AIMED ALLIANCE

August 7, 2026

Delegate Evan Worrell
West Virginia House of Delegates
evan.worrell@wvhouse.gov

Via Electronic Communication

Dear Delegate Worrell:

Aimed Alliance is a non-profit health policy organization that seeks to protect and enhance the rights of health care consumers and providers. We are writing to express our support for WV HB 4984, a bill that would prohibit prior authorization and utilization management for serious mental illness treatments.[1]

In West Virginia, nearly 90,000 adults live with a serious mental illness.[2] A serious mental illness, or SMI, is defined as a serious mental or behavioral health condition, such as schizophrenia, bipolar disorder, and major depression with psychotic features.[3] Individuals with SMIs often have difficulty accessing treatment due to a variety of factors, including stigma, affordability, and co-occurring conditions like addiction, which can further complicate obtaining care.[4] In addition, disease-specific symptoms such as paranoia, difficulty with memory or concentration, and disorganization can make it difficult for individuals to receive the necessary care.[5] As a result, individuals living with acute and chronic SMIs are less likely to receive quality general medical care, have worse health outcomes, and are more likely to have a shorter life expectancy than individuals without an SMI.[6]

Fortunately, scientific advances have substantially grown in the last several decades, and there are now first-, second-, and third-generation antipsychotic treatments that can be used to treat SMIs. Importantly, these drug varieties have various mechanisms of action and can include short- and long-term treatment options, allowing health care providers to assess an individual patient's needs, compliance, and treatment options to determine the best course of action.

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[1] West Virginia, HB 4984, https://www.wvlegislature.gov/Bill_Status/bills_text.cfm?billdoc=hb4984%20intr.htm&yr=2026&sesstype=RS&i=4984.
[2] NAMI, *Mental Health in West Virginia,* https://www.nami.org/wp-content/uploads/2025/05/WestVirginia-GRPA-Data-Sheet-8.5-x-11-wide-1.pdf.
[3] Treatment Advisory Center, *What is SMI?*, https://www.tac.org/what-is-smi/.
[4] Veterans Affairs, https://www.va.gov/PREVENTS/docs/PRE013_FactSheets_SeriousMentalillness_508.pdf
[5] Courtney Wieseepape, et al., *Behind the Gaps: A Narrative Review of Healthcare Barriers for Individuals with Serious Mental Illness* (Sept. 2025), https://pmc.ncbi.nlm.nih.gov/articles/PMC12524047/.
[6] Veterans Affairs, *Serious Mental Illness*, https://www.va.gov/PREVENTS/docs/PRE013_FactSheets_SeriousMentalillness_508.pdf.

Given the complexity of treating SMIs, the use of benefit utilization policies, such as step therapy[7] and prior authorization,[8] can substantially harm consumer health and long-term outcomes. For this reason, the American College of Physicians has recommended that all step therapy policies be minimized to reduce patient care delays, side effects, and other patient harms.[9] Thus, the proposed bill, HB 4984, which would prohibit the use of step therapy and prior authorization, supports the best practices established by the American College of Physicians.

In addition to ensuring timely access to care for patients and reducing provider burnout, limiting the use of step therapy and prior authorization is also consistent with the growing recognition by state legislatures to protect individuals living with SMI. For example, in 2025, four states passed legislation prohibiting the use of step therapy for SMI treatments, and nine additional states considered legislation that would adopt similar patient protections. In addition, Texas currently limits the use of step therapy to no more than one drug for the treatment of SMI,[10] and New York more broadly limits the use of step therapy to no more than two drugs across all state-regulated health plans.[11] Therefore, Aimed Alliance urges West Virginia to join the growing number of states that protect access to care for individuals living with a SMI.

We greatly appreciate your consideration of our letter and urge the West Virginia Legislature to swiftly pass HB 4984 during the 2027 session. Please contact us at avantrees@aimedalliance.org if you have any questions.

Sincerely,

Ashira Vantrees, Esq.
Director of Legal Strategy & Advocacy

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[7] Step therapy requires consumers to try and fail on alternatives before the health plan will cover the originally prescribed treatment. These policies can cause patients to try and fail on multiple treatments before accessing an effective treatment.

[8] Prior authorization requires a provider to receive approval from the health plan to cover a drug before the patient can access the medication. This can be a paperwork-heavy process increasing patient delays and contributing to provider burnout.

[9] ACP, *Mitigating the Negative Impact of Step Therapy Policies and Nonmedical Switching of Prescription Drugs on Patient Safety,* https://www.acponline.org/sites/default/files/acp-policy-library/policies/step_therapy_nonmedical_switching_prescription_drugs_policy_2020.pdf.

[10] Aimed Alliance, *State Report 2025: Step Therapy, Oversight, and Artificial Intelligence,* https://aimedalliance.org/wp-content/uploads/2025/06/AA-2025StateReport_June_2025.pdf.

[11] *Id.*