April 4, 2023

The Honorable Jim Wood
Chairman, Assembly Health Committee
1020 N Street, 390 LOB
Sacramento, CA 95814

Re: AB 1437 (Irwin) Medi-Cal: serious mental illness – Support

Dear Chairman Wood,

On behalf of the California State Association of Psychiatrists (CSAP), I write to you in support of AB 1437, which would improve access to crucial serious mental illness (SMI) medications for Medi-Cal patients by removing unnecessary prescription reauthorization barriers.

According to the DHCS Research and Analytic Studies Division, “Mental illness of any kind had a treatment prevalence of 59% and serious mental illness (SMI) had a treatment prevalence of 45%.” As various health studies have highlighted this is largely due to access problems among patients who need antipsychotic drugs and it is a consequence of not removing reauthorization requirements. To make matters worse, a study of 10 state Medicaid programs comparing drug access problems among psychiatric patients found patients who experienced treatment access problems were 360% more likely to experience a negative outcome including emergency room visits, hospitalizations, homelessness, suicidal ideation, or incarceration. In California, the study found that 57.9% of patients with a psychiatric diagnosis experienced an access problem leading to a negative outcome. Also, the study found that the treatment adherence among individuals experiencing homelessness refill non-adherence rate was 47.1% for psychiatric medications. Non-adherence rates for individuals experiencing homelessness were higher with drugs used in schizophrenia, with around 70% of individuals unable to follow their regimen.

To prevent negative outcomes and provide greater support to individuals experiencing SMI, the state must revise the existing process Medi-Cal patients navigate to obtain their SMI medications. Therefore, AB 1437 proposes making the following changes: prevent prior authorization from being required for any drug prescribed for the treatment of a SMI for a person 18 years of age and over who is not under the transition jurisdiction of the juvenile court, and automatically approve a prescribed drug for the treatment of SMI if there is a record of a paid claim that documents a diagnosis of a SMI within 365 days before the date of that prescription for a person 18 years of age and older who is not under the transition jurisdiction of the juvenile court.

For these reasons, CSAP is pleased to support AB 1437.

Sincerely,

Paul Yoder
Legislative Advocate

CC: Members, Assembly Health Committee
Assemblymember Jacqui Irwin