

PUBLIC POLICY PLATFORM

of the National Alliance on Mental Illness (NAMI)





NAMI PUBLIC POLICY PLATFORM

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Purpose

NAMI, the National Alliance on Mental Illness, is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for effective prevention and early intervention, diagnosis, treatment, support, research, and recovery supports that improve the lives of all people affected by mental illness. NAMI advocates for all people and families affected by mental illness.

The purpose of the NAMI Public Policy Platform is to provide NAMI Board-approved direction and guidance on public policy issues affecting people with mental illness to the NAMI Alliance and to inform policymakers and the general public.

Language Used in the Public Policy Platform

Throughout this document, we use a variety of terms, including "serious mental illness," "mental illness," and "mental health condition." Our language always respects the integrity and the individuality of the people affected by mental illnesses. All NAMI documents use language that puts people first. For example, NAMI uses "people with serious mental illness" instead of "mentally ill people" or "the mentally ill" and "people living with schizophrenia" instead of "schizophrenics."

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NAMI Public Policy Positions Overview

NAMI's public policy positions are a statement about where we, as an Alliance, stand on issues impacting people with mental illness and their families.

This document includes NAMI Board-approved public policy positions. Each position is made up of two sentences – the first sentence is a "belief" statement that shares a broad value for NAMI not specific to a single public policy issue. The second sentence is specifically related to NAMI's support or opposition of a given public policy topic.

Each public policy position is embedded in a longer document with additional background information that can be found on NAMI's website and linked throughout this document. NAMI's public policy positions are organized into the following four categories:

- Improving Health
- Responding to Crises
- Stopping Harmful Practices
- Supporting Community Inclusion and Non-Discrimination

Improving Health

Affordable Care Act Coverage

 ACA Coverage Expansions & Consumer Protections: NAMI believes that all people with mental health conditions deserve accessible, affordable, and comprehensive health care. NAMI opposes public policies and laws that undermine or eliminate coverage expansions or consumer protections established by the Patient Protection and Affordable Care Act (ACA).

Care in Custody

- Medicaid Coverage for People Who Are Incarcerated: NAMI believes that all people with mental health conditions who are incarcerated deserve access to quality mental health treatment. NAMI supports the continuation of Medicaid coverage for people with mental health conditions who are justice-involved and calls for the repeal of the Medicaid Inmate Exclusion Policy.
- Mental Health Treatment While Incarcerated: NAMI believes that all people with mental health conditions who are incarcerated deserve access to quality mental health treatment. NAMI supports public policies and laws that expand and improve access to mental health care within prison and jail settings.

Certified Community Behavioral Health Clinic (CCBHC) Programs

 <u>Certified Community Behavioral Health Clinics</u>: NAMI believes that all people with mental health conditions deserve accessible, affordable, and comprehensive health care. NAMI supports the Certified Community Behavioral Health Clinic (CCBHC) program to expand access to health care, including mental health and substance use disorder care, in community-based settings across the country.

Commercial Health Insurance

• Short-Term Limited Duration (STLD) Health Plans: NAMI believes that all people with mental health conditions deserve accessible, affordable, and comprehensive health care. NAMI supports laws and policies that limit the sale of short-term limited duration health plans.

Commercial Health Insurance, Continued

Surprise Medical Bills: NAMI believes that all people with mental health conditions
deserve accessible, affordable, and comprehensive health care. NAMI supports laws
and policies to protect people against surprise medical bills received for out-of-network
care.

Early or First Episode Psychosis

Coverage of Coordinated Specialty Care (CSC) for Early or First-Episode Psychosis: All people
with mental health conditions deserve accessible, affordable, and comprehensive health care.
NAMI supports public policies and laws that require coverage of coordinated specialty care
across all forms of health insurance for people experiencing early or first episode psychosis
(FEP).

Early Intervention

Mental Health in Schools: NAMI believes that public policies and practices should promote
greater awareness and early identification of mental health conditions. NAMI supports public
policies and laws that enable all schools, public and private, to increase access to appropriate
mental health services.

