NEW YORK STATE ASSEMBLY

Committee On Mental Health

III HIIII

Carl E. Heastie • Speaker Aileen M. Gunther • Chair



ANNUALREPORT

THE ASSEMBLY STATE OF NEW YORK ALBANY

CHAIR Mental Health CHAIR Women's Health COMMITTEE MEMBER Agriculture Environmental Conservation Health Racing and Wagering

December 15, 2022

Honorable Carl E. Heastie Speaker of the Assembly Legislative Office Building, Room 932 Albany, New York 12248

Dear Mr. Speaker:

It is my duty and privilege to submit to you the 2022 Annual Report for the Assembly Standing Committee on Mental Health. As you know, for over two years the COVID-19 pandemic has affected every facet of our lives. So many New Yorkers have lost jobs, been forced to isolate, mourned the loss of loved ones, and adapt to a new a "normal." All these factors have had a devastating effect on individuals' mental health.

As we recover from the COVID Pandemic, we must look forward to the future and the critical issues our behavioral health care system will need to address. It has been well documented that over 40% of New Yorker's mental health will be impacted because of the pandemic, including over double the number of youths who are experiencing anxiety and depression. To realize a full recovery, New York must transform its mental health system and provide sufficient capacity for prevention and treatment services to meet the needs of all New Yorkers. However, this cannot be accomplished without assuring equity, promoting integrated care, and funding programs which ensure New York State residents are able receive services on-demand without delay or disruption and are accessible to our most vulnerable populations. It is also imperative that we continue to support critical programs such as supportive housing, employment and education, intensive rehabilitation, crisis and recovery services, peer and family advocacy supports, and address our workforce needs in the mental health service system. While the Committee is cognizant of the many fiscal priorities across the State, we cannot allow services to be diminished at a time of such great need. The Committee will continue to engage with the mental health service community and will strongly advocate to ensure that sufficient resources are allocated to the Office of Mental Health so that programs are funded properly, so that individuals receive quality care, and services are readily available.

In closing, I would like to thank you for your leadership and support of the Assembly Standing Committee on Mental Health, and I look forward to a productive 2023 Legislative Session.

Queen M. Gun Her)

Aileen M. Gunther Chair Assembly Standing Committee on Mental Health

2022 ANNUAL REPORT OF THE NEW YORK STATE ASSEMBLY STANDING COMMITTEE ON MENTAL HEALTH

Aileen M. Gunther Chair

Committee Members

Majority

Minority

Didi Barrett Nathalia Fernandez Mathlyde Frontus Chantel Jackson Sarah Clark Manny De Los Santos Edward Gibbs Anna R. Kelles Angelo Santabarbara Jarett Gandolfo Ari Brown Mary Beth Walsh

Committee Staff

Thomas Gatto, Legislative Director and Committee Clerk

Program and Counsel Staff

Jennifer Sacco, Assistant Secretary for Program and Policy Janice Nieves, Assistant Secretary for Program and Policy Willie Sanchez, Principal Analyst Gabriella Cavanagh, Associate Counsel Sarah Conklin, Secretary

TABLE OF CONTENTS

I.	INTRODUCTION	4
II.	STATE BUDGET HIGHLIGHTS	5
III.	SIGNIFICANT LEGISLATION 2022	7
IV.	HEARINGS & ROUNDTABLES	9
APPE	NDIX A: 2022 Summary of Bill Actions	
APPE	NDIX B: Final Action on All Bills Reported by the Committee	
APPE	NDIX C: Laws Enacted in 2022	15
APPE	NDIX D: Legislation Vetoed in 2022	16

•

I. INTRODUCTION

The Assembly Standing Committee on Mental Health has jurisdiction over policy and initiatives affecting programs that deliver services, care, treatment, and advocacy for individuals with various disabilities. The Committee focuses on ensuring that individuals with a mental illness or a developmental disability are provided appropriate and necessary services to live a fulfilling life and are protected from abuse or harm in institutional and community settings.

The Committee has oversight of programs administered and licensed by the Office of Mental Health, the Office for People with Developmental Disabilities, the Justice Center for the Protection of People with Special Needs (Justice Center), and the Inter-Office Coordinating Council (IOCC).

The agencies are expected to serve nearly one million individuals in 2022, including persons with mental illness, individuals with developmental disabilities, and their families. The Committee also works closely with the New York State Assembly Standing Committee on Alcoholism and Drug Abuse, the Assembly Standing Committee on Veterans Affairs, the Assembly Standing Committee on Correction, and the Assembly Standing Committee on People with Disabilities.

