

Fund Supportive Housing & Community Services!



KEEP THE PROMISE

June
2010

Legislative Update 2010, by Cheri Bragg, Coordinator

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The Connecticut Legislature approved a \$19 billion budget for FY 2011 on May 5th, 2010, the last day of the legislative session. Spending increased slightly by about 1 percent, taxes were not raised, but there were millions of dollars in cuts, many impacting human services. Mental health advocates saw several major victories including: no Medicaid co-pays; no prescription co-pay increases for people on Medicare and Medicaid (stayed at \$15/month cap); the protection for people who are stable on psychiatric medications was maintained; 50 new rental assistance vouchers were funded for Supportive Housing for people with psychiatric disabilities who are frequent users of expensive state services. In addition, there were no across-the-board funding cuts to nonprofit providers.



(Photo by Cheri Bragg)

Some of the negative cuts include: eliminating Medicaid coverage for most over the counter drugs, restrictions on Medicaid coverage for eyeglasses, and increased premiums for HUSKY B recipients. There are also over \$200 million in unspecified cuts that could potentially impact critical programs and services.

Legislation that passed included the Medical Inefficiency Committee's alternative definition of medical necessity agreed upon by the committee and DSS and supported by advocates; SB 246 (part of this bill requires DMHAS Commissioner to adopt regulations for certifying new intermediate care psychiatric beds in private hospitals); SB 402 (adds DMHAS to CT's Behavioral Health Partnership); and SB 281 (requires the state's Pharmaceutical and Therapeutics Committee to ensure opportunity for public input). SB 424 (Agency Consolidation bill) and SB 140 (addresses plans for youth transitioning from DCF to DMHAS) both died. KTP would like to extend a heartfelt THANK YOU to everyone who volunteered their time to contact legislators, gave testimony, came to public hearings, got their message in the media, or held local legislative events in their communities. Your incredible dedication and advocacy efforts made a real difference this session: give yourselves a hand!

"In the know..."

Next KTP Monthly Meetings:

07/21/10 and 08/18/10
10am-12 pm
at CVH
Page Hall in Room 217

Sign up to receive KTP email alerts:

keepthepromise@namict.org
or call 1-800-215-3021 or 860-882-0236

Check out our

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 ★ KTP gratefully acknowledges the generous support of the Melville Charitable Trust. ★
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CANDIDATE FORUM TIME!

It's Election time! This is your chance to educate candidates!

They must understand that Connecticut can spend money smarter through supportive housing and community mental health services for adults and children.



June through October is a perfect time to hold a candidate forum in your area. Keep the Promise is offering incentive grants to groups that hold a candidate forum for the first time or have previously held forums and mentor another group planning an event.

If you are not already registered to vote, be sure to visit your local city/town hall by noon the day before the Primary election on Tuesday August 10th or by October 26, 2010 for the Tuesday, November 2nd election. Your vote counts!

Contact Cheri Bragg, Coordinator, for grant forms, booklets, and information and advice for educating candidates. Call 1-800-215-3021 or 860-882-0236 or email Cheri at keepthepromise@namict.org today to get started!

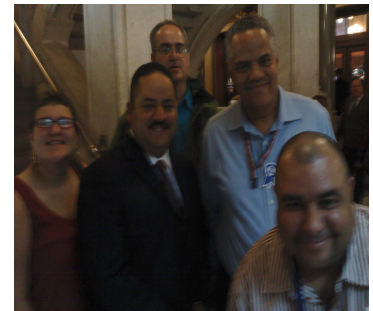
Clubhouses & Social Clubs visit Legislators

Thanks to all members and clubhouses/social clubs who made the trip to Hartford to visit their Senators and Representative during the last two weeks of the session in April.

Bridge House members were treated to an impromptu tour of the House Chambers by Bridgeport Representative Andres Ayala, while others sent notes to their Senators and Reps educating them on mental health issues.

All your advocacy efforts helped to get the message across to legislators which in turn made for a surprisingly successful year!

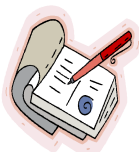
Kudos to: Bridge House, Capitol Region, Chrysalis Center, Common Ground, Gilead Community Services, Independence Center, Second Wind, Valley Social Club, MANA (Manchester), Barbara Albert, George Robert Eason, Kelly Phenix, Lyne Stokes and young adult group from Advocacy Unlimited.



St. Rep Andres Ayala with Bridge House Members



Capitol Region, Chrysalis, AU, & Cheri Bragg in the House Gallery!



MARK YOUR CALENDARS!

Be sure to save the dates for the upcoming trainings, **Essentials of Legislative Advocacy** on October 28, and November 4, 2010 and **Legislative Leadership** on December 2 and 9, 2010.

The date for our annual Awards Ceremony in September is to be determined.

Farewell to Kate Kelly



Our good friend and partner is leaving Connecticut soon. We would like to take this opportunity to thank Kate Kelly, Manager of the Reaching Home Campaign, for her many years of support of Keep the Promise Coalition. Her updates on Supportive Housing at our KTP monthly meetings as well as her involvement, and valuable input in trainings, rallies, and forums, have helped to educate and guide us to advocate for Supportive Housing in Connecticut more effectively.

