## Glossary of Terms Used in NAMI-NYS Advocacy Communication

**988 Crisis Response System:** In 2020, the Federal Communications Commission and Congress acted to make 988 the nationwide three-digit number for mental health crises and suicide prevention, operating through the existing National Suicide Prevention Lifeline, which has a nationwide network of call centers. By July 2022, all telecommunications companies will be required to route 988 calls to the Lifeline.

States must act rapidly to develop a 988 crisis service infrastructure, including passing legislation to implement fees to fund crisis call centers and response capacity, as well as consider appropriations of general funds to support the crisis system. To do this, NAMI strongly supports the "Model Bill for Core State Behavioral Health Crisis Services Systems," which would enable a state, if the legislation is enacted, to comply with the federal National Suicide Hotline Designation Act of 2020 (S. 2661) and build needed infrastructure to effectively respond to mental health crises.

Model Legislation The model legislation would ensure a range of crisis response: over-the-phone (crisis counseling), onsite (with mobile crisis teams) and in-person (with crisis receiving and stabilization services.

**ACT Teams:** The Assertive Community Treatment (ACT) Program, funded by New York State and Medicaid, provides integrated treatment, rehabilitation, case management and support services to individuals with serious mental illness whose needs have not been well met by traditional mental health services. The multi-disciplinary ACT Teams provide integrated services directly to the individual in the community. The team assists recipients in making progress toward goals and adjusts services over time to meet the individual's needs

Assertive Community Treatment is an evidenced-based practice and services include:

- assertive outreach
- mental health treatment
- vocational support
- integrated dual disorder treatment
- family education
- wellness skills
- community linkages
- peer support

**CARES Funds:** The CARES Act established the \$150 billion Coronavirus Relief Fund. The CARES Act requires that the payments from the Coronavirus Relief Fund only be used to cover expenses that—

- 1. are necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID–19);
- 2. were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the State or government; and

3. were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020.

Certified Community Behavioral Health Clinics (CCBHCs): These providers in Medicaid, are designed to provide a comprehensive range of mental health and substance use disorder services to vulnerable individuals. In return, CCBHCs receive an enhanced Medicaid reimbursement rate based on their anticipated costs of expanding services to meet the needs of these complex populations. CCBHCs are non-profit organizations or units of a local government behavioral health authority. They must directly provide (or contract with partner organizations to provide) nine types of services, with an emphasis on the provision of 24-hour crisis care, evidence-based practices, care coordination with local primary care and hospital partners, and integration with physical health care.

**Crisis Centers:** These centers provide an alternative to hospital emergency rooms which are not designed to appropriately handle psychiatric emergencies. One example of a crisis center is the Dutchess County Stabilization Center.

**Fail First/Step Up:** This is a practice conducted by private insurance providers where they refuse to cover a specific medication a doctor prescribed, instead they cover a different, less-expensive medication, that can be used for the same ailment. Please note, they are not covering the generic version of what was prescribed, but a totally different medication). This practice forces the patient to take the other medication and demonstrate that the medication fails to work for them before they are allowed to step-up to the originally prescribed medicine.

**First Episode Psychosis Programs:** These successful programs provide a wide-range of person centered supports to people following their initial psychotic episode. OnTrackNY is an example of a First Episode Psychosis program which is offered throughout the state.

**Forensic Facilities:** These are hospitals operated by the New York State Office of Mental Health (OMH) serve patients who entered the criminal justice system and provide an alternative to inappropriate and unnecessary incarceration for persons with mental illness.

**Mobile Intervention Teams: Also known as mobile crisis teams** is a group of health professionals, such as nurses, social workers and psychiatrists, who can provide mental health services, primarily in people's homes.

**Person-Centered Care:** In health care, person-centered care is where the patients actively participate in their own medical treatment in close cooperation with the health professionals. In psychiatric care that can also mean tailoring treatments to an individual's specific set of symptoms and not to their diagnosis. In other words; not using the same medication for all people who have a bi-polar diagnosis.

**Prescriber Prevails:** Refers to a provision in New York State Medicaid law that gives doctors the final say in disputes with Medicaid over which medications are prescribed to patients under

the Managed Care Preferred Drug Program (PDP). The law covers only certain classes of medications including: anti-depressants and anti-psychotics

**Respite Centers:** Crisis Respite Center provide an alternative to hospitalization for people experiencing emotional crises. They are warm, safe and supportive home-like places to rest and recover when more support is needed than can be provided at home. The Crisis Respite Centers offer stays for up to one week and provide an open-door setting where people can continue their daily activities. Trained peers and non-peers work with individuals to help them successfully overcome emotional crises. The Crisis Respite Centers offer activities such as:

- 24-hour peer support
- self-advocacy education
- psycho-education
- self-help training
- social support groups
- recreational activities
- linkage to medical and psychiatric providers

**Withholds:** In the context of NAMI-NYS's advocacy, what we are referring to are funds that New York is withholding to their contracted non-profit service providers. Currently these providers are having 20% of the state funding withheld. These are different than a cut, as the hope is that down the road providers will once again receive 100% of their funding. However, if they don't receive the funding the withholds would then be considered a cut. NAMI-NYS is working to restore the funding and prevent cuts to state contracted msental health providers.