During the 2022 session, the Committee reviewed bills and addressed many issues aimed at providing quality services, enhancing protections, and increasing access to services for individuals with various disabilities.

This report describes the Committee's major legislative activities during the 2022 session.

II. STATE BUDGET HIGHLIGHTS

Over the past several years, the mental hygiene service system has experienced sweeping changes to funding structures of programs under the auspices of the Office of Mental Health (OMH). The State Fiscal Year (SFY) 2022-23 Enacted Budget provides critical resources for individuals with mental illness, and their families. The Enacted Budget provides an increase of \$693.4 million in funding for OMH over the Enacted Budget for 2021-22.

Within OMH the following proposals and appropriations were enacted in the 2022-23 Budget:

A. Cost of Living Adjustment (COLA)

The Legislature provides a 5.4 percent cost of living adjustment (COLA) for human service providers, and authorizes the COLA starting April 1, 2022, through March 31, 2023. The total state share cost for SFY 2022-23 is \$379.7 million for all Mental Health agencies, with \$103.2 million for OMH not-for profit providers.

B. Mental Health and Healthcare Workforce Bonuses

The Legislature provides an additional \$3.9 million in funding to support frontline and direct care and clinical workers employed by the state and community-based organizations.

C. 988 Suicide Prevention and Behavioral Health Crisis Hotline

The Enacted Budget includes \$35 million in funding to support the implementation of the 988 Crisis Hotline. Funding will support technology, equipment, training, expanding crisis service capacity, and other additional administrative costs to operate crisis call centers throughout the state.

D. Recruitment of Mental Health Practitioners

The Legislature includes \$9 million in funding to support the recruitment and retention of psychiatrists and psychiatric nurse practitioners in mental health programs. This includes psychiatric inpatient units in general hospitals, comprehensive psychiatric emergency programs (CPEPs), crisis residential and outpatient programs.

E. Veterans Mental Health Services

The Enacted Budget provides \$7.7 million for the statewide expansion of the Joseph P. Dwyer Peer-to-peer Veteran's Support Program. This funding supports the counties included in the 2021-22 enacted budget and an additional 28 counties.

It also includes continues funding of \$1 million to support the CARES UP Initiative (Changing the Conversation, Awareness, Resilience, Empower Peers, Skills Building and Suicide Prevention for Uniformed Personnel).

• Funding will support resiliency trainings, media awareness campaigns, wellness programing and suicide prevention for veterans, firefighters, law enforcement, emergency medical service members (EMS) and correction officers.

F. Expansion of Mental Health and Substance Use Treatment Services

The Enacted Budget includes \$10 million in capital funding for municipal and non-profit organizations to support increased capacity and expansion of mental health and substance use treatment services.

G. State Operated Residential Facilities

The Legislature provides \$10.2 million in funding to create 100 residential beds in state-operated facilities.

H. Supported Housing Resources

The Enacted Budget provides \$15 million in FMAP (Federal Medical Assistance Percentage) funding to preserve access to existing supported housing and single residence occupancy (CR-SRO and SP-SRO) programs. The funding is sourced from federally approved reimbursement for services related to OMH Supported Housing.

It also includes \$65 million in funding to support current community-based supportive housing programs to assist providers with housing costs.

I. Behavioral Health Ombudsman Program

The Enacted Budget continues \$1.5 million to maintain the operation of an independent behavioral health ombudsman program. The program educates individuals, families, and health care providers on their legal rights to coverage, helps them to access treatment and services and will investigate and resolve complaints regarding denial of health insurance coverage.

• The Behavioral Health Compliance Fund will provide up to \$5 million to support the Substance Use and Mental Health Ombudsman Program, for total funding of \$6.5 million. The additional funding will be a result of penalties collected by the Behavioral Health Compliance Fund from insurers who violate Federal and State behavioral health parity laws.

III. SIGNIFICANT LEGISLATION

1. Identify Statewide Service Needs for Individuals with Autism *A.8690 (Cruz)/S.7815(Parker)*

Chapter 20

This law requires the Autism Advisory Board to meet quarterly to provide its findings and recommendations regarding the autism mapping study in the Board's annual report to the Legislature no later than October first.

2. Enhance Transparency and Access to Records A.8710 (Gunther)/S.7847 (Mannion)

A.8/10 (Gunther)/S./84/ (Mannion) Chapter 28

This law establishes time frames and notification requirements regarding access to records by NYS's Protection and Advocacy System.

