The Alliance for Patient Access’ Mental Health Working Group held its third annual meeting in June 2023. The event welcomed psychiatrists, psychologists, emergency medicine providers, primary care providers and social workers to discuss challenges related to seeking or providing mental health care and to identify potential policy solutions.

Utilization Management

Utilization management tactics are insurance barriers that prevent patients from accessing the right treatment. Working group members discussed how these tactics can hinder patients’ progress and undermine adherence by delaying or denying patient-centered care.

Prior Authorization

The burden of prior authorization weighs heavily on providers. Working group members expressed frustration that the tactic’s reach is growing. Once used just for the most expensive medications, prior authorization now is required for most treatments. It adds to providers’ paperwork burden, and many working group members said they had to hire administrative help to manage it all.

Prior authorization doesn’t just prevent patients from accessing the right care. Its reach can impact the wellbeing of providers. Working group members also shared that prior authorization has contributed to burnout that many clinicians are experiencing.

Non-Medical Switching

Working group members also pointed to non-medical switching as a significant frustration. When a stable patient is switched by their health plan to a different medication, the disruption can drive a wedge in the patient-provider relationship and lead to worse health outcomes. Patients may blame their provider for insurer-driven switches. The differences in packaging and design of a new drug may also look different after a switch, and these differences may disrupt the routine that patients have fought for.

Providers treating serious mental illness must build relationships with their patients, working group members emphasized. And the disruption caused by non-medical switching can lead to months of lost progress.

Copay Accumulators

Patients often use copay cards to lower their out-of-pocket costs for medication. One utilization management tactic that is becoming more common among payers is copay accumulators, which exclude payments made using copay cards from counting toward a patient’s annual deductible. Once patients exhaust their copay coupon, they are ultimately hit with large, unexpected out-of-pocket costs, leading to significant challenges affording their treatments.

Providers are also often left out of the loop because of these programs, and working group members expressed frustration that they cannot help their patients.
Mental Health Parity

Working group members said that parity presents a major challenge. Even though federal law requires equal insurance coverage for mental health care services, insurers don’t always abide. Working group members shared they see payers’ failure to implement parity regularly.

There are many opportunities to advocate for parity, meeting participants noted, and the Alliance for Patient Access will continue to seek ways to support providers’ and policymakers’ efforts to successfully ensure parity.

The 988 Mental Health Lifeline

The working group convened near the first anniversary of the 988 crisis lifeline, which connects patients directly with a mental health professional if they need immediate care. In many medical specialties, including emergency medicine, providers receive little-to-no psychiatric training during residency. Emergency departments are often not equipped to support patients experiencing a mental health crisis.

While the lifeline is an important resource, however, there are still limitations and opportunities for improvement. The public still lacks awareness regarding 988 and may struggle to differentiate between a psychiatric emergency and a 911 emergency.

Serious Mental Illness

Serious mental illness has been a priority for policymakers in recent years, and working group members discussed where there was need for improvement. Legislative efforts in states across the country seek to simplify or remove utilization management barriers that prevent patients from accessing their treatment in a timely manner. As patients with SMI already face significant barriers to access and adherence, the providers agreed that lawmakers should prioritize policies that allow for a patient-centered approach to care for this patient population.

Needs Assessment

Mental health patients face many challenges while seeking care, and working group members explained that patients need greater advocacy and support. Efforts to combat stigma around mental health should continue, as should efforts to tailor care to patients’ unique conditions, needs and preferences. Providers outside of mental health also encounter mental health patients often, participants highlighted, and need the tools and training to treat them.

Next Steps

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

Get Involved

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