
A BILL FOR AN ACT

RELATING TO PSYCHOTROPIC MEDICATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The purpose of this Act is to improve patient
2 health and safety by preventing unintended and inappropriate
3 psychotropic polypharmacy (which means taking multiple
4 psychotropic medications at the same time), increase access to
5 prescription medications, and promote the efficient use of
6 limited resources by controlling rising prescription drug
7 expenditures without negative impact on health outcomes.

8 Evidence demonstrates that more health care may not
9 necessarily be better, and that effectiveness and efficiency are
10 not mutually exclusive. Health policy leaders understand that
11 it is important to pay for services that improve health outcomes
12 and avoid paying for ineffective, potentially harmful, or
13 wasteful services.

14 Prescription drugs are the fastest growing health care
15 cost, with psychotropic medications as the leading drug
16 expenditure in the Medicaid program. Patients with behavioral
17 health disorders are a particularly vulnerable population and
18 often require prescription drugs to treat their conditions.

1 These patients deserve to have access to effective medications,
2 and they would also benefit from the necessary management to
3 ensure health and safety.

4 Systematic reviews completed by federal evidence-based
5 practice centers on atypical antipsychotics for schizophrenia
6 and bipolar disorder and on second-generation antidepressants
7 for depression and anxiety, overall, found comparable
8 effectiveness among drugs within a class.

9 Generic medications are becoming increasingly available.
10 The currently available generic atypical antipsychotics are
11 risperidone (Risperdol) and clozapine (Clozaril); olanzapine
12 (Zyprexa), quetiapine (Seroquel), and ziprasidone (Geodon) have
13 tentative approval for generic products. The second generation
14 antidepressants fluoxetine (Prozac), sertraline (Zoloft),
15 paroxetine (Paxil), citalopram (Celexa), venlafaxine (Effexor),
16 fluvoxamine (Luvox), bupropion (Wellbutrin), mirtazapine
17 (Remeron), and nefazadone (Serzone) are available as generics.

18 The United States Food and Drug Administration requires
19 that generic medications demonstrate bioequivalence with the
20 brand name product in order to receive approval.

21 Psychotropic medications are being inappropriately
22 prescribed. A recent study in the Journal of the American

1 Medical Association found that antidepressants are not effective
2 for mild depression, and a Food and Drug Administration advisory
3 panel criticized the overprescribing of antipsychotics for
4 children. Antipsychotic medications can have severe physical
5 side effects, causing drastic weight gain and metabolic changes
6 resulting in lifelong problems.

7 It is also important for patient safety to prevent
8 psychotropic polypharmacy and prescribing at doses in excess of
9 those approved. Outpatients may see different providers and
10 unknowingly receive multiple psychotropic prescriptions.
11 Studies have found that more than half of nursing home residents
12 receiving antipsychotics were given doses that exceeded
13 recommended maximum levels, received duplicative therapy, or had
14 conditions, like memory problems or depression, for which such
15 drugs are considered inappropriate.

16 The available evidence for psychotropic medications
17 demonstrates the comparative effectiveness of drugs within a
18 class and the safety problems associated with their
19 overprescribing. Unlimited and unmanaged prescribing places
20 this vulnerable population at further risk and is wasteful.

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1 The amendments proposed in this Act are intended to
2 continue to provide access to medically necessary psychotropic
3 medications while improving safety and cost-effectiveness.

4 SECTION 2. Section 346-59.9, Hawaii Revised Statutes, is
5 amended to read as follows:

6 "§346-59.9 Psychotropic medication. (a) The department
7 shall not impose any restriction or limitation on the coverage
8 for, or a recipient's access to, psychotropic medication[+
9 ~~provided that the psychotropic medication shall be prescribed by~~
10 ~~a psychiatrist, physician, or an advanced practice registered~~
11 ~~nurse with prescriptive authority under chapter 457, duly~~
12 ~~licensed in the State.] in the QUEST, QUEST Expanded Access, and
13 fee-for-service medicaid programs as follows:~~

14 (1) The continued use of a currently prescribed generic or
15 brand name antipsychotic medication, to avoid
16 disrupting stabilization of the recipient; and

17 (2) Any new generic psychotropic medication.

