SB 1506-4 (LC 181) 2/10/12 (LHF/ps)

PROPOSED AMENDMENTS TO SENATE BILL 1506

1 On page 1 of the printed bill, delete lines 4 through 28 and delete page 2 <u>2</u>.

3 On page 3, delete lines 1 through 23 and insert:

"<u>SECTION 1.</u> (1) The Central Oregon Health Council shall appoint
a Mental Health Clinical Advisory Group to establish voluntary
evidence-based treatment algorithms for the treatment of major mental health disorders. The advisory group shall consider all of the following:

9 "(a) The extent to which sufficient clinical evidence exists to sup10 port a treatment algorithm.

- 11 **"(b) Peer-reviewed medical literature.**
- 12 "(c) Observational studies.
- 13 "(d) Studies of health economics.
- ¹⁴ "(e) Input from patients and physicians.

"(f) Other information deemed by the advisory group to be appro priate.

"(2) The Mental Health Clinical Advisory Group must include, at a
 minimum, all of the following:

- 19 "(a) Two community psychiatrists.
- 20 "(b) One child and adolescent psychiatrist.
- 21 "(c) Two licensed clinical psychologists.
- ²² "(d) One licensed clinical social worker.

- 1 "(e) One psychiatric nurse practitioner.
- 2 "(f) Two primary care providers.
- "(g) Two pharmacists, including one pharmacist who supplies longterm care facilities and special needs clients.
- 5 "(h) Two representatives of statewide mental health advocacy or 6 ganizations for children and adults who live with mental illness, with 7 preference given to individuals with personal experience with mental 8 illness.

9 "(3) The Mental Health Clinical Advisory Group must:

10 "(a) Be independent from any agency of state government;

"(b) Be provided with a meeting space, staffing, telecommunications
 and necessary materials and supplies by the Central Oregon Health
 Council; and

"(c) Post agendas, minutes and a recording of advisory group
 meetings no later than five days after each meeting.

"(4) The affirmative votes of a majority of the Mental Health Clin ical Advisory Group's members are required before the advisory group
 takes action on any measure, treatment algorithm or recommen dation.

20 "(5) The Mental Health Clinical Advisory Group shall investigate 21 and make recommendations for implementation of the following:

"(a) An academic detailing program in which retrospective claims
data are used to educate prescribers on the cost and quality implications of their prescribing patterns;

25 "(b) A program providing low-cost, prepackaged medication samples
 26 to prescribers for distribution to patients free of charge;

"(c) A medication therapy management services program carried
out by pharmacists licensed in this state that is targeted to individuals
with mental health conditions, and that is designed to increase shared
decision-making between patients and prescribers, improve consumer

understanding of medications, promote person-directed care, improve
 medication adherence and prevent complications, drug interactions,
 inappropriate discontinuation or other adverse outcomes;

4 "(d) A program using voluntary psychiatric clinical treatment al5 gorithms developed by the advisory group; and

6 "(e) Clinical prescribing programs that include:

7 "(A) Clinical, economic and quality of life targets.

"(B) Intervention with medical providers, behavioral health providers and the patient or patient's caregiver to promote person-directed
care, improve health and quality of life outcomes and improve prescribing practices.

"(C) Using all antidepressants and antipsychotic medications, and 12any psychiatric medication that is approved by the United States Food 13 and Drug Administration, as preferred medications on any formulary. 14 "(6) Incentives or education may be provided to promote any of the 15programs identified in subsection (5)(a) to (d) of this section so long 16 as the incentives or education are not designed to encourage 17 prescribers to change medications or substitute medications for pa-18 tients who are stabilized on or are currently responding to and toler-19 ating a medication. 20

"(7) The Mental Health Clinical Advisory Group shall report annually to the appropriate committees of the Legislative Assembly related
to health care on its review and recommendations for prescribing
practices, the implementation of clinical programs and any associated
clinical, economic and quality of life outcomes of the program.

"(8) No later than July 1, 2012, the Oregon Health Authority shall
provide to the managed care organization supporting the Central
Oregon Health Council pharmacy claims data to support the work of
the Mental Health Clinical Advisory Group. The authority shall supply
the data in a format agreed to by the authority and the council.".
