New Resources for Prescribers of Antipsychotic Medications to Children

MAKING MEDICAID MANAGED CARE WORK FOR FLORIDA PATIENTS

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Today’s Presentation

A Brief History of Prescribing Antipsychotics

Florida’s Medicaid Drug Therapy Management Program for Behavioral Health

Benefits for SMMC Plans

Results to Date
A Brief History
Late 1990’s to Early 2000’s

• Escalating use of new, expensive meds for behavioral health in children
• Spike in Medicaid costs
• Advocates question reimbursement of off-label prescriptions: Where is safety data?
• Media scrutinize prescribing practices, report severe adverse events
Considerations for Policymaking

Balancing Benefits …
• Increased quality of life
• Reduced symptoms
• Ability to function and learn

… And Risks …
• Safety
• Tolerability in children
• Side effects and adverse events
• Use with other meds

… With very limited available data on:
• Off-label prescribing
• Long-term effects on children
• FDA indications
Considerations for Policymaking

• **Data**: Paucity of clinical data on prescribing for children

• **Approach**: Points to a need for a more thoughtful and conservative approach to implement and guide evidenced-based care

• **Focus**: Where there is lack of research, focus on available data & concentrate on safe medical care
Florida Pilots
Medicaid Managed Care

• 2005 state legislation authorized AHCA to seek waivers from CMS to pilot a statewide initiative to provide a more efficient and effective Medicaid service delivery system that enhances quality of care and client outcomes.

• Florida Medicaid partnered with Florida Mental Health Institute at the University of South Florida to develop the Medicaid Drug Therapy Management Program for Behavioral Health (MDTMP).
MDTMP for Behavioral Health
Florida’s Partners

University of South Florida (USF)
- School of Medicine
- College of Public Health
- Florida Mental Health Institute (FMHI)
- Department of Psychiatry
- Rothman Center for Pediatric Neuropsychiatry

Other Active Partnerships:
- UMiami, UFFlorida, Florida International University (FIU)
- Scientific community
- Community Mental Health Centers (CMHC)
- Medical societies
MDTMP for Behavioral Health Components

1. Convene Expert Panel to develop best practice guidelines
2. Provide support to prescribers
3. Build robust statewide data set
MDTMP for Behavioral Health

1. Convene Panel of National Psychiatry Experts
   - Develop Best Practice Guidelines for prescribers
     • Address medication for adults, children and adolescents
     • Focus on the major mental health disorders
   - Promote Best Practice Guidelines
     • Presentations at Medical society meetings to raise awareness
     • CME programs highlight these guidelines
     • Web-based portal for prescribers
     • Garnering National attention and increasingly quoted in the literature
   - Best Practice Guidelines are updated biennially to reflect most recent research and evidence.
MDTMP for Behavioral Health

• Best Practice Guidelines for Preschool Children (2012)
  – Principles of Practice Regarding use of Psychotropic Medications
  – Dosing of Antipsychotic Medication
  – ADHD
  – Anxiety Disorders
  – Disruptive Behavior Disorder or Severe Aggression
  – Major Depression
MDTMP for Behavioral Health

- Children and Adolescents (2012)
  - ADHD
  - Aggression and Self-Injurious Behaviors in the Context of Developmental Disabilities for Children
  - Bipolar I or Mixed Mania
  - Chronic Impulsive Aggression
  - Major Depression
  - Obsessive Compulsive Disorder
  - PTSD
  - Tic Disorders
MDTMP for Behavioral Health

- Best Practice Guidelines for Preschool Children (2014)
  - PTSD

- Best Practice Guidelines for Children and Adolescents
  - Neurodevelopmental Disorders: Psychotropic Medication Recommendations for Target Symptoms in Youth (April 2014)
  - Early-Onset Schizophrenia (September 2014)
MDTMP for Behavioral Health

2. Provide support for prescribers
   – Peer-to-peer support for child prescribing
     • Specific second medical opinion review process for children under age six
     • New prescriptions reviewed by a board-certified child psychiatrist prior to reimbursement
     • Guiding principles for the review
       – Appropriate and safe medical care is a priority
       – Adherence to Florida Best Practice Guidelines
     • 24 hour turnaround for review
     • Available to SMMC plan providers
MDTMP for Behavioral Health

- State-wide Child Psychiatry Access Call Line
  - Telephone-based clinical consultation from Board-Certified child psychiatrist
  - Supports primary care practitioners
  - Available to SMMC plan providers

- Web-based portal for prescribers includes best practice guidelines and links to other resources
  - Diagnostic & treatment scales
  - Published research literature
  - Open access; registration not required

http://medicaidmentalhealth.org/
MDTMP for Behavioral Health

3. Create robust set of data:
   – to inform development of future guidelines
   – to identify gaps in care and areas of improvements
   – to track long-term outcomes of antipsychotic prescribing
   – identify unusual practices
   – relate antipsychotic prescribing to physical health outcomes
Advantages for Plans

• Providers have access to current Evidence-Based guidelines to guide treatment decisions
• Providers have access to Board-Certified pediatric and adolescent psychiatrists for medical opinions
• Promotes clinical improvement for children
• Reduces clinical risk for plans — demonstrates adherence to best practice guidelines
EXPERTISE IMPROVES

- Safety
- Quality
- Cost
- Outcomes
Results: FY 07-08 to Present

Child Antipsychotic Scripts Down

Number of antipsychotic prescriptions written for children

4.8%
Results: FY 07-08 to Present
Child Antipsychotic Scripts Down

Number of children prescribed antipsychotic meds

41%
Results: FY 07-08 to Present
Requests for Second Medical Reviews Dramatically Decreased

500
Q2 2008

<100
Q1 2014
Contact Information

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