NAMI Supports HB 2300:
Improving Prescribing of Mental Health Medications

Because of strong patient protections in Oregon law, individuals living with mental illness currently have streamlined access to critical mental health medications. Under state management, Oregon is able to ensure that antidepressant and atypical antipsychotic medications are efficiently dispensed, which enhances an individual’s ability to regularly take medications that promote recovery from serious mental illness.

House Bill 2300 moves Oregon forward by empowering an advisory group with expertise in mental health treatments and medications to develop treatment “algorithms” that will improve prescribing practices and educate prescribers on accompanying psychosocial therapies and supports that are effective when coupled with medication.

HB 2300 will help improve outcomes for individuals living with mental illness without restricting patient access to critical mental health medications.

NAMI Oregon supports HB 2300 because the bill:

- **Focuses on improved prescribing practices coupled with other therapies.** A Mental Health Clinical Advisory Group with broad membership and specific expertise in mental health treatment will develop evidence-based algorithms that join together both pharmaceutical and psychotherapy treatments and supports.

- **Aims Oregon toward true integration.** True health care integration for individuals and families living with mental illness cannot occur until the health care system utilizes psychotherapies and medications in tandem. Too often, treatment for conditions such as depression starts and stops with the prescribing of antidepressants, particularly in primary care. The development of a comprehensive treatment algorithm will lead to more informed treatment decisions among providers and consumers.

- **Protects Access.** HB 2300 retains Oregon’s tradition of open access to mental health medications. NAMI Oregon knows firsthand the catastrophic outcomes that occur when patients face “fail first” requirements or other restrictions on access. Finding the most helpful medication for consumers should be based on clinical judgment and informed consumer choice — not an arbitrary “approved” list.