18 ~~[(b) The department shall report to the legislature no~~
19 ~~later than twenty days before the convening of each regular~~
20 ~~session on:~~

21 ~~(1) The number of prescriptions written pursuant to this~~
22 ~~section;~~

1 ~~(2) The cost and impact of psychiatrists, physicians, or~~
2 ~~advanced practice nurses prescribing medications,~~
3 ~~pursuant to this section, that are not part of the~~
4 ~~existing formulary; and~~

5 ~~(3) The overall use of psychotropic medication under~~
6 ~~chapter 346.]~~

7 (b) For any new psychotropic medication prescription, the
8 department shall be allowed to implement the following evidence-
9 based measures in the QUEST, QUEST Expanded Access, and fee-for-
10 service medicaid programs:

11 (1) Claims edits, prior authorizations, and other measures
12 to prevent ineffective or potentially harmful
13 psychotropic polypharmacy; and

14 (2) Step therapy, except as described in (a) (2), within
15 the therapeutic class, while ensuring access to
16 medically necessary psychotropic medications.

17 (c) All psychotropic medications covered by this section
18 shall be prescribed by a psychiatrist, a physician, or an
19 advanced practice registered nurse with prescriptive authority
20 under chapter 457, duly licensed in the State.

21 ~~[-(e)]~~ (d) As used in this section, "psychotropic
22 medication" means only those agents approved by the United

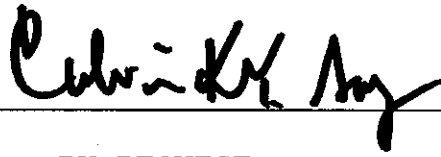
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1 States Food and Drug Administration for the treatment of mental
2 or emotional disorders."

3 SECTION 3. Statutory material to be repealed is bracketed
4 and stricken. New statutory material is underscored.

5 SECTION 4. This Act shall take effect on July 1, 2010.

6
7 INTRODUCED BY: _____



8 BY REQUEST

JAN 25 2010

Report Title:
Psychotropic Medication

Description:
Allows the Department of Human Services to improve the safety
and cost-effectiveness of psychotropic medication use.

HB 2566

JUSTIFICATION SHEET

DEPARTMENT: Human Services

TITLE: A BILL FOR AN ACT RELATING TO PSYCHOTROPIC MEDICATION.

PURPOSE: To improve patient health and safety by preventing unintended and inappropriate psychotropic polypharmacy, increase access to prescription medications, and promote the efficient use of limited resources by controlling rising prescription drug expenditures without a negative impact on health outcomes.

MEANS: Amend section 346-59.9, Hawaii Revised Statutes.

JUSTIFICATION: This bill will improve the health and safety of low-income individuals with mental health problems who take psychotropic medications by preventing inappropriate polypharmacy and overprescribing.

This bill will also promote the efficient use of limited resources by achieving the same health outcomes at a lower cost. The evidence is clear that psychotropic medications are comparably effective within a class. Currently, patients have access to all brand name psychotropic medications when comparatively effective and less expensive generics are available.

Allowing the use of comparatively effective psychotropic medications in the same therapeutic class will eliminate the waste of resources incurred by overspending for expensive medications that are no more effective than less expensive medications. This bill would help control rising prescription drug expenditures without negative impact on health outcomes.

Impact on the public: Public safety would be enhanced. Psychotropic medications are being inappropriately prescribed. A recent study in the Journal of the American Medical Association found that antidepressants are not effective for mild depression, and a Food and Drug Administration advisory panel criticized the overprescribing of antipsychotics for children. Antipsychotic medications can have severe physical side effects, causing drastic weight gain and metabolic changes resulting in lifelong problems.

The health and safety of low-income children with mental health problems would also be improved by reducing inappropriate prescribing of potentially harmful medications for which a United States Food and Drug Administration advisory committee is seeking new label warnings.

Impact on the department and other agencies: Allowing increased prescribing of comparably effective medications reduces expenditures without impacting health outcomes. Controlling prescription costs through this measure reduces the need to decrease expenditures in other areas that might adversely impact health outcomes and improves the ability to increase access to prescription medications for those in programs with limited coverage.

GENERAL FUND: \$430,000 in savings.

OTHER FUNDS: None.

PPBS PROGRAM
DESIGNATION: HMS 401

OTHER AFFECTED
AGENCIES: Department of Health, Adult Mental Health
Division

EFFECTIVE DATE: July 1, 2010.