Talking Points on NAMI Iowa’s 2021 Legislative Priorities

(1) Establish an adequate and sustainable source of funding for the regional mental health system for adults and children.

- The Legislature has passed substantial mental health policy legislation (complex needs and children’s system) over the past three years, putting in place 27 new requirements for the MHDS Regions to implement.
- The 14 Regions are funded by the mental health property tax levy, which is frozen at 1996 spending levels. It is unsustainable. Many regions are projecting deficits for the next fiscal year, which starts July 1. Many regions will not be able to fund core services and have indicated they will not be able to meet the requirements in state law.
- The governor has proposed directing $15 million in state funding during each of the next two fiscal years to the Regions for mental health programs and services. We applaud the governor for putting forward this proposal and urge the Legislature to act, targeting funding for implementation of the new required complex needs and children’s services. Ask your legislators to support state funding for mental health services in the next budget.

(2) Expand the use of telehealth by making permanent the payment parity and structural changes enacted in 2020 in response to the pandemic.

- A significant expansion of telehealth during the pandemic has allowed tens of thousands of Iowans to maintain treatment, especially in rural areas of the state with a critical lack of mental health clinicians.
- HF 294, which passed the Iowa House on March 8 overwhelmingly (only one no vote), requires that behavioral health virtual visits be reimbursed at the same rate as in-person visits, known as payment parity.
- Both Medicare and Medicaid are paying 100 percent the same for telehealth as in-office visits and plan to continue to do so. Why shouldn’t private insurance companies do the same?
- Because in Iowa the MHDS Regions are responsible for paying for core mental health services when no one else will, if private insurance won’t pay, the Regions will, meaning it will be paid from property taxes.
- NAMI Iowa’s goal is for all Iowans to receive the help they need, when they need it. This bill will help make that happen.
- Contact your senator, especially if they are a member of the Senate Human Resources Committee, and ask them to pass HF 294 out of committee before the next funnel deadline on April 2nd.
(3) Protect Medicaid programs and funding.

- Medicaid funds nearly 3/4 of all adult mental health services. It is a lifeline for many Iowans with serious mental illness. Therefore, we oppose any new requirements for recipients that could pose barriers to coverage. Those barriers include “real time” eligibility reporting, such as SF 389.
- While we certainly support efforts to curb fraud and abuse, tests in other states show an extremely low rate (.1%) that is not worth the effort and expense required. The Department of Human Services is opposed to this requirement, saying it is duplicative and unnecessary.
- The consequence (intended or not) is that many people will lose health care coverage, often resulting in their inability to work at all.
- SF 389 passed the Senate on February 23rd by a vote of 30-18 and has been referred to the House Human Resources Committee. Tell your member of the House and the chair of that committee, Rep. Ann Meyer, this is an unnecessary bill that is potentially harmful to Iowa Medicaid recipients with serious mental illness.

(4) Support Continuity of Care/Non-medical Switching

- Non-medical switching occurs when patients are stable on a therapy, and the health plan makes coverage changes that force patients off their current therapies for reasons other than the patient’s medical needs – typically saving money for the health plan.
- Patients with chronic and complex diseases (including mental illness) are most affected by non-medical switching because they rely upon a stable medication regimen.
- We support HF 656 which passed out of Human Resources unanimously. We know this bill will pass by a wide margin, but we need it scheduled and brought up for debate. It then needs to pass the Senate Human Resources Committee before the next funnel, which is April 2nd.