



# Quality Of Care And Health Care Utilization Among Children And Young Adults Using Antipsychotics Enrolled In Mississippi Medicaid

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## BACKGROUND

In March 2015, the Office of the Inspector General (OIG) issued a report titled, "Second-Generation Antipsychotic Drug Use Among Medicaid-Enrolled Children: Quality-of-Care Concerns."<sup>1</sup> Seven criteria for evaluating quality of care were established on the basis of information and guidelines issued by various Federal and State agencies and professional associations regarding the prescribing of psychotropic drugs to children.

**Objective:** The purpose of this project was to identify antipsychotic (AP) quality measures related to OIG's criteria and to test measure performance in the eligible Mississippi Medicaid population.

## METHODS

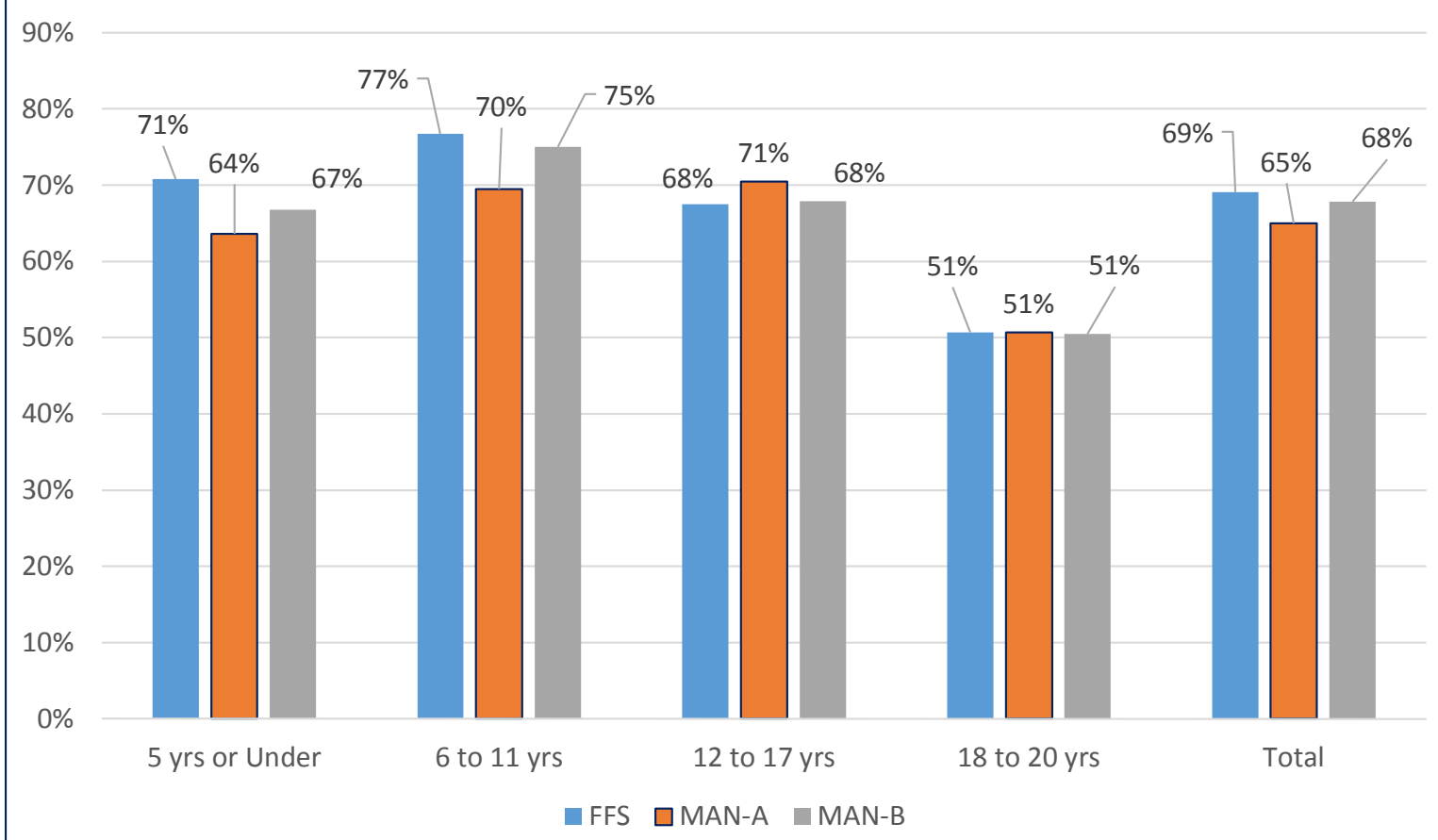
A retrospective analysis was performed using Mississippi Medicaid data for calendar year 2014.

