

HB 867 -- ANTIPSYCHOTIC DRUGS

SPONSOR: Gregory

COMMITTEE ACTION: Voted "Do Pass" by the Standing Committee on Health and Mental Health Policy by a vote of 13 to 0. Voted "Do Pass" by the Standing Committee on Rules- Legislative Oversight by a vote of 9 to 0.

Currently, the MO HealthNet Division cannot impose any restrictions to access that preclude availability of any individual atypical antipsychotic monotherapy for the treatment of schizophrenia, bipolar disorder, or psychosis associated with severe depression. This bill prohibits any restrictions to access of any individual antipsychotic medication.

The bill shall not prohibit the division from utilizing clinical edits to ensure clinical best practices.

Currently, the division must issue a provider update no less than twice annually to enumerate treatment and utilization principles for MO HealthNet providers. If the division implements any new policy or clinical edit for an antipsychotic drug, the division must continue to allow MO HealthNet participants access to any antipsychotic drug that they are either using and on which they are stable or any drug that they have successfully used previously. The division may recommend a resource list with no restrictions to access of antipsychotic drugs.

This bill removes requirements on the division regarding:

- (1) Prior authorization procedures for "nonpreferred" drugs that are clinically appropriate must be simple and flexible;
- (2) A "nonpreferred" drug that is safe and effective for an individual shall not have restricted access for a patient;
- (3) A patient shall not be required to change an antipsychotic drug due to changes in medication management policy, prior authorization, or a change in the payor responsible for the benefit; and
- (4) Patients transferring from state psychiatric hospitals to community based settings must be permitted to continue their medication regimen.

The bill removes a provision requiring the division's medication policy and clinical edits to provide MO HealthNet participants initial access to multiple FDA-approved antipsychotic drugs that

have substantially the same clinical differences and adverse effects that are predictable and whose manufacturers have entered into a federal rebate agreement.

PROPOSERS: Supporters say that this bill cleans up language in statute to ensure that we continue operating the same way we have always been in regards to ensuring access to a full spectrum of antipsychotic drugs. Delayed access harms patients and can result in hospitalizations or arrests.

Testifying for the bill were Representative Gregory; Missouri Pharmacy Association; Gena Terlizzi, National Alliance on Mental Illness Missouri; Denise Mills; Suzanne King, Mental Health America of Eastern Missouri; and the Missouri Department of Mental Health.

OPPONENTS: There was no opposition voiced to the committee.