



Date: February 17, 2026

To: The Honorable Pamela Beidle, Chair, Senate Finance Committee

From: Aliyah N. Horton, FASAE, CAE, Executive Director, 240-688-7808

Cc: Members, Senate Finance Committee

Re: **FAVORABLE – SB 490 Maryland Medical Assistance Program - Step Therapy, Fail-First Protocols, and Prior Authorization – Prescription Drugs to Treat Serious Mental Illness**

The Maryland Pharmacists Association and the Maryland Pharmacy Coalition recommend a **FAVORABLE report of SB 490 - Maryland Medical Assistance Program - Step Therapy, Fail-First Protocols, and Prior Authorization - Prescription Drugs to Treat Serious Mental Illness.**

According to NAMI Maryland, “Marylander’s are 10 times more likely to be forced to out-of-network mental health care than for primary health care – making it difficult to find care and less affordable due to higher out-of-pocket costs.”

Patients are then compounded with the challenge of barriers within their own plans to access medication that they need. The bill provides a patient-centered, clinically responsible approach to support mental healthcare, while also reducing access issues for patients and administrative burdens for pharmacies.

1. Patient Care Improvement

- Pharmacists are typically the healthcare provider who must communicate the delay in access to medication. Patients often have no understanding of why they cannot receive the medication they need.
- Eliminates unnecessary bureaucratic barriers and administrative burdens that delay critical mental health interventions.
- Supports a more direct path to patient treatment.

2. Treatment Accessibility

- Patients treated and stabilized in in-patient facilities may be denied access to that same medication when the prescription is presented at the pharmacy.
- Prevents mandated trials of less effective medications before accessing recommended treatments.
- Supports patient-specific, personalized medication management.

3. Clinical Evidence Alignment

- Prevents one-size-fits-all protocols that can compromise patient outcomes.

4. Cost-Effectiveness

- Supports potential long-term healthcare savings by mitigating treatment delays, emergency room visits and other economic impacts on the individual and caregivers.
- Reduces administrative costs associated with multiple medication trials, particularly when there is evidence that a protocol is working, and the patient is stabilized.