Involving Courts in Treatment

- Involuntary Civil Commitment: NAMI believes that all people should have the right to make their own decisions about mental health treatment. However, in rare instances where voluntary engagement is not possible, NAMI supports involuntary civil commitment only when used as a last resort and only when it is believed to be in the best interests of the individual.
- Problem-Solving Courts/Specialty Courts: NAMI believes in minimizing justice-system
 response to people with mental illness, while ensuring that any interactions preserve
 health, well-being and dignity. NAMI supports the use of problem-solving courts as part
 of a broad strategy to reduce incarceration and promote diversion from further
 involvement in the criminal justice system for people with mental illness.

Medicaid

 Medicaid Block Grants and Per Capita Caps: NAMI believes that health insurance should provide comprehensive mental health and substance use disorder coverage without arbitrary limits on treatment. NAMI opposes block grants or per-capita caps in Medicaid, which impose financing limits that jeopardize coverage and services for individuals with mental health conditions.

Medicaid, Continued

- Medicaid: Work Reporting Requirements: NAMI believes that public policies and practices should promote access to care for people with mental health conditions. NAMI opposes efforts to take Medicaid coverage away from people who don't meet a work reporting requirement.
- Medicaid: IMD Exclusion: NAMI believes that health insurance should provide comprehensive
 mental health and substance use disorder coverage without arbitrary limits on treatment. NAMI
 opposes Medicaid's discriminatory prohibition on paying for mental health treatment delivered
 in certain inpatient settings, known as "institutions of mental disease" (IMDs).
- Medicaid Expansion: NAMI believes that all people with mental health conditions deserve
 accessible, affordable, and comprehensive health care. NAMI supports state efforts to expand
 Medicaid, as indicated in the Affordable Care Act (ACA), to provide important mental health
 services and supports to more low-income adults.
- Medicaid Coverage for Maternal Mental Health: NAMI believes that all people with mental health conditions deserve accessible, affordable, and comprehensive health care. NAMI supports public policies and laws that extend Medicaid coverage for at least 12 months postpartum.

Medicare

- Medicare: 190 Day Limit: NAMI believes that health insurance should provide comprehensive
 mental health and substance use disorder coverage without arbitrary limits on treatment. NAMI
 supports repeal of Medicare's discriminatory 190-day lifetime limit on inpatient psychiatric
 hospital care.
- Medicare: Medication Access, "Six Protected Classes": NAMI believes that all people with mental health conditions deserve access to effective medication and treatment options. NAMI supports Medicare's "six protected classes" policy to ensure access to a broad range of antipsychotic and antidepressant medications.

Medications

- Marijuana/Cannabis Research: NAMI believes that public policies should be guided by credible, evidence-based research. NAMI supports public policies and laws that facilitate research into the risks and benefits that marijuana and other cannabis products have on people with mental health conditions.
- Research on Schedule I Drugs: NAMI believes that public policies should be guided by credible, evidence-based research. NAMI supports public policies and laws that facilitate research into the benefits and risks that Schedule I drugs have for people with mental health conditions.

Medications, Continued

- Medications: Therapeutic Substitution: NAMI believes that all people with mental health
 conditions deserve access to effective medication and treatment options. NAMI supports
 public policies and laws that prohibit therapeutic substitution of psychiatric medications.
- Medications: Step Therapy: NAMI believes that all people with mental health conditions deserve access to effective medication and treatment options. NAMI supports public policies and laws that prohibit step therapy for psychiatric medications.

Mental Health Days

Mental Health Days: School Absence Policies: NAMI believes that all people with mental health
conditions deserve access to supports that promote wellness. NAMI supports public policies
and laws that recognize mental health as an acceptable reason for absence from school.

Parity

 Mental Health Parity: NAMI believes that health insurance should provide comprehensive mental health and substance use disorder coverage without arbitrary limits on treatment. NAMI supports establishment and enforcement of laws and policies that ensure parity between mental health and physical health services in all forms of insurance coverage.