We wish her the very best as she begins an exciting new adventure! We will miss you, Kate!

Federal Health Care Reform and Mental Health

By Alicia Woodsby

On March 23, 2010, new federal health care reform legislation was passed that requires all Americans to have health insurance by 2014. There are several provisions in the new legislation that will greatly benefit people with serious mental illnesses and their families. First, the legislation requires the inclusion and equitable coverage of mental health and substance abuse benefits. This means that all health plans offered through the health insurance exchanges will be required to BOTH offer coverage of mental illness and substance abuse treatment AND do so in compliance with the federal mental health parity law!*

The legislation also includes an end to denying coverage based on pre-existing conditions. Starting September 2010, health insurers cannot deny children health insurance because of an existing illness or condition. The law will apply to adults starting in 2014. In the meantime, a temporary high-risk pool must be established to cover adults with pre-existing conditions until 2014.

There are a number of additional insurance market reforms in the legislation, including restrictions that greatly limit the use of health status in determining premium rates, and prohibit insurance companies from dropping someone when they become sick. Effective September 2010, the cut-off age for young adults to stay on their parent's health insurance coverage will be increased to age 26.

The bill includes support for comparative effectiveness research by establishing a nonprofit Patient Centered Outcomes Research Institute to identify research priorities and to develop standards to "assist patients, clinicians, purchasers, and policy-makers in making informed health decisions by advancing the quality and relevance of evidence concerning the manner in which diseases, disorders, and other health conditions can effectively and appropriately be prevented, diagnosed, treated, monitored, and managed."**

There are also several improvements to Medicare and Medicaid and incentives for states to invest in community based services and supports.

The new law expands Medicaid coverage to all individuals under age 65 with incomes up to 133% of the federal poverty level starting in 2014. This will finally provide relief for many people who are stuck in the Medicaid Spend Down program and find themselves in and out of coverage.

There will be an incremental elimination of the "donut hole" for people on Medicare Part D, which will fill this gap in prescription drug coverage by 50% in 2011 and fully eliminate it by 2014.

There will be a one-time check in 2010 for those that reach the donut hole in 2010 and are not eligible for low-income assistance, and a 50% discount for brand-name and some generics beginning in 2011 and additional savings until the coverage gap is closed by 2020.

There will be increases in funding for Community Health Centers to nearly double the number of patients seen over next 5 years, and free preventive care under Medicare starting in 2011.

The legislation extends Money Follows the Person, which is a federal demonstration project that supports individuals in transitioning from a nursing facility to the community. It also provides states with opportunities and incentives under Medicaid to cover community-based personal care assistants and other services for people with disabilities who would otherwise require institutional care, to increase Medicaid spending on community-based long-term care services, and to expand Medicaid coverage of preventative services. These opportunities will likely require advocacy at the state-level to pursue their implementation.

For further information, please contact Alicia Woodsby at NAMI-CT at 800-215-3021 or publicpolicy@namict.org.

*Provisions in the Senate Passed Health Reform Legislation (HR 3590) for Americans Living with Serious Mental Illness and their Families, NAMI, 2010

**Summary of Patient-Centered Outcomes Research Provisions Prepared by AAMC Government Relations, March 2010

Alicia Woodsby is Public Policy Director for NAMI-CT and KTP Co-Chair



Keep the Promise
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KTP Monthly Meeting:

07/21/10, 08/18/10
10am-12pm

CVH, Page Hall, Room 217

Call or Email to RSVP
—lunch included—

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The Keep the Promise Coalition is dedicated to advocating for the “Blue Ribbon Solutions” needed to maintain and expand critical mental health services for adults and children. We hope you will join us in building the bridge to support, respect and recovery. Together we can create change!

Coordinator’s Corner by Cheri Bragg

In the May 13, 2010 message from the Office of the Commissioner of the Department of Mental Health and Addiction Services, Doreen DeBianco, Legislative Program Manager, praised the legislative efforts this session of advocates from CCAR (Connecticut Community for Addiction Recovery) and Keep the Promise stating that “Once again, those powerful stories of recovery saved the day.” Concise, but meaningful dialogue with legislators, whether through testimony, phone calls, emails, letters, in the media or at events, supported by personal experience, is the most effective way of bringing attention to an issue. In addition, when a person shares their story of recovery in this way, they are also challenging the discriminating ideas some people have about people with mental illness simply by engaging in meaningful dialogue. Coalition members advocated brilliantly this session to prevent many harmful cuts...but we must keep an eye to the future.

When one legislative session ends, the KTP Steering Committee starts gearing up for the next legislative session by beginning the legislative priority planning process. In addition, we are encouraging Coalition members to hold Candidate Forums in their communities. This year’s November election is an important one—we will vote for a new Governor as well as our State Senators and State Representatives. KTP can support your efforts with fact sheets, KTP ribbons, tip sheets, candidate contact information, non-profit rules and assistance with planning and implementation. Coalition members are also encouraged to attend local Candidate Forums where the KTP voice can be heard and opportunities to have mental health issues taken seriously are critical. Elected candidates will make decisions that directly impact community mental health services and supports. Your advocacy efforts can help to ensure that your legislators make informed decisions next session.



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