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New York State Joint Legislative Budget Hearing on Mental Hygiene

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Good morning, members of the committee. Thank you for the opportunity to provide testimony on the Fiscal Year 2027 Mental Hygiene Budget. My name is Nathan McLaughlin, and I am the Executive Director of NAMI New York State. NAMI New York State is the New York State chapter of the National Alliance on Mental Illness (NAMI), the nation's largest grassroots organization dedicated to improving the lives of individuals and families impacted by mental illness. NAMI NYS envisions a world where all people affected by mental illness live healthy, fulfilling lives, supported by a community that cares.

NAMI NYS applauds Governor Hochul for both focusing on the need to care for youth New Yorker living with serious mental illness and including a number of mental health priorities in the Executive Budget. NAMI NYS is pleased to see Governor Hochul's continued prioritization of mental health in the State of the State. Including support for first responders, gambling prevention, street outreach, workforce development education support, supportive housing, and youth mental health. Youth Mental Health and Family Supports continue to be one of NAMI's 5 top priority areas. This includes proposals for youth clubhouses, youth mental health first aid, and expanding online and AI protections for youth.

We commend efforts to improve access to care for individuals with co-occurring mental health and substance use disorders through streamlined licensure. Allowing clinics to provide both mental health and substance use services under a single license is an important step toward reducing barriers for individuals and families navigating care. Too often, families are forced to navigate two separate systems for their loved ones. A single license will reduce administrative burdens on the state by eliminating duplicative licensing, while also easing the burden on providers—making them more likely to pursue dual certification. As a result, individuals with co-occurring conditions will have more treatment options, providers will be able to treat both conditions, and overall access to care will increase for all New Yorkers.

At the same time, NAMI NYS acknowledges that there are several critical priorities not included. Including the Medicaid Managed Care exemptions for behavioral health providers. Mental Health Parity continues to be a point of Advocacy for NAMI members, and unfortunately the same issue come to light in Medicaid Managed Care. Whether it is ghost networks, claw backs, prior authorization requirements, or medical necessity determinations - New York State cannot afford health insurance to act as middlemen earn hundreds of millions of tax dollars while New Yorkers in need don't get the care they deserve. Timely access to substance use disorder and mental health care is essential to improve outcomes. No matter the insurance plan, people should have access to care. Especially when the payer source is Medicaid. We would ask that you consider including the carve out and more mental health parity enforcement in this years budget.

Unfortunately, affordability of mental health services expands beyond the parity and Medicaid sphere. New York States outdated Temporary Disability Insurance programs has left many with little to cover basic needs in the event they need time off to take care of their mental health. While paid family leave is up to \$1,200 a week- TDI is only up to \$170 a week. If an individual were to attend an inpatient 30 Substance Use Program, or inpatient mental health stay, they would have \$680 dollars to cover a month of bills. Upon their return, many workplaces are not able to accommodate their recovery or have policies that make continuing in treatment difficult. The

Recovery Ready Workplaces Act would incentivize workplaces to create workplaces to creating a culture of recovery-supportive workplaces that actively develops resources for employees struggling with behavioral health. Unfortunately, a TDI increase and the Recovery Ready Workplace Act was not included in the budget.

The executive budget also did not include criminal justice reforms that address the issue of behavioral health and criminal justice involvement. NAMI supports multiple reforms that address sentencing like the Second Look Act, Forensic Rehabilitation Act, Earned Time act, and especially the expansion of treatment courts as proposed in the Treatment Court Expansion Act. New York's treatment courts operate under a patchwork system of ad hoc mental health courts and limited drug courts. These courts are widely underutilized and in desperate need of streamlining and modernization. Jails and prisons have increasingly become our state's de facto psychiatric institutions. We have seen first-hand the impact treatment courts can have. Across New York, participants are not only achieving sobriety, but also reconnecting with family, entering the workforce, and mentoring others in recovery. Judges there often remark that people leave the program with stronger support systems than they have ever had before. These are not isolated stories — they show what's possible when treatment, not punishment, is prioritized.

We would highlight the continued need to focus on veterans mental health. Recent federal action by the Veterans Administration and the Department of Government Efficiency has eliminated the veterans crisis line and programs that address veterans suicide prevention. We support bills that raise awareness of the issue, as well as ask that the state make a continued investment in Dwyer program funding to offset this loss.

While NAMI NYS is encouraged by the Governor's inclusion of a 1.7% cost of living increase for those in the behavioral health and disability field, we also know that these programs can only be successful if they are operated by a caring, knowledgeable and sustained workforce. Which is why we would urge the legislature to increase that to at least 2.7%, to invest in loan forgiveness programs, and paid field placements that are essential to more low income individuals entering the field. In previous years, NAMI NYS advocated for 7.8% increase to community based mental health providers. This number was reached with consideration for the rate of inflation matched with the duration that many behavioral health professionals had not gotten any cost of living adjustment. Social work and mental health counseling remain one of the lowest paid masters level professions, incurring debt for roles that are increasingly not meeting their basic needs. This is why we ask all elected officials 'to care for those, who care for us' and to invest in the mental health workforce who are vital to all of the initiatives discussed here today.

Thank you for your willingness to hear from NAMI NYS. We welcome any questions at this hearing or through the budget process.

NAMI-NYS is the state organization of the National Alliance on Mental Illness, the nation's largest grassroots organization supporting people with mental illness and their families. Founded in 1979, NAMI has affiliates in every state and in more than 1,100 local communities across the country. NAMI-NYS provides free education, support, advocacy and public awareness through more than 26 affiliates statewide. NAMI-NYS envisions a world where all people affected by mental illness live healthy, fulfilling lives supported by a community that cares.