

February 29, 2024

Chairwoman Pena-Melnyk, Vice Chair Cullison, and distinguished members of the Health and Government Operations Committee,

NAMI Maryland and our 11 local affiliates across the state represent a network of more than 58,000 families, individuals, community-based organizations, and service providers. NAMI Maryland is a 501(c)(3) non-profit dedicated to providing education, support, and advocacy for people living with mental illnesses, their families, and the wider community.

NAMI MD believes that all people with mental health conditions deserve access to effective medication and treatment options. Therefore, we work to ensure open access to psychiatric medication and will oppose, at all costs, 'fail first' provisions in State laws and policies. We strongly support public policies that prohibit step therapy for psychiatric medications.

Mental health medications affect people—even those with the same diagnosis—in different ways, including varying levels of effectiveness and different side effects. Because of this, it is important that a person can access the medication that works best for them. It is crucial that medication decisions are carefully considered with a healthcare provider who has both extensive knowledge of the individual and available medication options.

Under current law, health insurers may request or even require that patients demonstrate unsuccessful treatment on one or more insurer-preferred medications before they receive coverage for the medication that their physician recommends. This practice is known as 'fail first' or 'step therapy', meaning that the individual must 'fail' on one or more medication before they can 'step up' to another. Step therapy results in patients not being able to access the treatments they need in a timely manner.

Step therapy/fail first can be a danger to the health and well-being of the person taking the medication, and result in worsening of symptoms and undermining the decisions made between individuals and their health care providers. In fact, a 2015 study published in *Psychiatric Services*, a Journal of the American Psychiatric Association, shows that "step therapy and fail-first protocols were associated with 4.7 times greater odds of a medication access or continuity problem."ⁱ

When a health insurer requires step therapy, it can pose serious and dangerous risks to a person taking mental health medication. Not being able to access the medication and treatment needed in a timely manner can lead to worsened symptoms. Under this bill, individuals diagnosed with bipolar disorder, schizophrenia, major depression, and post-traumatic stress disorder would be exempt from fail-first/step therapy protocols. These diagnoses are serious mental illnesses. Untreated or inadequately treated serious mental health conditions can result in unnecessary disability, emergency department visits and hospitalizations, unemployment, substance abuse, homelessness, inappropriate incarceration, increased risk of suicide, and diminished quality of life.

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NAMI MD ran a survey earlier this year and we garnered 64 responses, half of which were from individuals living with a mental health condition themselves, the other half from family members of individuals with mental health conditions or service providers. Out of the 64 responses, 43 either used Medicaid or private insurance. Of those 43, 83.7% have had a prescription denied and 67.4% were subject to step therapy/fail first protocols. In the respondent's experience, there have been instances of up to 6-month periods before they could get the medication originally prescribed to them by their provider. These delays can be deadly.

Ultimately, utilizing step therapy protocols hurts patients—their condition may worsen, or they may suffer unnecessarily in the process of failing insurer-preferred treatments.

For these reasons, we urge a favorable report.

ⁱ <https://ps.psychiatryonline.org/doi/full/10.1176/ps.2009.60.5.601>