- Individuals below age 21 years at the end of 2014 with at least one month of eligibility in Medicaid and one or more antipsychotic prescription claims were included in each analyses.
- Measure specifications proposed by the National Collaborative for Innovation in Quality Measurement and developed by HEDIS were used to address OIG identified areas.

## RESULTS

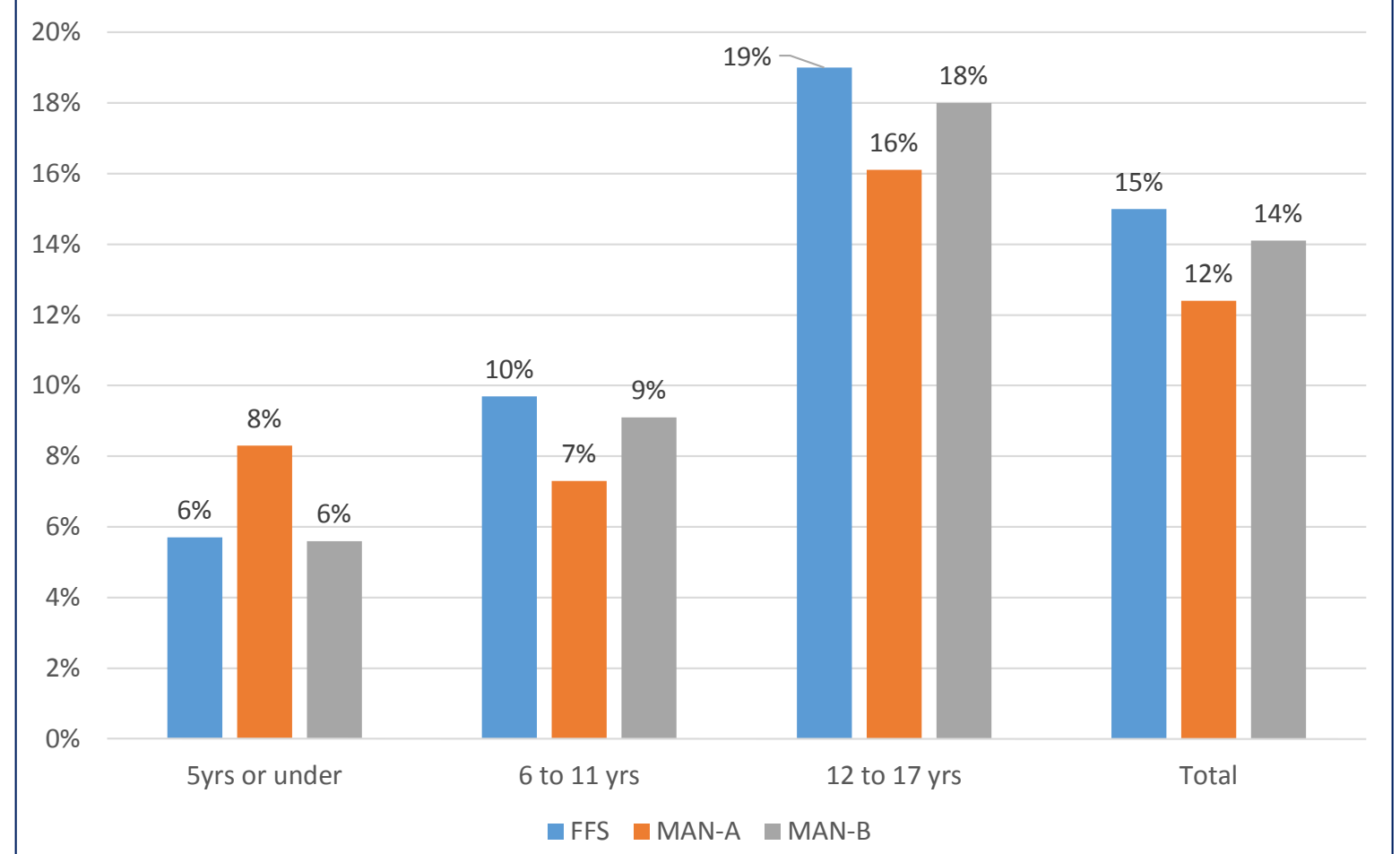
A total of 19,009 eligible beneficiaries were identified as taking at least one antipsychotic prescription during the study period. The sample was comprised of 51% females, 54% African Americans, and 44% Caucasians.

