

HOUSE BILL REPORT

2SHB 2663

As Amended by the Senate

Title: An act relating to the distribution of atypical antipsychotic medications to underserved populations.

Brief Description: Creating a pilot program to provide atypical antipsychotic medications to underserved populations.

Sponsors: By House Committee on Appropriations (originally sponsored by Representatives Alexander, Schual-Berke, Parlette, Cody, Reardon, Ericksen, Morris, Tokuda, Benson, Doumit, Pflug, Kessler, Ruderman, Rockefeller, Edmonds, Santos, O'Brien, Hurst and Esser).

Brief History:

Committee Activity:

Health Care: 2/1/00, 2/4/00 [DPS];
Appropriations: 2/7/00 [DP2S(w/o sub HC)].

Floor Activity:

Passed House: 2/10/00, 96-1.
Senate Amended.
Passed Senate: 3/3/00, 48-0.

Brief Summary of Second Substitute Bill

- The Department of Social and Health Services must establish a pilot program to distribute atypical antipsychotic medications to underserved populations through contacts with regional support networks.
- The department must report to the Legislature on the results of the program by December 1, 2001.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 12 members: Representatives Cody, Democratic Co-Chair; Parlette, Republican Co-Chair; Pflug, Republican Vice Chair; Schual-Berke, Democratic Vice Chair; Alexander; Campbell; Conway; Edmonds; Edwards; Mulliken; Pennington and Ruderman.

Staff: John Welsh (786-7133).

HOUSE COMMITTEE ON APPROPRIATIONS

Majority Report: The second substitute bill be substituted therefor and the second substitute bill do pass and do not pass the substitute bill by Committee on Health Care. Signed by 31 members: Representatives Huff, Republican Co-Chair; H. Sommers, Democratic Co-Chair; Barlean, Republican Vice Chair; Doumit, Democratic Vice Chair; D. Schmidt, Republican Vice Chair; Alexander; Benson; Clements; Cody; Crouse; Gombosky; Grant; Kagi; Keiser; Kenney; Kessler; Lambert; Linville; Lisk; Mastin; McIntire; McMorris; Mulliken; Parlette; Regala; Rockefeller; Ruderman; Sullivan; Sump; Tokuda and Wensman.

Minority Report: Do not pass. Signed by 1 member: Representative Boldt.

Staff: Amy Hanson (786-7118).

Background:

The Department of Social and Health Services provides funding to regional support networks for offering mental health services in the community. Counties or groups of counties operate as regional support networks for serving the mental health needs of Medicaid-eligible persons and other low-income persons who are acutely or chronically mentally ill or seriously disturbed. The regional support networks contract with community mental health centers and other mental health providers, and currently serve some 105,000 outpatients in the community. The services include a crisis response system, outpatient treatment, case management, residential and housing supports, and psychiatric care in community hospitals and the state mental hospitals. The public mental health system must provide crisis care regardless of the person's ability to pay or eligibility for Medicaid assistance.

Approximately 30 percent of persons who suffer serious mental illness do not qualify for Medicaid assistance benefits, nor do they have resources to needed antipsychotic medications, especially the newer atypical antipsychotic medications. Recent experience shows that conventional antipsychotic medications are less effective and have serious and irreversible side effects. The newer atypical antipsychotic medications suggest early, drastic reductions in total mental health treatment costs, without the same side effects as other psychotic medications.

Summary of Bill:

The Department of Social and Health Services is directed to establish a pilot program to distribute atypical antipsychotic medications to underserved populations, which include non-Medicaid persons in crisis and the working poor, as well as jail populations. The department must report to the legislature on the results of the program December 1, 2001.

The department must contract with regional support networks in a competitive application process specifying the population to be served and reimbursement and distribution mechanism to be used in serving the optimum number of individuals within available resources. Funding for the pilot program is separate from the regional support network allocation.

There is an appropriation of up to \$1,000,000 from the General Fund to the department for the fiscal year ending June 30, 2001.

EFFECT OF SENATE AMENDMENT(S): The language of the House bill is stricken and replaced with new language. In sum, there are no pilot project requirements, and the target population is changed. The Department of Social and Health Services must establish a distribution program for atypical antipsychotic medications, to the extent funds are appropriated. The target population is those persons meeting the criteria specified in the dangerously mentally ill and mentally offender law which includes persons with schizophrenia or other psychiatric neurological condition. In addition, in order to receive general assistance (GAU) funds for prescription costs, pharmaceutical manufacturers participating in this program must agree to increase access to their medications through intensive outreach to their respective indigent drug programs. The Washington Institute for Public Policy must evaluate outcomes and report to the legislature by January 1, 2002.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Second Substitute Bill: Ninety days after adjournment of the session in which this bill is passed. However, the bill is null and void unless funding is included in the omnibus appropriations act.

Testimony For: (Health Care) There is a need to serve the mentally ill population which does not qualify for state Medicaid services and therefore does not have access to newer atypical antipsychotic medications. Conventional medications are less effective and have serious, possible irreversible side effects.

(Appropriations) This is a very important issue for the handling of the state's mental health population. This is a program designed to help the very difficult to serve, non-Medicaid eligible, seriously mentally ill population. Access to this medication will help create opportunities for this group.

Testimony Against: (Health Care) Antipsychotic medications are inherently dangerous, including the newer atypical drugs which can cause serious harm to patients.

(Appropriations) None.

Testified: (Health Care) (In support) Representative Alexander, prime sponsor; Representative Schual-Berke, secondary sponsor; Tom Richardson and Charles Albertson, National Alliance for the Mentally Ill of Washington; and Melanie Stewart, Washington State District and Municipal Court Judges.

(Concerns) Richard Warner, CCHR; Pat Terry, Mental Health Division, Department of Social and Health Services; and Eleanor Owen, Washington Alliance for the Mentally Ill.

(Appropriations) Representative Alexander, prime co-sponsor; and Brad Boswell, National Alliance for the Mentally Ill of Washington.