



Talking Points for the 2021 NAMI-NYS Legislative Action Agenda

The talking points below are designed to help you communicate the issues contained in NAMI-NYS 2021 Legislative Action Agenda.

While the talking points will help explain our issues to your legislators, your stories and personal connection to these issues are what will leave a lasting impression on your legislator and provide a snap-shot of what is happening in their district. So be sure to include those into your conversations with legislators and their staff.

For instance, if you are discussing the need to increase mental health housing and you or your loved one have benefited from such a program explain how the program helped. We also want to share negative experiences, for instance, if you are talking about housing but have struggled to access a housing program, share that struggle. Remember, people remember stories not facts and figures, so the most effective meetings feature both facts and corroborating stories.

You also don't have to feel pressured to include every point, it is impossible to include everything. Try to include issues you are most comfortable speaking on.

Introduction Remarks:

- Introduce yourself and state which NAMI-NYS affiliate you are with. Explain that NAMI_____ is the local affiliate in the legislator's district of NAMI, the nation's largest grassroots organization dedicated to improving the lives of individuals and families impacted by mental health issues.
- If there are other members of your affiliate present, introduce them as well.
- Explain that you are here today to discuss the 2021 NAMI-NYS Legislative Action Agenda and provide insight on the issues facing their constituents who are seeking mental health support.
- Explain how the events of the past year have made the issues you'll be discussing today more important than ever.
- COVID-19, economic uncertainties and racial injustice have had a corrosive impact on our collective mental health and people are seeking mental health and substance use services in unprecedented levels.
- While there has been a lot of attention on the various waves of the pandemic, it's important to remember there is also a mental health wave that is cresting and crashing down on us.

- NAMI-NYS is worried that the mental health system will not be able to handle the flood of people seeking psychiatric support as mental health services across the state are diminishing.

Restore Funding to Behavioral Health Providers:

- Non-profit mental health and substance use providers who have contracts with the state are now having 20% of their funding withheld. We fear that these withholds will become permanent cuts.
- These vital programs were underfunded to begin with and it's impossible for them to operate on 80% of their budget long-term.
- At a time when mental health support is needed more than ever we want to stop program closures and reductions in service availability.
- To avoid this disastrous outcome, New York State must immediately provide full funding for mental health and substance use care services, and cannot continue withholds and/or cuts to these essential services.
- We are urging the State to release federal CARES funds currently available to New York to support the mental health and substance use care needs of adults, children and families.

Ensure Access to Appropriate Services and Medication:

- Access to mental health services and appropriate medications is more important than ever, as need is at an all-time high.
- This is why NAMI-NYS is advocating to advance Governor Cuomo's effort to expand telehealth services to all New Yorkers. This would have tremendous value and help support recovery of those who currently have very limited access to behavioral health care.
- Along with ensuring behavioral health providers are appropriately funded, there are other steps the Legislature can take to advance person-centered care and expand mental health services.
- There are two important measures the legislature can take to address suicide.
- First is passing Nicole's Law which reforms hospital practice for people who have multiple suicide attempts or drug overdoses.
- Second is creating a 988 crisis response system that adheres to NAMI's *Model Bill for Core State Behavioral Health Crisis Services Systems*. Specific information on this is in the packet provided to legislators.
- Now more than ever it is critical that an individual receives the psychiatric medication their doctor believes would best advance *their* recovery. This is why NAMI-NYS is advocating for prescriber prevails language for Medicaid services to be included in the final budget.
- NAMI-NYS is also advocating for bill **A.11145 (NEED NEW)**, which prohibits insurance providers from using "fail-first" and "step-up" procedures for psychiatric

medication.

- With threats to community mental health clinics looming, we need to ensure that those who normally receive long-acting injectable medications continue to have access to these therapies. This is why the time is now to pass **A.3830/S.4848 (NEED NEW)** which would give privileges to pharmacies to administer injectable psychiatric medications
- NAMI-NYS believes it is crucial to fully utilize the skills of all of those trained to treat people with psychiatric issues. This is why NAMI-NYS is advocating for the passage of **A4383 (NEED NEW)**, which would grant Licensed Mental Health Counselors (LMHCs) and Licensed Counselor (LCs) the ability to diagnose and have their services billable to Medicaid.
- These actions are all the more necessary as COVID-19 has also contributed to a decrease in psychiatric and detox hospital beds as facilities are disproportionately reducing psychiatric and detox beds to meet overhead mandates.
- While we have discussed traditional mental health services in the community and hospital settings, NAMI-NYS is also advocating for the funding of other services which are vital to addressing mental health in New York's communities. These programs are included in the Action Agenda sheet you provided the legislator.

Improve the Criminal Justice – Mental Illness Interface

- While there has been increased attention to the need for police and criminal justice reform, what is not being discussed is that more than 60% of those incarcerated have a diagnosable mental illness, substance-use disorder or developmental disability.
- We must do better to divert people with underlying behavioral health issues from jails and into recovery oriented treatment programs.
- Along with ensuring that there are programs to divert people to, the goal of ensuring diversion also begins with improving the interactions between police and people with mental illness.
- This is why it is critical that New York reinstates the funding for Crisis Intervention Teams (CIT) which trains police and first responders on how to best interact with people with mental health issues and de-escalate situations.
- CIT has a proven track-record of saving lives, reducing harm, and producing better outcomes for the individuals and the police. New York has been a national leader in CIT, however, this critical program was not funded in the last budget and funding needs to be restored.
- NAMI-NYS strongly support the passage of **A.2500/S.1623 (NEED NEW)**, the HALT bill which reforms the use of solitary confinement.
- Solitary confinement has tremendous negative impact on one's psyche. The HALT bill would cap the amount of time someone serves in solitary and ensure s people with mental illness are not put in solitary.
- Once someone with a mental illness exits a correctional setting we want to give them

the tools to stay out and recover in the community. This is why we support enhanced discharge planning for people living with a mental illness which would educate them about how to utilize Medicaid and connect them to appropriate services in the community. This will help ensure they engage in recovery and prevent recidivism.

- NAMI-NYS wants policies put in place that would improve communication between families and staff at correctional and forensic facilities.

Address Suicide and Drug Overdoses by Passing Nicole's Law:

- The negative events of the past year have also contributed to a dramatic rise in suicidal thinking as well as self-medicating through substance use. A recent report from the Centers for Disease Control details how during the pandemic, 25% of young adults have considered suicide or developed a suicide plan. 10.7% of the overall population has considered suicide and 30.9% of those reported having started or increased substance use to cope with stress or emotions related to COVID-19.
- As we mentioned earlier, this rise in suicidality and substance use has been coupled with a decrease in psychiatric and detox hospital beds.
- This is why we need to hold hospitals accountable for providing specialized care and appropriate discharge practices for those who have entered the hospital via a self-inflicted, life-threatening injury (such as a suicide attempt or an overdose).
- During the last session, NAMI-NYS helped introduce Nicole's Law (A.9535/S.6629) which reforms hospital procedures involving the most vulnerable patients who have multiple episodes of self-inflicted life-threatening injuries.
- Nicole's Law would create a red flag practice for vulnerable patients who need more specialized, intensive and potentially life-saving supports.
- Nicole's Law demonstrates the value of family insights by ensuring that in these cases all attempts would be made to talk to families and receive their insights on the person's mental health history and their views on what did not work in previous treatment settings
- Nicole's Law would also require enhanced and timely discharge planning, including providing families and caretakers with resources on how to care for and monitor someone with a tendency towards self-inflicted life-threatening injuries. They would also be connected to a community-based service provider, receive priority to access services and receive a case-worker to monitor the progress for a specified time-period.

