



SB 950 – Alzheimer’s Treatment Access **Senator Akilah Weber Pierson, M.D.**

SUMMARY

SB 950 clarifies and standardizes access to Federal Drug Administration (FDA)-approved treatments for Alzheimer’s disease under private insurance plans regulated by the State of California.

BACKGROUND

In 2023 and 2024, the FDA approved monoclonal antibody treatments, which specifically target amyloid plaque buildup in individuals in the early stage of Alzheimer’s disease. The production and spread of amyloid plaque are a widely recognized biological marker for the onset and progression of Alzheimer’s disease¹.

These FDA-approved anti-amyloid therapies represent a significant medical breakthrough in Alzheimer’s care, as they address the underlying disease progression rather than solely treating symptoms. Clinical trials and studies have shown that, for appropriate patients, these therapies can meaningfully reduce clinical decline²³. This distinguishes them from traditional treatments routes that primarily only manage symptoms, such as memory loss or agitation, while the disease continues to progress.

Access to the first generation of disease-modifying treatments has meaningfully altered the outlook for millions of people living with and their caregivers and families affected by Alzheimer’s disease, particularly when the condition is identified early. When combined with timely diagnosis, appropriate clinical monitoring, and evidence-based lifestyle interventions, these therapies offer a realistic opportunity to slow disease progression and preserve cognitive function for longer periods of time.

PROBLEM

FDA-approved disease-modifying, anti-amyloid therapies are indicated only for individuals in the early stage of Alzheimer’s disease; there are currently no comparable treatments that slow clinical progression in the middle or later stages. This narrow window makes timely access to these treatments critical.

These FDA-approved therapies are covered under Medicaid, Medi-Cal, and the California Public Employees’ Retirement System (CalPERS). However, this bill ensures that there are no discrepancies in state regulated plans. Although medically necessary treatments are currently required to be covered, statute does not explicitly state that this type of drugs are covered by all plans, regardless of how it is administered and how plans classify the type of benefit.

Although this potential gap affects a smaller subset of those living with Alzheimer’s disease, it is important to address ambiguity and delays for private plans because people are assessing risk factors, getting diagnosed, and seeking treatment sooner and younger. Given the necessity of early intervention, these individuals can progress out of the treatable stage if they are forced to wait until 65 for Medicare coverage.

Barriers to care can surpass initial access to coverage. Affected individuals may be subject to step therapy, prolonged prior authorization, denial appeals, or Independent Medical Review (IMR) processes, even after diagnostic testing confirms amyloid plaque. These delays can last many months to over a year, which can result in these individuals becoming ineligible for this treatment.

¹ <https://www.mayoclinic.org/diseases-conditions/alzheimers-disease/symptoms-causes/syc-20350447>

² <https://www.nejm.org/doi/full/10.1056/NEJMoa2212948>

³ <https://jamanetwork.com/journals/jama/fullarticle/2807533>



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In all, when timely treatment is delayed, affected individuals can progress to later stages of Alzheimer’s disease that require more intensive and costly levels of care. Addressing these delays aligns coverage processes with clinical realities and supports more efficient use of health care resources over time.

SPECIFICALLY, THIS BILL WILL

- Ensure health plans cover all FDA-approved medically necessary treatments or medications for the treatment of Alzheimer’s disease
- Prohibit step therapy as a requirement for coverage
- Preserve utilization management and prior authorization
- Establish an expeditious process for a provider to obtain prior authorization upon submission.

SUPPORT

Alzheimer’s Association (Sponsor)

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