MINUTES OF THE
HOUSE HEALTH AND HUMAN SERVICES STANDING COMMITTEE
20 House Building, Utah State Capitol Complex
February 8, 2016

Members Present:  Rep. Kay L. McIff, Chair
                  Rep. Robert M. Spendlove, Vice Chair
                  Rep. Stewart E. Barlow
                  Rep. Melvin R. Brown
                  Rep. Rebecca Chavez-Houck
                  Rep. Craig Hall
                  Rep. Sandra Hollins
                  Rep. Michael S. Kennedy
                  Rep. Paul Ray
                  Rep. Edward H. Redd
                  Rep. Norman J. Thurston
                  Rep. Raymond P. Ward

Staff Present:    Ms. Megan L. Bolin, Policy Analyst
                  Ms. Linda Black, House Secretary

Note: A list of visitors and a copy of handouts are filed with the committee minutes

Chair McIff called the meeting to order at 3:55 p.m.


Rep. Froerer explained H.B. 236 to the committee with the assistance of Dr. Jack Wallin. A handout was provided.


H.B. 226 Early Intervention Amendments (Rep. D. Owens)

Rep. Owens explained H.B. 226 to the committee with the assistance of Joel Coleman, Superintendent, Utah School for the Deaf and Blind.


Rep. Ward explained the bill to the committee.

Handouts were provided by Rep. Ward and the following participants: Molina Healthcare, Utah Association of Counties, Utah Behavioral Healthcare Committee, SUNOVION (3), Select Health, and Pharmacotherapy, "Assessment of Changes in Utilization of Health-Care Services After Implementation of a Prior Authorization Policy for Atypical Antipsychotic Agents"

MOTION: Rep. Barlow moved to amend the bill as follows:

1. Page 4, Lines 116 through 119:

   116 (g) An accountable care organization that contracts with the state Medicaid program, and is responsible for providing behavioral health services, shall grant prior authorization for a psychotropic drug that is not on the preferred drug list established by the accountable care organization if the health care provider has documentation showing at least one of the conditions listed in Subsections (2)(e)(i) through (vi) for the Medicaid client meets the requirements of Subsection (2)(e)(v).

The motion passed unanimously.

MOTION: Rep. Barlow moved to amend the bill as follows:

1. Page 1, Line 20:

   20 amends the length of the prior authorization to two years;

   requires the approval of injectible drugs under certain circumstances;

2. Page 1, Line 25:

   and
requires a study of the placement of psychotropic drugs on the preferred drug list; and

3. Page 4, Line 111:

   previously stabilized with a nonpreferred drug; \{or\} 

   (vi) the patient has been shown to tolerate an oral atypical antipsychotic drug, 
   or has been previously stable on an oral atypical antipsychotic drug, and the health care provider determines that the individual needs a long acting injectible version of the same atypical antipsychotic drug; or

4. Page 5, Line 135:

   the Department of Human Services.

   (5) The department shall, prior to November 30, 2020 study the impact of placing antipsychotic drugs on the preferred drug list, including:

   (a) patient outcomes;
   (b) trends related to hospitalizations;
   (c) mortality data;
   (d) fiscal impact to the program;
   (e) expenditures of the savings under Subsection (4); and
   (f) other items as requested by the Legislature's Health and Humans Services Interim Committee.

SUBSTITUTE MOTION: Rep. Ray moved to amend the bill as follows:

1. Page 1, Line 20

   amends the length of the prior authorization to two years;
   
   requires the approval of injectible drugs under certain circumstances;

2. Page 1, Line 25

   and 

   requires a study of the placement of psychotropic drugs on the preferred drug list; and

3. Page 4, Line 111
(vi) the patient has been shown to tolerate an oral atypical antipsychotic drug, or has been previously stable on an oral atypical antipsychotic drug, and the health care provider determines that the individual needs a long acting injectible version of the same atypical antipsychotic drug; or

4. Page 5, Line 135

The Department of Human Services.

(5) The department shall, prior to November 30, 2020 study and report to the Health and Human Services Interim Committee and the Social Services Appropriation Subcommittee the impact of placing antipsychotic drugs on the preferred drug list, including:

(a) patient outcomes;
(b) trends related to hospitalizations;
(c) mortality data;
(d) fiscal impact to the program;
(e) expenditures of the savings under Subsection (4); and
(f) other items as requested by the Legislature's Health and Humans Services Interim Committee.

The motion passed unanimously.

Spoke for the bill: Elizabeth Klc, Utah Association of Counties
Holly Ferrin, Utah Epilepsy Association
Jennifer Dailey, Executive Director, Utah Association of Family Physicians
Mark Brinton, Utah Medical Association
Joyce Delcourt, Legislative Coalition for People with Disabilities
Dave Davis, Utah Retail Merchants Association

Spoke against the bill: Mark Swenson
Robert Jaramello, SUNOVION
Santiago Cortez, Utah Abuse Council
Sean Erickson, National Alliance on Mental Illness
Liane Frederick, Crisis Intervention of Utah
Rick Frendt, National Alliance on Mental Illness
Jami Justice, National Alliance on Mental Illness

Spoke to the bill: Ron Gordon, Commission on Criminal and Juvenile Justice

SUBSTITUTE

H.B. 229 System of Care Development (Rep. E. Redd)

The bill was not heard.

MOTION: Rep. Spendlove moved to adjourn the meeting. The motion passed unanimously.

Chair McIff adjourned the meeting at 5:55 p.m.

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Kay McIff, Chair