3. Foster Positive Outcomes for Individuals Experiencing a Behavioral Health Crisis A.7686 (Frontus)/S.7144 (Sanders) Chapter 185

This law requires the OMH and the Office for Addiction Supports and Services (OASAS) to provide crisis intervention team training, mental health first aid, implicit bias training and naloxone training to firefighters and emergency medical services personnel who are within the catchment area of a crisis stabilization center.

4. Provide Alternatives to Guardianship for Individuals with a Disability

A.8586-B (Simon)/S.7107-B (Mannion) Chapter 351

This law establishes the Supported Decision-Making process to promote autonomy and self-determination for individuals with disabilities.

5. Reduce Stigma of Mental Health and Substance Use Treatment for Veterans *A.10140 (Lunsford)/S.9408 (Parker) Chapter 363*

This law requires OMH, OASAS, and the Division of Veteran Affairs to create a public education initiative designed to eliminate stigma and misinformation about mental illness and substance use among military service members.

6. Eliminate Barriers for Achieve a Better Life Experience (ABLE) accounts A.7652 (Gunther)/S.9335 (Brouk) Chapter 478

This law eliminates the residency requirement for an individual to have an ABLE savings account established in New York state.

7. Ensure Quality Services within the Behavioral Health System of Care

A.9730 (Gunther)/S.8219-A (Harckham) Chapter 522

This law requires the Behavioral Health Ombudsman Program to submit an annual report no later than October 31 to the Legislature and the Executive. The report must include a summary of the work done by the program, and any systemic issues that had been identified by the Ombudsman.

8. Reduce Mental Health Stigma

A.9950 (Gunther)/S.9507 (Brouk) Chapter 524

This law directs the commissioner of OMH to publish information on the agency website regarding the mental illness anti-stigma distinctive license plate program.

9. Reduce Administrative Barriers to Quality Care

A.2060-A (Barrett)/S.3410 (Brouk) Passed the Assembly

This bill would allow a mandated reporter to refrain from filing an incident report when the reporter has actual knowledge that the reportable incident has already been reported to the register; and that they have been named as a person with knowledge of the incident in such prior report.

10. Create Mental Health Parity with Physical Health

A.5238 (Barrett)/S.3995 (Reichlin-Melnick) Passed the Assembly

This bill would amend the New York State Constitution to make the protection and promotion of mental health a matter of public concern.

11. Improve Mental Health Supportive Housing Services for Elderly Residents

A.10139 (Gunther)/S.9041 (Brouk) Veto 65

This bill would establish a temporary commission within OMH to evaluate and provide recommendations to improve services for elderly residents of mental health supportive housing programs.

IV. HEARINGS & ROUNDTABLES

A. MENTAL HEALTH NEEDS FOR HIGHER LEARNING STUDENTS

On November 30, 2022, the Assembly Standing Committee on Mental Health and the Assembly Standing Committee on Higher Education convened a joint hearing on mental health needs of students at institutions of higher education. The purpose of the hearing was to provide the Committees an opportunity to examine the scope of students' mental health needs and the steps campuses are taking to address those needs, including the challenges associated with meeting the demand for mental health services.

The committees received testimony from the New York State Office of Mental Health, representatives of the state and city university of New York, advocacy organizations for students and staff of institutions of higher learning, and stakeholders from the mental health community.

The Commissioner of the Office of Mental Health acknowledged the impact of the COVID-19 pandemic on many of the students across New York State who are currently enrolled in college. She has also cited the Healthy Minds Study which focused on trends in college mental health. The study concluded that in addition to the recognized negative impacts of COVID-19 on the mental health risks of college students, there also exists an inequity in treatment access for diverse racial and ethnic groups and there has been limited progress and in some cases, an increase in those inequalities has occurred. In addition, the Commissioner provided additional information from a survey conducted by the National Alliance on Mental Illness (NAMI). The survey indicated that 64% of the students who drop out of college do so because of mental health problems and 50% of those students did not go on to access mental health treatment.

The Commissioner observed that colleges are beginning to focus more on mental health wellness. She stated that implementing prevention and wellness strategies into orientation activities is a good way to address the transition for individuals entering college. Another important component mentioned by the Commissioner was training for faculty and staff and although it varies from campus to campus, OMH is encouraged by the concerted effort by higher learning institutions to increase the mental health literacy on campus and among university personnel. She also stated that it is crucial to involve parents and families through educational activities and students, including those with lived experience, in their mental health and wellness programs.

