

## **2016 – 2017 LEGISLATION SUPPORTED BY NAMI NEW JERSEY**

[A4498/S2919](#) This bill requires New Jersey regulated insurers to provide coverage, for medically necessary behavioral health care services and to meet the requirements of the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008. The act prevents certain health insurers that provide mental health or substance use disorder benefits from imposing less favorable benefit limitations on those benefits than on medical or surgical benefits, commonly referred to as mental health parity. The bill also requires carriers to submit an annual report to the Department of Banking and Insurance.

[A4362/S307](#) This bill requires the New Jersey Department of Military and Veterans Affairs to collaborate with the United States Department of Veterans Affairs to establish a Statewide Veterans Diversion Program to divert eligible service members who have committed certain offenses away from the criminal justice system and into appropriate case management and mental health services.

[S157/A1120](#) This bill would establish a temporary task force, to be known as the “New Jersey Task Force on Abuse Against the Elderly and Disabled.” The task force would be required to: (1) evaluate current policies that are designed to protect older adults and persons with disabilities from instances of abuse, neglect, and financial exploitation; (2) identify any existing circumstances that allow for the inadequate protection of older adults and persons with disabilities against instances of abuse, neglect, and financial exploitation; and (3) develop recommendations for legislation, policies, and strategies that would provide a more effective and efficient means by which to protect older adults and persons with disabilities from instances of abuse, neglect, and financial exploitation.

[S916/1459](#) This bill, which would be known as “The Child and Family Suicide Prevention Act,” would require that licensed physicians, physician assistants, and advance practice nurses who regularly provide pediatric care in the specialties of pediatrics, family medicine, or general internal medicine to 30 percent or more of patients that are children and adolescents complete training related to screening for suicide prevention.

[A909/S692](#) This bill establishes the Behavioral Health Insurance Claims Advocacy Program within the Department of Banking and Insurance. The bill creates the program to advocate for people with behavioral health problems in helping them to navigate the health insurance bureaucracy.

[S2838/A4424](#) This bill would amend the law that governs involuntary commitment procedures. Specifically, the bill would allow psychiatric advanced practice nurses – i.e., those advanced practice nurses who are certified in mental health, and who have a formal written affiliation with a screening service – to execute the screening and clinical certificates that are to be completed as a part of the involuntary commitment process, both in cases where a patient is referred for treatment through a screening service, and in cases where a patient is not referred through a screening service.

[S1730A3303](#) Increases Medicaid reimbursement rates for certain evidence-based behavioral health services; designated as the Mental Health Access Act.

[S51/A547](#) This Bill restricts use of isolated confinement in correctional facilities. An inmate who is a member of a vulnerable population including a mental illness shall not be placed in isolated confinement. An inmate shall not be placed in isolated confinement before receiving a personal and comprehensive medical and mental health examination conducted by a clinician. A clinician shall evaluate each inmate placed in isolated confinement on a daily basis.

[S2521/A4146](#) This Bill provides for monitoring and evaluation of transition of mental health and substance use disorder treatment service system to fee-for-service reimbursement model by an Independent Fee-for-Service Transition Oversight Board. The Board would include one person upon the recommendation of the New Jersey chapter of the National Association on Mental Illness (NAMI).

[A2938/S2615](#) This Bill requires seizure of fire arms when a mental health Professional determines patient poses threat of harm to self or others. Specifically, the bill requires licensed medical professionals in this State, including psychologists, psychiatrists, medical doctors, nurses, clinical social workers, and marriage counselors, to report to the Attorney General when, in their reasonable professional judgment, a patient they are treating is likely to engage in conduct that would result in serious harm to that patient or others. The Attorney General would receive the patient's name and other non-clinical identifying information to be used solely for the purpose of determining whether the patient has been issued a firearms purchaser identification card, permit to purchase a handgun, or any other permit or license authorizing possession of a firearm. If the patient has been issued a card or permit, the Attorney General is required to arrange for any firearm possessed by the patient to be seized pending a hearing.

[S51/A574](#) This legislation restricts the use of solitary confinement in correctional facilities in New Jersey. Inmates may not be placed in isolated confinement for non-disciplinary reasons. Inmates are required to receive a personal and comprehensive medical and mental health examination, conducted by a clinician, before being placed in isolated confinement. An inmate determined to be a member of a vulnerable population shall be immediately removed from isolated confinement to an appropriate placement.

[S945](#) This bill allows monies in the "New Jersey Affordable Housing Trust Fund," and monies in municipal affordable housing trust funds to be used for the creation of community residences for the developmentally disabled, community residences for the mentally ill, and community residences for persons with head injuries. The bill also requires each bedroom within a community residence to count as two units of credit against a municipality's fair share obligation.

[S384](#) This bill requires the Commissioner of Corrections to ensure that all medications prescribed for inmates prior to incarceration for treatment of chronic conditions are continued while they are incarcerated in a State correctional facility. The amended bill places similar requirements on county correctional facilities.

[S1634/A3991](#) Requires housing authority to advertise when applications are being accepted for housing assistance waiting lists online. Passed in Senate.

[SJR71/AJR91](#) Designates June 27 of each year as "Post-Traumatic Stress Disorder Awareness Day."

[A3634](#) Requires one member of board in charge of institution for persons with mental illness or developmental disability to be family member of resident.

[A2189 AcaAa \(2R\)](#) Concerns standard for involuntary commitment to outpatient treatment.\* 2nd Reading in the Assembly. As amended by the committee, this bill establishes a standard for involuntary commitment to outpatient treatment separate from inpatient treatment. It includes a requirement that adults with mental illness need outpatient care in the community because their mental illness, as demonstrated by recent acts, could, if untreated, deteriorate to the point of dangerousness to themselves, others or property, and they are unlikely to voluntarily accept treatment after it has been offered.

[S3163/A4468](#) Concerns early intervention services expand to all counties.

[A4498/S2919](#) Expands health coverage for behavioral health. Enhances enforcement and oversight.