



2018 Legislative Priorities

NAMI Tennessee is an affiliate of the National Alliance on Mental Illness, a grassroots organization dedicated to providing support, education, and advocacy so that all affected by mental illness can build better lives. NAMI Tennessee has 20 local affiliates across the state.

Ensure Mental Health Parity in Tennessee

As a result of recent federal health care reform legislation, today nearly all insured Americans are entitled to receive their mental health and substance use benefits at the same level as their benefits for other medical care. Enforcing the requirements of federal parity law and regulations, however, has not been consistent and many continue to encounter significant barriers in accessing mental health and addiction treatment and support. States play a critical role in enforcing and monitoring compliance with federal parity laws.

To help achieve true parity in mental health and substance use care in Tennessee, **SUPPORT SB 1884** (Sen. Richard Briggs (R), Senate District 7) / **HB 0479** (Rep. Gerald McCormick (R), House District 26), which gives the Tennessee Department of Commerce and Insurance oversight to measure and hold insurance companies accountable for parity.

Expand Supported Employment Programs, Oppose TennCare Work Requirements

Medicaid work requirements would likely limit behavioral health care access without boosting employment. Recently, the Trump administration announced that it would begin allowing states to require most Medicaid enrollees to work. New guidance from the Centers for Medicare & Medicaid Services outlining the parameters for such work requirements for non-disabled Medicaid enrollees emphasizes the goal of self-sufficiency and economic mobility.

NAMI Tennessee supports the recovery goal of employment and recognizes that people with mental illness are disproportionately unemployed. Medicaid employment services and initiatives like Tennessee's Employment First have been successful at getting people with disabilities, including mental illness, into the workforce because they provide additional tailored services that address the unique barriers they face. Work requirements, in contrast, are a punitive condition on eligibility that does not accommodate the needs of individual Medicaid beneficiaries, with and without mental illness, and provide few if any additional services or resources to create new job opportunities or employment supports. Instead, work requirements increase state administrative costs and complexity.

OPPOSE HB1551 (Speaker Beth Harwell (R), House District 56) / **SB 1728** (Sen. Mike Bell (R), Senate District 9) **AND HB 2124** (Rep. Ryan Williams (R), House District 42) / **SB 2464** (Sen. Kerry Roberts, Senate District 25), two sets of bills proposing work requirements for TennCare. Rather than spending public resources on enforcing mandatory work requirements, NAMI urges the state to continue to invest in robust, evidence-based supported employment programs that many people with mental illness need to get and keep competitive employment.

Restore Funding for Peer Support

NAMI Tennessee participates in the TDMHSAS Policy and Planning process and provides input for the department that includes the family member and mental health consumer perspective. We strongly support peer support services at our hospitals. We are concerned that funding for continuation of support services at the four Regional Mental Health Institutes has been removed from the budget submitted by the department. In addition, we support the department's budget as submitted. **SUPPORT the restoration of funding for peers support services at the RMHIs.**

Support Serious Mental Illness Death Penalty Exclusion

SUPPORT SB 378 (Sen. Richard Briggs (R), Senate District 7) / **HB 345** (Rep. Andrew Farmer (R), House District 17) that excludes people with severe mental illness from the death penalty.

End Unnecessary Incarceration of Individuals with Mental Illness

Disproportionate numbers of people with mental illness are in our criminal and juvenile justice systems, often as a result of untreated or under-treated illness. As a result, jails and juvenile justice facilities have become the de facto mental health institutions of our day.

NAMI Tennessee **THANKS** the Governor for including additional funding for pre-arrest diversion and correctional reform as well as enhancements to crisis service for adults and adolescents