

SENATE AMENDMENTS TO SENATE BILL 1506

By COMMITTEE ON HEALTH CARE, HUMAN SERVICES AND RURAL HEALTH
POLICY

February 14

- 1 On page 1 of the printed bill, delete lines 4 through 28 and delete page 2.
- 2 On page 3, delete lines 1 through 23 and insert:
- 3 **“SECTION 1. (1) The Central Oregon Health Council shall appoint a Mental Health Clin-**
- 4 **ical Advisory Group to establish voluntary evidence-based treatment algorithms for the**
- 5 **treatment of major mental health disorders. The advisory group shall consider all of the**
- 6 **following:**
- 7 **“(a) The extent to which sufficient clinical evidence exists to support a treatment algo-**
- 8 **rithm.**
- 9 **“(b) Peer-reviewed medical literature.**
- 10 **“(c) Observational studies.**
- 11 **“(d) Studies of health economics.**
- 12 **“(e) Input from patients and physicians.**
- 13 **“(f) Other information deemed by the advisory group to be appropriate.**
- 14 **“(2) The Mental Health Clinical Advisory Group must include, at a minimum, all of the**
- 15 **following:**
- 16 **“(a) Two community psychiatrists.**
- 17 **“(b) One child and adolescent psychiatrist.**
- 18 **“(c) Two licensed clinical psychologists.**
- 19 **“(d) One licensed clinical social worker.**
- 20 **“(e) One psychiatric nurse practitioner.**
- 21 **“(f) Two primary care providers.**
- 22 **“(g) Two pharmacists, including one pharmacist who supplies long-term care facilities**
- 23 **and special needs clients.**
- 24 **“(h) Two representatives of statewide mental health advocacy organizations for children**
- 25 **and adults who live with mental illness, with preference given to individuals with personal**
- 26 **experience with mental illness.**
- 27 **“(3) The Mental Health Clinical Advisory Group must:**
- 28 **“(a) Be independent from any agency of state government;**
- 29 **“(b) Be provided with a meeting space, staffing, telecommunications and necessary ma-**
- 30 **terials and supplies by the Central Oregon Health Council; and**
- 31 **“(c) Post agendas, minutes and a recording of advisory group meetings no later than five**
- 32 **days after each meeting.**
- 33 **“(4) The affirmative votes of a majority of the Mental Health Clinical Advisory Group’s**
- 34 **members are required before the advisory group takes action on any measure, treatment**
- 35 **algorithm or recommendation.**

1 **“(5) The Mental Health Clinical Advisory Group shall investigate and make recommen-**
2 **datations for implementation of the following:**

3 **“(a) An academic detailing program in which retrospective claims data are used to edu-**
4 **cate prescribers on the cost and quality implications of their prescribing patterns;**

5 **“(b) A program providing low-cost, prepackaged medication samples to prescribers for**
6 **distribution to patients free of charge;**

7 **“(c) A medication therapy management services program carried out by pharmacists li-**
8 **censed in this state that is targeted to individuals with mental health conditions, and that**
9 **is designed to increase shared decision-making between patients and prescribers, improve**
10 **consumer understanding of medications, promote person-directed care, improve medication**
11 **adherence and prevent complications, drug interactions, inappropriate discontinuation or**
12 **other adverse outcomes;**

13 **“(d) A program using voluntary psychiatric clinical treatment algorithms developed by**
14 **the advisory group; and**

15 **“(e) Clinical prescribing programs that include:**

16 **“(A) Clinical, economic and quality of life targets.**

17 **“(B) Intervention with medical providers, behavioral health providers and the patient or**
18 **patient’s caregiver to promote person-directed care, improve health and quality of life out-**
19 **comes and improve prescribing practices.**

20 **“(C) Using all antidepressants and antipsychotic medications, and any psychiatric**
21 **medication that is approved by the United States Food and Drug Administration, as preferred**
22 **medications on any formulary.**

23 **“(6) Incentives or education may be provided to promote any of the programs identified**
24 **in subsection (5)(a) to (d) of this section so long as the incentives or education are not de-**
25 **signed to encourage prescribers to change medications or substitute medications for patients**
26 **who are stabilized on or are currently responding to and tolerating a medication.**

27 **“(7) The Mental Health Clinical Advisory Group shall report annually to the appropriate**
28 **committees of the Legislative Assembly related to health care on its review and recommen-**
29 **dations for prescribing practices, the implementation of clinical programs and any associated**
30 **clinical, economic and quality of life outcomes of the program.**

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