Physical & Mental Health

• <u>Physical & Mental Health Integration</u>: NAMI believes that all people with mental health conditions deserve accessible, affordable, and comprehensive health care. NAMI supports coordinated care models that integrate physical and mental health services.

Telehealth Practices

 <u>Telehealth</u>: NAMI believes that public policies and practices should promote access to care for people with mental health conditions. NAMI supports laws and policies that expand the use of telehealth practices to support a wide range of effective and accessible mental health care services.

Workforce

- Medical Professionals: Licensure Application Questions on Mental Health: NAMI believes that
 all people with mental health conditions deserve access to supports that promote wellness.
 NAMI supports limiting medical license application questions about mental health to only
 those necessary and relevant to assess an individual's current ability to practice medicine
 safely and competently. NAMI further supports and encourages the use of language in the
 licensure application process that is supportive of seeking mental health treatment.
- Scholarship and Loan Repayment Programs: NAMI believes that the mental health and substance use workforce must be sufficient in supply, diversity and training to meet the cultural and linguistic needs of people seeking mental health care. NAMI supports public policies and laws that create, expand and sustain loan repayment programs and scholarships for mental health professionals.
- Workforce: Peer Support Workers: NAMI believes that the mental health and substance use
 workforce must be sufficient in supply, diversity and training to meet the cultural and linguistic
 needs of people seeking mental health care. NAMI supports public policies and laws that build,
 promote, expand, and sustain the role of peer support workers throughout the mental health
 and substance use workforce.

Responding to Crises

Crisis Response

 <u>Crisis Response for Mental Health</u>: NAMI believes that public policies and practices should promote access to care for people with mental health conditions. NAMI supports the development and expansion of mental health crisis response systems in every community.

Extreme Risk Protection Orders

 Extreme Risk Protection/Red Flag Laws: NAMI believes that public policies should be guided by credible, evidence-based research. NAMI supports Extreme Risk Protection Orders (ERPOs) that focus on specific, current behaviors and evidence-based risk factors for violence. NAMI opposes any ERPO laws that target, single out, or discriminate against people with mental health conditions.

988 Suicide and Crisis Lifeline

- Georouting Contacts to the 988 Suicide & Crisis Lifeline: NAMI believes people in mental health
 crisis deserve a mental health response. NAMI supports public policies and laws that ensure
 help seekers contacting the 988 Suicide and Crisis Lifeline are immediately connected to the
 nearest crisis call center, referred to as georouting, while protecting privacy and confidentiality.
- National Hotline for Mental Health Crises and Suicide Prevention: NAMI believes that public
 policies and practices should promote access to care for people with mental health conditions.
 NAMI supports a nation-wide toll-free hotline that can adequately respond to people
 experiencing mental health crises.

Psychiatric Advance Directives

• <u>Psychiatric Advance Directives (PAD)</u>: NAMI believes that all people with mental health conditions deserve access to supports that promote wellness. NAMI supports public policies and laws that encourage the development and use of psychiatric advance directives (PAD).

Stopping Harmful Practices

Conversion Therapy

• Conversion Therapy: NAMI believes that no one should be subject to practices that can cause or worsen mental health symptoms. NAMI supports public policies and laws to ban the discredited, discriminatory, and harmful practice of conversion therapy.

Criminalization

• <u>Criminalization of People with Mental Illness</u>: NAMI believes in minimizing justice system response to people with mental illness, while ensuring that any interactions preserve health, well-being and dignity. NAMI opposes laws and public policies that perpetuate the criminalization of people with mental illness.

Death Penalty

 <u>Death Penalty</u>: NAMI believes that all people should be treated with respect and dignity and experience equitable outcomes. NAMI opposes the death penalty for people with serious mental illness.

Gun Violence

- Gun Violence Research: NAMI believes that public policy should be guided by credible, evidence-based research. NAMI supports funding for research to understand the causes and effects of gun violence in the U.S., including self-directed violence, and opposes restrictions on gun violence research.
- Gun Violence: Safe Storage: NAMI believes that gun violence is a public health crisis that
 endangers the life, safety and mental health of people throughout the U.S. NAMI supports laws
 and public policies that promote the safe storage of firearms to prevent unwanted use and selfharm.
- <u>Gun Violence: Purchase Waiting Periods</u>: NAMI believes that gun violence is a public health crisis that endangers the life, safety and mental health of people throughout the U.S. NAMI supports public policies and laws that create waiting periods for purchasing firearms to reduce impulsive acts of gun violence and self-harm.

