. **This is why NAMI-NYS supports A.236-Which amends the public health law and the education law, in relation to generic drug products.**

Along with medication, the availability of mental health services is also crucial. These services are impossible to deliver without a suitable mental health workforce. NAMI-NYS was enthused to that the Governor’s budget included funding of \$262 million to support the 6.5 percent salary increase provided to OPWDD, OMH and OASAS funded direct care professionals. However we are concerned by the lack of psychiatrists and other lack of mental health professionals around the state. **We encourage the Office of Mental Health to formulate a plan increase the number of psychiatrists, psychiatric nurse practitioners and other clinical mental health professionals.**

Finally, another barrier to accessing services is insurance parity. The recently released *Project Access* report details how people with mental health or chemical dependency issues have trouble finding a provider who takes their insurance. **We urge the New York State Department of Financial Services to launch a thorough investigation of the issue of insurance parity.**