

HCS SCS SB 45 -- HEALTH CARE FOR PERSONS WITH DISABILITIES

SPONSOR: Hoskins

COMMITTEE ACTION: Voted "Do Pass with HCS" by the Standing Committee on Health and Mental Health Policy by a vote of 15 to 0.

ANTIPSYCHOTIC DRUGS

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.

This provision is the same as HB 867 (2019).

DEVELOPMENTAL AND PHYSICAL DISABILITIES

This bill adds care for the diagnosis and treatment of developmental and physical disabilities to the insurance coverage mandate for autism spectrum disorders, and makes the mandate applicable to policies issued or renewed on or after January 1, 2020, rather than to group policies only.

The bill specifies that autism spectrum disorder shall not be subject to any limits on the number of visits an individual may make to an autism service provider. Coverage for therapeutic care provided under the bill for developmental and physical disabilities may be limited to a number of visits per calendar year, provided that additional coverage shall be provided if approved and deemed medically necessary by the health benefit plan. Provisions requiring coverage for autism spectrum disorders and developmental or physical disabilities shall not apply to certain grandfathered plans as described in the bill.

This bill repeals a provision of law directing the Department of Insurance, Financial Institutions, and Professional Registration to grant small employers waivers from the coverage requirements under certain circumstances. The bill also repeals a provision requiring the Department to submit annual reports to the legislature and requiring health carriers to supply certain diagnosis and coverage information for the report.

This bill applies to policies issued, delivered, or renewed on or after January 1, 2020.

This provision is similar to HB 399 (2019), SB 1074 (2018), HCS HB 1658 (2018), SB 456 (2017), and HB 1011 (2017).

PROPOSERS: Supporters say that children who receive health care and treatment as a child are more likely to lead productive lives as an adult. The goal is to level the coverage to all children with disabilities.

Testifying for the bill were Senator Hoskins; Wayne Lee; Missouri Disability Empowerment; Nathan Schelp; Molly Myers; America's Health Insurance Plans; Blue Cross Blue Shield of Kansas City; Missouri Insurance Coalition; Missouri Association For County Development Disability Services; Brain Injury Association of

Missouri; Missouri Psychological Association; Christina Ingoglia; Shawn D'abrer, Missouri Health Care For All; and Autism Speaks.

OPPONENTS: There was no opposition voiced to the committee.