Lastly, the Commissioner suggested that colleges and universities need to develop relationships with community-based providers who can provide more comprehensive mental health services if it is deemed necessary. She also stated that to successfully expand and develop new services, promote mental wellness, and address mental health needs on college campuses, it will require a robust workforce that is representative of the population being served and trained in culturally appropriate approaches. Some examples of the agencies recent efforts include a collaboration between OMH, SUNY and CUNY to provide a pipeline program. This program is designed to encourage racially, ethnically, multilingual students to enter mental health specific degree programs. It also provides students with direct financial assistance to help support their degree completion. In addition, OMH has partnered with schools through the School of Social Work Deans' Consortium Project. The primary goal of the Consortium is to prepare masters level social work students to enter the mental health service system.

Nearly every witness who testified agreed that the need for mental health services for college students is on the rise and there is a need for additional mental health staff. Representatives from CUNY and SUNY mentioned the developmental programs using federal and state funding. For example, on CUNY campuses, Tele-counseling has helped to improve attendance at appointments for students requesting counseling and allows for the flexibility of hours requested by CUNY students. Other initiatives include a crisis text line and online resources for students and faculty related to education about mental health signs and symptoms, referral to community resources, and an online program called Togetherall which enables students to engage with their peers in a clinically moderated interactive platform, utilize self-support resources, and engage with clinicians in emergencies. On SUNY campuses, they also have expanded their telehealth network, created a mental health repository which allows students and faculty to identify resources available on-campus, through the county, as well as statewide and nationwide. Another program being used on many of the SUNY campuses is ThrivingCampus. This is a program that allows students to connect with off-campus mental health practitioners to tend to their mental health and wellbeing. Lastly, SUNY, in partnership with the state Office of Mental Health, established crisis prevention training through Question, Persuade, and Refer (OPR). Over 6,000 members of the SUNY community have undergone the online training since 2019, which teaches them how to recognize someone who may be in emotional distress or is having suicidal thoughts, and how to appropriately engage and connect that person to resources that can help.

Witnesses that testified on behalf of the students of CUNY and SUNY emphasized the need for additional mental health services, including expanding the telehealth network to make it more accessible to students. They also stated that the COVID-19 pandemic, the transition from online to in person classes, and food and financial insecurities are significant stressors to the mental well being of students.

Testimony provided from witnesses representing mental health organizations encouraged lawmakers to consider the mental health and wellness of the whole college, including faculty, staff, and students. To support this recommendation, they reported that more than half of college faculty report signs of professional burnout with 40% considering leaving their current jobs because of COVID changes. In response to the issues on college campuses the witnesses provided the following recommendations. (1) fostering mental health literacy across all participants in campus life, and (2) resourcing colleges toward the achievement of whole health parity. More specifically, they urged more training opportunities for students, faculty, and staff. They also believe any initiative must include future students. It is their opinion that many first-year college students know little about mental health, especially the type of knowledge needed to recognize the signs and symptoms of mental illness, and how to seek and obtain help. They also support the use of peer counseling on college campuses and stated there is widespread support among college counseling centers for peer programs that can be a "bridge" to professional counseling services, and may help to bring reluctant students into a community of care. Lastly, they issued support of A.9753-A (Gunther). This legislation would require student mental health surveys of freshman and juniors (participation is voluntary), create a five-member committee responsible for engaging with and disseminating mental health resources to faculty, staff and students; authorize mental health wellness days and excused absences; annual mental health training for faculty and staff to identify or recognize signs of mental distress among students; and review of enrollment and re-enrollment policies regarding extended mental health leave.

APPENDIX A

2022 SUMMARY OF ACTION ON ALL BILLS REFERRED TO THE COMMITTEE ON

Mental Health

TOTAL NUMBER OF COMMITTEE MEETINGS HELD 5

	ASSEMBLY	SENATE	TOTAL
	BILLS	BILLS	BILLS
BILLS REPORTED FAVORABLE TO:			
	1	0	1
Codes	0	0	0
Judiciary	12	0	12
Ways and Means	13	0	13
Rules	1	0	1
Floor	3	0	3
TOTAL	18	0	18
COMMITTEE ACTION			
Held For Consideration	3	0	3

13

18

REMAINING IN COMMITTEE	51	8	59
Enacting Clause Stricken	3	0	3
Defeated	0	0	0

BILLS REFERENCE CHANGED TO:

