



**Alliance for
Patient Access**

May 20, 2022

WV, HHS, Bureau for Medical Services
Drug Utilization Review Board
350 Capitol Street, Room 251
Charleston, West Virginia 25301

RE: Adverse Events Exceptions for Atypical Antipsychotics

Dear Members of the Drug Utilization Review Board:

On behalf of the Alliance for Patient Access (AfPA) and as West Virginia clinicians treating mental health patients, we understand firsthand the debilitating nature of mental health conditions. In advance of the Drug Utilization Review Board meeting, we are writing to express our concerns regarding WV Medicaid's exceptions to adverse events related to mental health therapies. We are concerned these restrictions are overly burdensome and inappropriately limit access to the full range of atypical antipsychotics medications. We urge you to revise these policies to improve the quality of care for mental health patients in West Virginia.

Founded in 2006, AfPA is a national network of policy-minded health care providers who advocate for patient-centered care. AfPA supports health policies that reinforce clinical decision-making, promote personalized care and protect the provider-patient relationship. Motivated by these principles, AfPA members participate in clinician working groups, advocacy initiatives, stakeholder coalitions and the creation of educational materials. AfPA's Mental Health Working Group focuses on ensuring policies are in place that allow for patient-centered care for those living with mental health conditions.

It has come to our attention that for the atypical antipsychotic class, WV Medicaid is requiring patients to step through two formulary-preferred therapies prior to accessing some therapies their health care providers seek to prescribe. Step therapy, as you know, requires patients to try and fail one or more medications, often lower cost, before he or she can access their medication as prescribed. However, AfPA would like to extend our appreciation in your willingness to acknowledge that the maximum dose requirement was an outdated requirement that often did not fall in line with standard of care guidelines. We are grateful that you will be voting on updated language to this provision.

In addition, we have been made aware of a recent trend of not approving exceptions due to adverse events, such as increased suicidal ideation, weight gain, and increased mania, which is particularly concerning. Patients with mental health conditions are often disproportionately disadvantaged by other factors including low household income, residential instability, and poor physical health.¹ By not allowing exceptions due to adverse events, patients may face worse health outcomes. For mental

¹ <https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2767721>

health patients, this can have devastating consequences for themselves, their families and society at large.

One provider shared an example of one of his patients who was forced to take a max dose of quetiapine, despite significant weight gain. He was then told to use olanzapine in combination with fluoxetine, despite the fact that there was documented history of mania in this patient. He was then told to use latuda, despite the fact that this agent increased depression. This is just one story of the struggles that mental health providers deal with when attempting to find the correct treatment for their patients. After a letter of appeal and leng

Providers should be able to work with their patients to determine the treatment option they determine best meets the patient's needs and will lead to the highest level of adherence. Once established, they should have uninterrupted access to these treatments. **We urge you to take a patient-centered approach by providing access to the full range of therapies, allowing clinicians and patients to choose based on clinician expertise.**

Patient-centric care is built upon a foundation of trust between the patient and his or her health care provider. Only through open discussion and shared decision making can this relationship effectively develop to provide the patient with the most appropriate care. When health care plans undermine this clinician-patient partnership by interfering with the agreed upon course of treatment, it jeopardizes the patient's well-being. Accordingly, we urge you to revise your current step therapy processes to reduce the barriers between patients and appropriate therapies.

AfPA is appreciative of the opportunity for our clinicians to provide direct feedback to you and your team, prior to this meeting. We also are appreciative of your transparency in some of the adjustments that you plan on making. We appreciate your attention to this matter. If AfPA can provide further details or be of assistance, please contact us at 202-951-7097.

Sincerely,

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