

2663-S2

Sponsor(s): House Committee on Appropriations (originally sponsored by Representatives Alexander, Schual-Berke, Parlette, Cody, Reardon, Ericksen, Morris, Tokuda, Benson, Doumit, Pflug, Kessler, Ruderman, Rockefeller, Edmonds, Santos, O'Brien, Hurst and Esser)

Brief Description: Creating a pilot program to provide atypical antipsychotic medications to underserved populations. (REVISED FOR PASSED LEGISLATURE: Creating a program to provide atypical antipsychotic medications to underserved populations.)

HB 2663-S2 - DIGEST

(DIGEST AS ENACTED)

Declares that, in order to protect the public health, safety, and welfare, and reduce the economic and societal costs associated with untreated schizophrenia and other similar psychiatric and neurological conditions, the legislature intends to promote access to atypical antipsychotic medications by those unable to access them and who present a risk of harm to themselves and to the community.

Provides that, to the extent funds are appropriated, the department of social and health services shall request proposals that promote access to atypical antipsychotic medications to persons who meet the following criteria: (1) The person has schizophrenia or other psychiatric or neurological condition that is treated with atypical antipsychotic medication;

(2) the person's income is less than two hundred percent of the federal poverty level; and

(3) the person is not covered by insurance or other benefit that pays for atypical antipsychotic medications.

Requires the Washington institute for public policy to conduct an evaluation of this act to determine the following: (1) Outcomes for persons receiving atypical antipsychotic medications under the provisions of this act, including, but not limited to the person's: (a) ability to perform basic living skills and maintain a job; (b) adherence to medication regimens; (c) number of inpatient placement or acute care services after having received atypical antipsychotic medications; and (d) criminal conviction record for further offenses, if any, after having received atypical antipsychotic medications;

(2) the extent to which this act increases access to atypical antipsychotic medications to the targeted population; and

(3) the uniformity by health care providers in prescribing atypical antipsychotic medications among the population identified under the provisions of this act.

Requires the Washington institute for public policy to identify the number of children and the number of adults served; and outcomes, access, and uniformity for both children and adults.

Requires the Washington institute for public policy to report to the legislature by January 1, 2002.