	-	
0	0	0

APPENDIX B

FINAL ACTION ON BILLS REPORTED BY THE STANDING COMMITTEE ON MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES IN 2022

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	Description
A.834-A Jean-Pierre	S.1273-A Brooks	Referred to the Assembly Committee on Ways and Means	This bill would require the Commissioner of the Office for People with Developmental Disabilities (OPWDD) to develop a uniform statewide policy for conducting audits of personal allowance and cash accounts for any facility granted an operating certificate by OPWDD.
A.1548-A Reyes	NA	Referred to the Assembly Committee on Ways and Means	This bill would establish the LGBT youth and young adult suicide prevention task force.
A.1679 Santabarbara	S.3788 Comrie	Referred to the Assembly Committee on Ways and Means	This bill would authorize voluntary providers of supports and services to individuals with intellectual and developmental disabilities to bill and be reimbursed within thirty days of billing for novel coronavirus, COVID-19 related costs and expenses, including, but not limited to, increased staffing and personal costs, personal protective equipment expenses, and increased residential cost.
A.2060-A Barrett	S.3410 Brouk	Passed the Assembly	This bill would allow a mandated reporter to refrain from filing an incident report when the reporter has actual knowledge that the reportable incident has already been reported to the register; and that they have been named as a person with knowledge of the incident in such prior report.
A.3635-A Gunther	S.4469-A Mannion	Referred to the Assembly Committee on Ways and Means	This bill would establish housing navigation as a service in New York's developmental disabilities sector and require the Commissioner of the OWPDD to develop a housing navigation training curriculum, oversee the implementation of such curriculum, and provide statewide training to individuals for the provision of housing navigation services.
A.5238 Barrett	S.3995 Reichlin- Melnick	Passed the Assembly	This bill would amend the New York State Constitution to provide parity between physical and mental health.
A.6506 Gunther	S.4253 Skoufis	Chapter 646	This bill would require the commissioner of OMH to provide monthly status reports of the community investments and the impact on inpatient census to the legislature and to publish the report on the office's website.
A.7652 Gunther	S.9335 Brouk	Chapter 478	This law eliminates the residency requirement for an individual to have an ABLE account established in New York state.

A.7686 Frontus	S.7144 Sanders	Chapter 185	This law requires the OMH and the OASAS to provide crisis intervention team training, mental health first aid, implicit bias training and naloxone training to firefighters and emergency medical services personnel who are within the catchment area of a crisis stabilization center.
A.8586-B Simon	S.7107-B Mannion	Chapter 481	This law establishes the Supported Decision-Making process to promote autonomy and self-determination for individuals with disabilities.
A.8690 Cruz	S.7815 Parker	Chapter 20	This law requires the Autism Advisory Board to meet quarterly to provide its findings and recommendations regarding the autism mapping study in the Board's annual report to the Legislature no later than October first.
A.8710 Gunther	S.7847 Mannion	Chapter 28	This law establishes time frames and notification requirements regarding access to records by NYS's Protection and Advocacy System.
A.8711 Gunther	S.7850 Brouk	Chapter 135	This law directs the commissioner of OMH, in consultation with the commissioner of OASAS, to submit a report that details the resources necessary to make the National Suicide Prevention Lifeline, otherwise known as the 9-8-8 suicide prevention and mental health crisis hotline system, available, operational, and effective across the state.
A.9085 Clark	S.7752 Brouk	Veto 80	This bill would direct the commissioner of OMH to establish a maternal mental health workgroup to study and issue recommendations related to maternal mental health and perinatal and postpartum mood and anxiety disorders; underrepresented and vulnerable populations and risk factors in the state for maternal mental health disorders that may occur during pregnancy and through the first postpartum year.
A.9102 Gonzalez-Rojas	S.7753 Brouk	Chapter 384	This law requires OMH and DOH to conduct a study on the disparate impacts regarding postpartum depression screening tests and to prepare and submit a report of findings and recommendations to the governor and the Legislature.
A.9170 Buttenschon	NA	Referred to the Assembly Committee on Ways and Means	This bill would establish the office of the independent intellectual and developmental disability ombudsman program.
A.9400 Gunther	S.8577 Mannion	Referred to the Assembly Committee on Ways and Means	This bill would require OMH to deposit application fees for the issuance of operating certificates into the mental illness anti-stigma fund.
A.9730 Gunther	S.8219-A Harckham	Chapter 522	This law requires the Behavioral Health Ombudsman Program to submit an annual report no later than October 31 to the Legislature and the Governor. The report must include a summary of the work done by the program, and any systemic issues that had been identified by the Ombudsman.

