EDUCATION ON PRESCRIBING OF TRICYCLIC ANTIDEPRESSANTS
- EDUCATIONAL INTERVENTION -
Mailing conducted May 2020

BACKGROUND

Tricyclic antidepressants (TCAs) have well documented safety risks associated with their use, particularly in children, adolescents and young adults. These agents can be especially lethal when taken in an overdose and have limited FDA indicated or compendia supported use in children and adolescents. In December 2019 the DUR Board recommended changes related to the prescribing of TCAs. Beginning July 2020 DOM implemented a prior authorization (PA) requirement for patients age less than 25 years who were prescribed TCAs.

MAILING

Retrospective analysis of MS Medicaid administrative claims data from a six month period prior to the implementation identified beneficiaries below the age of 25 years that were prescribed TCAs. Letters were mailed to 507 providers impacting approximately 1,220 beneficiaries.

A copy of the educational mailing materials distributed is below.

May 4, 2020

IMPORTANT NOTICE REGARDING PRESCRIBING CHANGES FOR TRICYCLIC ANTIDEPRESSANTS

Dear Medicaid Prescriber:

In accordance with the Drug Utilization Review (DUR) Board's December 5, 2019 recommendations for changes related to the prescribing of tricyclic antidepressants (TCAs), the Division of Medicaid is planning to implement a prior authorization (PA) requirement for patients age less than 25 years who are prescribed TCAs. This recommendation is based on safety risks associated with tricyclic antidepressant use in children, adolescents and young adults. The FDA has issued and revised a black box warning related to antidepressant use in this age group. TCAs are especially lethal when taken in overdose. Please prescribe the lowest effective dose in the smallest quantity possible. Current clinical practice guidelines support SSRI use as first-line therapy in treatment of child and adolescent depression and anxiety. (See revised FDA Boxed Warning related to antidepressants below)

Suicidality and Antidepressant Drugs

Antidepressants increased the risk compared to placebo of suicidal thinking and behavior (suicidality) in children, adolescents, and young adults in short-term studies of major depressive disorder (MDD) and other psychiatric disorders. Anyone considering the use of [Insert established name] or any other antidepressant in a child, adolescent, or young adult must balance this risk with the clinical need. **Short-term studies did not show an increase in the risk of suicidality with antidepressants compared to placebo in adults beyond age 24**; there was a reduction in risk with antidepressants compared to placebo in adults aged 65 and older. Depression and certain other psychiatric disorders are themselves associated with increases in the risk of suicide. Patients of all ages who are started on antidepressant therapy should be monitored appropriately and observed closely for clinical worsening, suicidality, or unusual changes in behavior. Families and caregivers should be advised of the need for close observation and communication with the prescriber. [Insert Drug Name] is not approved for use in pediatric patients. *[The previous sentence would be replaced with the sentence, below, for the following drugs: Prozac: Prozac is approved for use in pediatric patients with MDD and obsessive compulsive disorder (OCD). Zoloft: Zoloft is not approved for use in pediatric patients except for patients with obsessive compulsive disorder (OCD). Fluvoxamine: Fluvoxamine is not approved for use in pediatric patients except for patients with obsessive compulsive disorder (OCD).] (See Warnings: Clinical Worsening and Suicide Risk, Precautions:*

You have been identified as a prescriber of a TCA during the past six months for a Medicaid beneficiary below the age of 25 years. Once the minimum age edit requirement is implemented, any TCA prescription for beneficiaries below age 25 years will require processing through Medicaid's Universal Prior Authorization form request. Prescribers of TCA's for patients less than 25 years of age will also need to attest on this form that the medical necessity outweighs the risk for this/these medication(s). The Universal Prior Authorization form can be found at https://medicaid.ms.gov/providers/pharmacy/pharmacy-prior-authorization/.

Additionally, prescribers are encouraged to note the diagnosis on the prescription and pharmacists are encouraged to submit the diagnosis as part of the prescription claim for the purpose of DUR/CMS quality measure reporting.

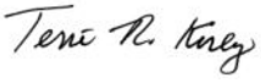
Evidence-Based DUR Initiative

A list of your patients that will be impacted by this age requirement is included. The Division of Medicaid is informing prescribers of this change in advance. Advance knowledge of this change for the projected July 2020 implementation date should allow adequate time to plan appropriately for uninterrupted care of your patients. You may submit prior authorization requests before the age requirement is implemented.

If we can be of any assistance, please do not hesitate to contact us.

Sincerely,

Carlos A. Latorre, MD, FAAFP
Medical Director
Mississippi Division of Medicaid



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Mississippi Division of Medicaid

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MS-DUR

Beneficiary Name	Beneficiary Plan
BENEFICIARY 1	BENE 1 PLAN
BENEFICIARY 2	BENE 2 PLAN
BENEFICIARY 3	BENE 3 PLAN
BENEFICIARY 4	BENE 4 PLAN
BENEFICIARY 5	BENE 5 PLAN