Gender Affirming Care

<u>Limits on Gender Affirming Care</u>: NAMI believes that no one should be subject to
practices that can cause or worsen mental health symptoms. NAMI opposes public
policies and laws that ban, limit or criminalize access to clinically appropriate genderaffirming care.

Police

• <u>Police Use of Force</u>: NAMI believes in minimizing justice-system response to people with mental illness, while ensuring that any interactions preserve health, well-being and dignity. NAMI supports policies that reduce and prevent use of force by law enforcement during interactions with people with mental illness.

Restraints and Seclusion

• Restraints and Seclusion: Schools: NAMI believes that no one should be subject to practices that can cause or worsen mental health symptoms. NAMI supports the elimination of restraints and seclusion in schools.

Social Media

Social Media Use and Impact on Mental Health: NAMI believes that no one should be subject to
practices that can cause or worsen mental health symptoms, and that public policies to
protect individuals should be guided by credible, evidence-based research. NAMI supports
public policies that facilitate research into the risks and benefits of social media use and
policies that mitigate the risk of social media use on mental health, with a focus on youth and
young adults.

Solitary Confinement

• <u>Solitary Confinement</u>: NAMI believes that no one should be subject to practices that can cause or worsen mental health symptoms. NAMI opposes the use of solitary confinement and equivalent forms of administrative segregation for people with mental health conditions.

Supporting Community Inclusion and Non-Discrimination

Competency Restoration

• <u>Community-Based Competency Restoration</u>: NAMI believes in minimizing justice system response to people with mental illness, while ensuring that any interactions preserve health, well-being and dignity. NAMI supports public policies and laws that expand and promote the use of community-based competency restoration services.

Mental Health Inequities

- <u>LGBTQI Bigotry and Discrimination</u>: NAMI believes that all people should be treated with respect and dignity and experience equitable outcomes. NAMI supports public policies and laws that work to eliminate mental health inequities perpetuated by bigotry and discrimination against LGBTQI populations.
- Racism and Racial Discrimination: NAMI believes that all people should be treated with respect and dignity and experience equitable outcomes. NAMI supports public policies and laws that work to eliminate mental health inequities perpetuated by racism and racial discrimination.

Re-entry

• Re-entry Post Incarceration: NAMI believes that all people with mental health conditions deserve access to supports that promote wellness. NAMI supports comprehensive reentry policies and programs for people with mental illness who are returning to their community after a period of incarceration.

Social Determinants of Health

- Medicaid: Non-Emergency Medical Transportation: NAMI believes that public policies and practices should promote access to care for people with mental health conditions. NAMI opposes efforts to limit or eliminate non-emergency medical transportation (NEMT) in Medicaid, a critical benefit for people with mental health conditions.
- Housing: NAMI believes that all people with mental health conditions deserve access to supports that promote wellness. NAMI supports public policies and laws that help address social determinants of health, including ensuring stable, safe, affordable, and supportive housing options for people with mental health conditions.

Social Determinants of Health, Continued

- Food Security: NAMI believes that all people with mental health conditions deserve access to supports that promote wellness. NAMI supports public policies and laws that help address social determinants of health, including increasing food security for individuals with mental health conditions.
- <u>Employment</u>: NAMI believes that all people with mental health conditions deserve access to supports that promote wellness. NAMI supports public policies and laws that help address social determinants of health, including supporting employment for individuals with mental health conditions.

Social Security

Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI): NAMI
believes that all people with mental health conditions deserve access to supports that promote
wellness. NAMI supports public policies and laws that reduce barriers to, and ensure continuity
of, Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) for
people with severe mental health conditions.

The full text of NAMI's policy positions can be found at nami.org/advocacy/policy-priorities.