A.9743 Fernandez	S.334-A Myrie	Veto 68	This bill would require the commissioner of OMH to issue a report on short-term crisis respite programs and intensive crisis respite programs.
A.9950 Gunther	S.9507 Brouk	Chapter 524	This law directs the commissioner of OMH to publish information on the agency website regarding the mental illness anti-stigma distinctive license plate program.
A.9982 Cunningham	S.4657 Parker	Referred to the Assembly Committee on Ways and Means	This bill would establish peer crisis diversion homes and require the OMH commissioner to establish or contract for at least six peer crisis diversion homes within one year.
A.10139 Gunther	S.9041 Brouk	Veto 65	This bill would establish a temporary commission within OMH to evaluate and provide recommendations to improve services for elderly residents of mental health supportive housing programs.
A.10140 Lunsford	S.9408 Parker	Chapter 363	This law requires OMH, OASAS, and the Division of Veteran Affairs to create a public education initiative designed to eliminate stigma and misinformation about mental illness and substance use among military service members.

APPENDIX C

LAWS ENACTED

2022

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.6506 Gunther	S.4253 Skoufis	Chapter 646	This bill would require the commissioner of OMH to provide monthly status reports of the community investments and the impact on inpatient census to the legislature and to publish the report on the office's website.
A.7652 Gunther	S.9335 Brouk	Chapter 478	This law removes the statutory residency requirement for an individual to have an ABLE savings account established in New York state.
A.7686 Frontus	S.7144 Sanders	Chapter 185	This law requires the OMH and the OASAS to provide crisis intervention team training, mental health first aid, implicit bias training and naloxone training to firefighters and emergency medical services personnel who are within the catchment area of a crisis stabilization center.
A.8586-B Simon	S.7107-B Mannion	Chapter 481	This law establishes the Supported Decision-Making process to promote autonomy and self-determination for individuals with disabilities.
A.8690 Cruz	S.7815 Parker	Chapter 20	This law requires the Autism Advisory Board to meet quarterly to provide its findings and recommendations regarding the autism mapping study in the Board's annual report to the Legislature no later than October first.
A.8710 Gunther	S.7847 Mannion	Chapter 28	This law establishes time frames and notification requirements regarding access to records by NYS's Protection and Advocacy System.
A.8711 Gunther	S.7850 Brouk	Chapter 135	This law directs the commissioner of OMH, in consultation with the commissioner of OASAS, to submit a report that details the resources necessary to make the National Suicide Prevention Lifeline, otherwise known as the 9-8-8 suicide prevention and mental health crisis hotline system, available, operational, and effective across the state.
A.9102 Gonzalez-Rojas	S.7753 Brouk	Chapter 384	This law requires OMH and DOH to conduct a study on the disparate impacts regarding postpartum depression screening tests and to prepare and submit a report of findings and recommendations to the governor, and the legislature.
A.9730 Gunther	S.8219-A Harckham	Chapter 522	This law requires the Behavioral Health Ombudsman Program to submit an annual report no later than October 31 to the Legislature and the Executive. The report must include a summary of the work done by the program, and any systemic issues that had been identified by the Ombudsman.
A.9950 Gunther	S.9507 Brouk	Chapter 524	This law directs the commissioner of OMH to publish information on the agency website regarding the mental illness anti-stigma distinctive license plate program.
A.10140 Lunsford	S.9408 Parker	Chapter 363	This law requires OMH, OASAS, and the Division of Veteran Affairs to create a public education initiative designed to eliminate stigma and misinformation about mental illness and substance use among military service members.

APPENDIX D

LEGISLATION VETOED 2022

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.10139 Gunther	S.9041 Brouk	Veto 65	This bill would establish a temporary commission within OMH to evaluate and provide recommendations to improve services for elderly residents of mental health supportive housing programs.
A.9743 Fernandez	S.334-A Myrie	Veto 68	This bill would require the commissioner of OMH to issue a report on short-term crisis respite programs and intensive crisis respite programs.
A.9085 Clark	S.7752 Brouk	Veto 80	This bill would direct the commissioner of OMH to establish a maternal mental health workgroup to study and issue recommendations related to maternal mental health and perinatal and postpartum mood and anxiety disorders; underrepresented and vulnerable populations and risk factors in the state for maternal mental health disorders that may occur during pregnancy and through the first postpartum year.