

House Health & Government Operations Committee March 30, 2022

Senate Bill 323

Maryland Medical Assistance Program - Prior Authorization for Drug Products to Treat an Opioid Use Disorder - Prohibition

Support as Amended

NCADD-Maryland supports Senate Bill 323 as amended. In the fight against the opioid overdose crisis, Maryland Medicaid can take additional steps to ensure low income Marylanders have access, without the delay of prior authorizations, to medications used in treating opioid use disorders.

Currently, Medicaid has all medications in the class of those used in the treatment of opioid use disorders on its formulary, and has open access on its preferred drug list (PDL) for the brand named products. When a medication is on the PDL, there is no prior authorization. Decisions about what medications are on or off the PDL take place annually.

In 2016, Medicaid's Pharmaceuticals and Therapeutics (P&T) Committee took one of the buprenorphine products off the PDL for reasons that were non-clinical. Treatment providers were faced with a decision to switch the medications their patients were taking, or take on the extra steps and time involved with requesting authorization. This caused unnecessary anxiety among patients and there were instances where the change in medication led to relapse for some.

The General Assembly saw fit in 2017 to pass legislation prohibiting prior authorizations for these medications in commercial insurance. This was done with agreement from both the treatment providers and the carriers themselves as they realized the importance of ensuring people have immediate access to these medications.

As there was not agreement that this same policy should be established in statute for enrollees of Medicaid as proposed in Senate Bill 323 as introduced, the amended version of this bill will require Maryland Medicaid to regularly monitor prescribing patterns and conduct education and outreach to help make sure people can access medications in a timely manner.

We urge your support of Senate Bill 323.