Figure 1: NCINQ Measure - Percent of Children Taking Antipsychotics Who Do Not Have a Primary Indication for Antipsychotic Use



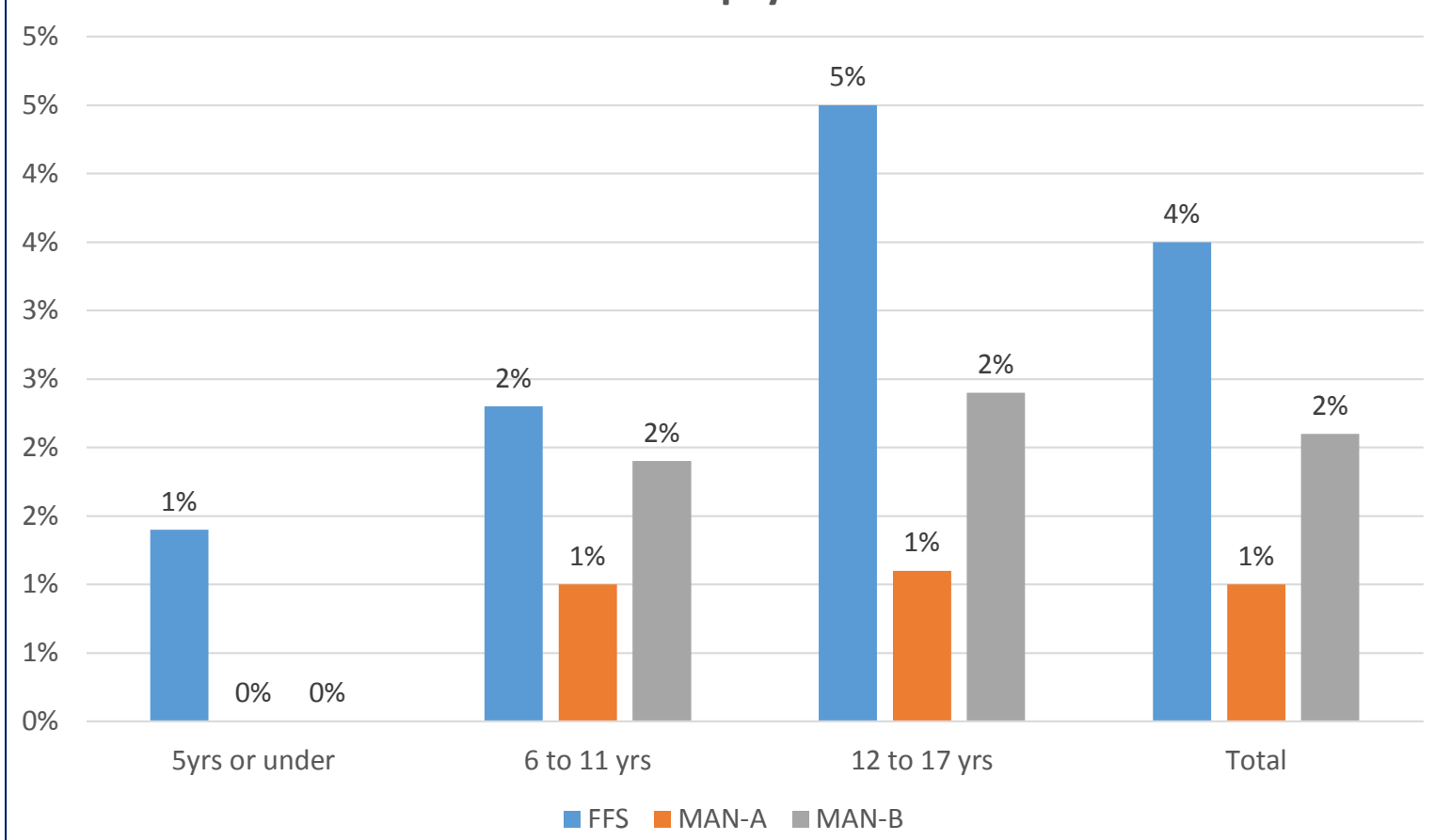
Overall, approximately 68% of the children prescribed antipsychotics did not have a medical claim with a primary indication supporting use. This rate was not impacted by age of the child or by type of Medicaid pharmacy program (FFS vs. managed care).

