



**Alliance for
Patient Access**

January 27, 2025

Senator Pamela G. Beidle
Chair, Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

Senator Antonio L. Hayes
Vice-Chair, Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

Re: SB 111 – Maryland Medical Assistance Program and Health Insurance - Step Therapy, Fail-First Protocols, and Prior Authorization - Prescription to Treat Serious Mental Illness

Dear Chair Beidle and Vice-Chair Hayes:

On behalf of the Alliance for Patient Access, I am writing to express support for SB 111 which will increase patients' access to treatments for serious mental illness. This bill will remove harmful utilization management tactics, including unnecessary step therapy requirements, which prevent people with serious mental illness from obtaining their prescribed medications.

Founded in 2006, AfPA is a national network of policy-minded health care providers who advocate for patient-centered care. AfPA supports policies that reinforce shared decision-making, promote personalized care and protect the clinician-patient relationship. Motivated by these principles, AfPA members participate in clinician working groups, advocacy initiatives, stakeholder coalitions and the creation of educational materials. AfPA's Mental Health Working Group convenes clinicians focused on ensuring policy matches the emerging state of mental health care.

This legislation seeks to improve access to prescription medications for patients living with serious mental illness by prohibiting managed care organizations, Maryland Medical Assistance Programs, nonprofit health plans, and health maintenance organizations from using onerous utilization management tactics, such as step therapy and prior authorization.

Step therapy is a tactic used by many payers that requires patients to try and fail insurer preferred options often based on cost, prior to receiving approval for the preferred treatment as dictated by the prescribing clinician. Insurers may require failure on more than one medication, leading to significant delays before getting to a successful therapy. For mental health patients, "fail first" policies can have a devastating impact. Many older, first-generation antipsychotics have several negative side effects, including but not limited to weight gain, seizures, tardive dyskinesia and sedation.¹

Prior authorization is another tactic used by insurance companies with a similar goal. Before receiving access to the prescribed treatment, insurers often require the clinician to complete prior authorization paperwork justifying the treatment. This often leads to treatment delays for days or

¹ <https://www.goodtherapy.org/drugs/anti-psychotics.html>

even weeks. For patients with SMI, these delays can have a devastating impact, leading to exacerbation of symptoms.

This legislation is critically important, as people living with mental health conditions often do not have time to wait for insurance hurdles to be resolved. Studies of state Medicaid programs have found that lack of access to SMI treatment contributes to a higher rate of negative outcomes, including increased emergency room visits, hospitalizations, homelessness or incarceration. In addition, these negative outcomes are particularly burdensome in communities of color.² Improving patient access to these medications has the potential to reduce financial and administrative burdens on the health care system, but other social institutions, as well.

People with untreated SMI run the risk of several serious, negative outcomes. A 2014 study found that homeless individuals with SMI have high non-adherence rates: 47.1 percent for psychiatric medications and 70 percent for schizophrenia medications.³ Medication access and adherence are key to positive outcomes, including stable housing. Adherence is instrumental in stabilizing those living with SMI, which can prevent homelessness and assist patients transitioning into housing. The provisions of this legislation will make it easier for individuals, who may have historically faced issues related to continuity of care, to have consistent access to much-needed treatments. Last, but not insignificant, people living with SMI who have been stabilized because of access to critical medications will be better equipped to tend to their health care and safety needs.

It is for these reasons that the Alliance for Patient Access is seeking these modest, but impactful changes to the Medicaid system that would significantly benefit beneficiaries with SMI. We respectfully request your support for SB 111 if you have any questions, please contact Casey McPherson at cmcpherson@allianceforpatientaccess.org.

Sincerely,



Executive Director, Alliance for Patient Access

CC:

Sen. Arthur Ellis

Sen. Stephen Hershey, Jr

Sen. Clarence Lam

Sen. Justin Ready

Sen. Dawn Gile

Sen. Benjamin Kramer

Sen. Johnny Mautz

Sen. Alonzo Washington

² <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2793285>

³ <https://pubs.lib.umn.edu/index.php/innovations/article/view/342>