

2021 Legislative Action Agenda

No Recovery Without Mental Health

NYS Must Address Mental Health in Order to Move Forward

Restore Funding to Behavioral Health Providers

At a time when New Yorkers are seeking behavioral health services at an all-time high rate we need to ensure we have the services to meet this increasing demand. The 20% withhold to community providers have already had a devastating impact on the ability to deliver these critical life-saving services. We must avoid a 5% cut to the behavioral health sector.

- ◆ To avert program closures, access and reductions in service availability, the State must immediately provide full funding for mental health services and restore the 5% across the board (ATB) cut imposed on providers in the SFY 2021-22 Executive Budget.
- ◆ We must ensure that we are maximizing every dollar that is supporting the system. The SFY 2022 Executive Budget proposes the \$22 million in savings due to closures but prevents the re-investment of any savings into behavioral health community-based services. Behavioral Health advocates urge the Legislature to seek inclusion of any savings toward reinvestment in behavioral health community-based services and oppose the language to “freeze” the Community Reinvestment Act.
- ◆ NAMI-NYS supports minimum wage increase for the behavioral health workforce.

Ensure Access to Appropriate Services and Medication

Access to mental health services and appropriate medications is more important than ever. As the demand for mental health services is at an all-time high, we must be able to meet the demand, this is why NAMI-NYS is advocating to advance Governor Cuomo’s effort to expand telehealth services. We must also fully utilize our mental health responders by allowing Licensed Mental Health Counselors (LMHCs) to diagnose and have their services reimbursed by Medicaid. Address suicide by passing Nicole’s Law and creating a 988 system which meets NAMI recommendations.

- ◆ Advance Governor Cuomo’s efforts to expand telehealth services to all New Yorkers.
- ◆ Ensure prescriber prevails language for Medicaid services in final budget.
- ◆ **Support A.9535/S.6629 (NEED NEW) Nicole’s Law:** Which addresses suicide by reforming hospital practices.
- ◆ **Support A4383 (NEED NEW)** Which would grant LMHCs and LCs the ability to diagnose.
- ◆ **Support A.3830/S.4848 (NEED NEW)** Allowing pharmacies to administer injectable medications.
- ◆ **Support A.11145 (NEED NEW)** Which prohibits insurance providers from using “fail-first” and “step-up” procedures for psychiatric medication.
- ◆ Create a 988 System that adheres to NAMI’s *Model Bill for Core State Behavioral Health Crisis Services Systems*.
- ◆ Continue to fund the Joseph P. Dwyer Veteran Peer-to-Peer program and expand it to more counties.
- ◆ NAMI-NYS is calling for investments in the following programs all of which are necessary for adequate community care: Housing, Assertive Community Treatment Teams (ACT Teams), Mobile Intervention Teams, Respite Centers, Crisis Cen-

Improve the Criminal Justice – Mental Illness Interface

There has been increased attention for police and criminal justice reform, what is not being discussed is that 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 as well as improve interactions between police and people with mental illness.

- ◆ **Reinstate the funding for the Institute for Police, Mental Health and Community Collaboration** to implement Crisis Intervention Teams (CIT) across the state. There is \$400k from the SFY 2019-20 that still have not been allocated to the institute and the SFY 2020-21 had no funding for the institute. We must refund this critical program.
- ◆ **Support A.2277/S.2836 the HALT bill** which caps the amount of time someone serves in solitary. and ensure people with mental illness and other at risk populations are not placed in solitary.