Figure 2: HEDIS Measure - Percent of Children On New AP Prescriptions Who Had One or More Follow-up Visits



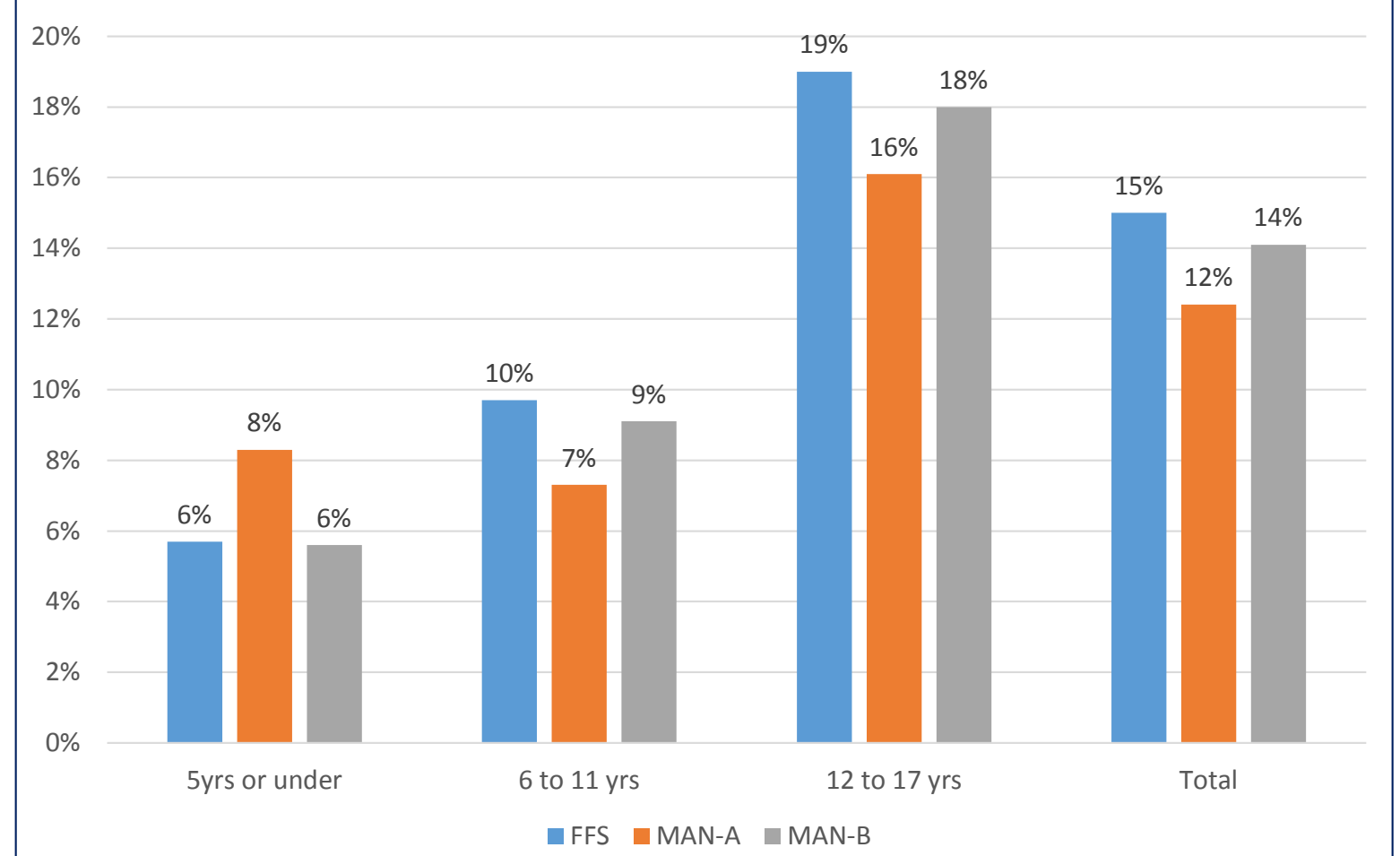
Overall, only 14% of children starting a new antipsychotic prescription had a follow-up office visit within 30 days. This rate varied somewhat among Medicaid pharmacy programs and by age of the child.

Figure 3: HEDIS Measure - Percent of Children Taking Antipsychotics Who Were on Two or More Concurrent Antipsychotics



Overall, 3% of children prescribed antipsychotics took two or more antipsychotics concurrently for more than 90 continuous days. This rate was higher in the FFS program. This may be due to the measure not excluding children in residential programs who are in the FFS program.

Figure 4: HEDIS Measure - Percent of Children Starting Antipsychotics Who Had Baseline Metabolic Screening



Overall, 14% of the children initiating antipsychotics received baseline metabolic screening. This rate varied somewhat across Medicaid pharmacy programs and increased with the age of the beneficiary.

## DISCUSSION

Study results indicate considerable opportunity for improvement in quality of care identified in the OIG report. Several challenges exist in this area include health care access, continuity of care, and awareness of quality measures amongst providers.

## REFERENCES

1. Office of Inspector General. Second-Generation Antipsychotic Drug Use Among Medicaid-Enrolled Children: Quality-of-Care Concerns. March, 2015. Available at: <http://oig.hhs.gov/oei/reports/oei-07-12-00320.pdf>

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