



Rainbow Place Shelter

Written Testimony in Support of HB 808

Medical Assistance Program: Step Therapy, Fail-First Protocols, and Prior Authorization – Prescription Drugs to Treat Serious Mental Illness

Maryland General Assembly: 2026 Regular Session

Position: SUPPORT

Submitted By: Olusina Adebayo, Executive Director, Rainbow Place Shelter

Thank you for the opportunity to testify on HB 808, which would prohibit the Maryland Medical Assistance Program from applying step therapy, fail-first protocols, and prior authorization in certain circumstances for prescription drugs used to treat serious mental illness.

I represent Rainbow Place Shelter, a Montgomery County nonprofit providing emergency shelter, case management, and supportive services to women and young adults experiencing homelessness. Many of the individuals we serve live with significant mental health challenges including major depression, PTSD, and other serious mental illnesses that demand timely and consistent clinical care.

Step therapy and fail-first requirements often require individuals to try less effective or inappropriate medications before accessing the treatment their clinician believes is optimal. For someone struggling with serious mental illness, these delays can worsen symptoms, destabilize recovery, contribute to crisis episodes, and increase reliance on emergency services. Prior authorization processes further prolong access to effective care and place unnecessary administrative burden on providers and patients.

By limiting these requirements for prescriptions that treat serious mental illness, this bill would:

- Improve access to clinically appropriate medications without unnecessary delays.

- Enhance continuity of care for people transitioning from crisis to stability.
- Reduce barriers to mental health recovery, which supports housing stability and community integration.
- Align policy with best practices that recognize mental health treatment as essential health care.

Several years ago, Rainbow Place Shelter worked with an anonymous guest experiencing a severe and persistent mental illness. Through intensive case management, our team successfully supported her placement into permanent supportive housing. At the time of placement, she appeared stable and hopeful, and the housing opportunity represented a significant milestone in her path toward stability.

Shortly after placement, however, the guest experienced a psychotic episode. During this period, her access to timely, appropriate psychiatric medication was disrupted by administrative barriers and delays in care coordination. Without rapid stabilization, her symptoms escalated, ultimately resulting in behaviors that led to her eviction from supportive housing. She lost not only her housing, but also her sense of safety and continuity of care.

Today, she is once again a guest at Rainbow Place Shelter.

This outcome was not the result of a lack of effort or willingness on her part, nor of inadequate housing supports. Rather, it underscores how delays in accessing the right medication at the right time can unravel housing stability, even when strong systems are in place. Step therapy requirements and prior authorization processes can be particularly dangerous for individuals with serious mental illness, where medication changes or interruptions can trigger acute episodes with long-lasting consequences.

HB 808 addresses this critical gap by prioritizing clinical judgment and timely access to appropriate medications. For the individuals we serve, removing unnecessary barriers to mental health treatment is not an abstract policy issue, it is the difference between stability and crisis, housing and homelessness, recovery and repeated trauma. This bill would help ensure that housing placements are supported by the medical continuity necessary for long-term success.

For individuals experiencing homelessness; for whom access to medical, behavioral health, and social support systems is already fragile, removing administrative hurdles to evidence-based medication is critical. Strengthening access to mental health treatment not only improves health outcomes but also supports broader goals around housing retention, employment readiness, and community safety.

For these reasons, I urge the Committee to support HB 808 and ensure that Maryland's Medical Assistance Program reflects clinical best practices that promote dignity, recovery, and stability for individuals with serious mental illness.

Thank you.

