At the second annual meeting of the Mental Health Working Group, the Alliance for Patient Access welcomed a broad range of mental health providers to identify barriers to mental health care access and discuss policies that can improve care for patients.

**Utilization Management**

Working group members discussed utilization management tactics that can lead to serious harm for mental health patients. When these practices undermine, delay or alter treatment plans, patients cannot access the care they need to manage their conditions.

### Prior Authorization

Prior authorization places undue burden on both providers and patients. Members expressed frustration that it has become common practice and impacts nearly all treatment plans. It often puts the patient-provider relationship at risk and prevents timely care.

And prior authorization impedes providers long before they've begun writing a prescription, one clinician explained. “You’re already doing a prior authorization for them in your mind before you’ve even written the script,” he stated.

From the start of an appointment, providers are considering treatment plans. But prior authorization often forces clinicians to focus on what patients can realistically access instead of what is best for them.

### Non-Medical Switching

Members also discussed how non-medical switching can lead to serious harm for patients. One provider described a stable patient who was switched. Without the right medication, the patient began experiencing severe aggression, which led to caregiver struggles and safety concerns.

Keeping patients stable on their medication is easier and less expensive in the long run, members emphasized. There are fewer interruptions to care. Non-medical switching, on the other hand, can jeopardize a patient’s condition, lead to more hospitalizations and even cause permanent harm.

### Re-Authorization

Clinicians highlighted that re-authorization places a strain on mental health patients and can interrupt care. Patients who are regularly monitored by a provider should not be forced stop or adjust their treatment to prove that it is still necessary.

Even minor changes to treatment can lead to non-adherence issues, several clinicians explained. Patients’ conditions may worsen leading to more severe mental health problem in the future.

Members also discussed how specialty tiers, step therapy, cost sharing and co-pay accumulators present additional hurdles for mental health patients and providers. The barriers can all have harsh consequences for patients’ well-being and treatment adherence.
Resource Shortages

One of the greatest challenges that mental health patients face is the lack of mental health care providers and appropriate facilities. Members described a shortage of specialists and an increasing number of mental health patients, which has only grown since the onset of the pandemic. Meanwhile, few facilities can provide the level of care mental health patients may need.

Working group members identified that many providers aren’t prepared to support mental health patients. But equipping these providers with the tools to handle the mental health patients they encounter is an important first step.

When there aren’t enough resources to support patients who need care, many patients don’t receive treatment. Mental health conditions may worsen without appropriate treatment and grow more severe. And even when patients do receive care, it’s not necessarily care that meets their individual needs.

Telemedicine

One tool that has risen to the forefront of mental health care during the pandemic is telemedicine. Providers discussed how telemedicine overcame many of the pandemic’s challenges and connected patients to care.

Several clinicians noted that although telemedicine can help address shortages and improve access, in-person care shouldn’t be neglected. While some patients respond positively to telemedicine, others struggle with it.

One provider shared that her patient group typically did well with telemedicine appointments, while another provider explained that his patients typically needed an in-person aspect to care.

Identifying patients’ unique needs and the barriers they face can help providers find the right balance of in-person and virtual care to help patients manage their conditions.

Needs Assessment

Members of the working group recognized that mental health patients need tailored care and discussed ways to better understand the needs of individual patient groups.

Clinicians also discussed how more preventive measures can help catch mental health challenges early and stop them from growing into more dangerous conditions. Throughout the meeting members voiced support for policies that allow providers to meet mental health patients’ needs and connect them to optimal, personalized care.

Next Steps

The working group discussed plans for educational materials to build on current advocacy and outreach efforts and promote policies that encourage patient-centered care for mental health patients.

Get Involved

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