



# The Cutting Edge

MENTAL HEALTH ASSOCIATION IN NJ

GOVERNMENT AFFAIRS UPDATE

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## Special Edition: News Briefs and Progress

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### New Jersey's FY 2014 Budget

Governor Chris Christie signed S-3000/A-4200, the FY 2014 State Budget Bill into law. A few highlights are:

**Cost of Living Adjustment (COLA):** A one-time increase of \$13.2 million (0.5% one-time increase) for all community care providers which will begin on January 1, 2014.

**Reinvestment into the Community:** \$4.4 million from the closure of Hagedorn Psychiatric Hospital will be reinvested into services from the Division of Mental Health and Addiction Services, including 130 supportive housing slots.

**Olmstead Funding:** \$8.4 million for the Olmstead settlement will fund 344 new community placements for individuals being discharged from state psychiatric hospitals.

### Introduction

Key strategic mental health advocacy issues have recently made headway in New Jersey and nationally. This report is a brief update on the Mental Health Association in New Jersey's (MHANJ's) recent government affairs activities, actions to date and progress that we anticipate.

### Pejorative Language

The MHANJ has always been in a leadership role in fighting mental health stigma in the state. To combat prejudice against persons living with mental illness, a pillar of stigma fighting is to address language which can create negative attitudes and stigmatizing behaviors. New Jersey's statutes contain language which is archaic, has out-of-date references and uses demeaning and disrespectful terms when referring to persons with psychiatric, cognitive or developmental disabilities.

Based on a New Jersey Law Revision Commission Report, which continues and furthers the purpose and intent of P.L. 2010, c. 50., demeaning terms that appear in over 20 titles of our statutes are recommended for replacement. Examples include: Mentally Incapacitated instead of Lunatic; Psychiatric Facility or Hospital instead of Insane Asylum; and Incapacitated instead of Incompetent.

S2224/A3357 changes pejorative terminology referring to mental capacity of individuals. The MHANJ and its community partners consulted with the Law Revision Commission as this bill was designed and developed. We, along with Disability

## About the MHANJ's Government Affairs Department

A leader in advocacy and government affairs, our work focuses on mental health preservation and promotion, with an emphasis on integrating mental health into health care reform and lessening the impact of stigma. We take an active role in supporting the investment in community mental health resources in New Jersey, reducing dependence on large, outdated psychiatric institutions, establishing services to address complex mental health issues and assisting under-served populations. [Click here for more information.](#)

Rights New Jersey, were in a leadership position working with Legislative sponsors, Senator Weinberg and Assemblywoman Huttler, in moving the bill forward. The MHANJ, the New Jersey Mental Health Coalition and other community members were strong advocates in supporting the bill. We believe that correcting pejorative language is an important step towards reducing stigma.

This bill passed through both the New Jersey Senate and Assembly with UNANIMOUS positive votes in both houses. It is currently on Governor Christie's desk awaiting his signature.

### Parity for Behavioral Health

The MHANJ supports parity for all NJ citizens. The MHANJ participated in a town hall meeting at Stockton University with Patrick Kennedy to urge parity for all with full implementation of the Federal parity law.

We are working with our national organization, Mental Health America, to track the progress of the federal parity implementation and to advocate for the completion of the regulations, which still have not been published to date.

In New Jersey, state workers have been withheld from parity through a waiver which denies them certain benefits. The MHANJ supports A1665/S1253 which would impact the State Health Benefits Plan and the School Employees Health Benefit Plan (SHBP/SEHBP). SHBP/SEHBP grants cover over 800,000 people who currently lack coverage for the treatment of some mental illness such as PTSD (post-traumatic stress disorder), depression, ADHD (attention deficit hyperactivity disorder), eating disorders and others. These issues are quite serious: eating disorders may be deadly and PTSD may have a pronounced impact on first responders and other public workers involved with tragedies similar to the Newtown, CT shootings.

Since many good mental health facilities are out-of-network, people with serious mental health crises that require immediate institutionalization often must go to an out-of-network facility. This may result in a premature discharge, since out-of-network inpatient is reimbursed at only 50% and limited to 50 days a year.

Establishing mental health parity for the state plans would eliminate the likelihood of a successful challenge under state and federal law to the current discriminatory treatment of mental illnesses.

The bill has strong bipartisan support as well as support from a broad coalition of mental health advocates, those concerned with eating disorders and first responders.

\$3.7 million is the annual estimated cost of implementation for parity for state workers, as determined by the Office of Legislative Services on the basis of information from the Department of Treasury.

This bill has passed through both the Assembly and the Senate and is currently awaiting the Governor's signature.

## **Gun Control Bills**

Several gun control bills moved through the New Jersey Senate and Assembly in response to the Sandy Hook tragedy. While most were focused on the technical management of gun permits, purchase and seizure of weapons, some targeted and stigmatized the mental health population.

The MHANJ worked with community partners to educate sponsors, legislators and policymakers on alternative approaches/language to achieving safety goals and reducing the stigma of seeking mental health treatment.

These bills, (A3717/S2492) and (S2723/A4182), have passed through both the Assembly and the Senate and are on Governor Christie's desk.