



NCINQ *Antipsychotic Medication Use Measures for Children and Adolescents*

The Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) established the Pediatric Quality Measures Program (PQMP), an initiative funded by the Agency for Healthcare Research and Quality (AHRQ) and the Centers for Medicare & Medicaid Services (CMS) to support the development of new measures in child health care.

The CHIPRA PQMP established seven Centers of Excellence: multi-center collaboratives working to increase the portfolio of measures that can be used by states, consumers and policymakers to understand and improve the quality of health care for children in Medicaid and CHIP. The National Committee for Quality Assurance, together with its partners, leads one of these Centers: the *AHRQ-CMS CHIPRA National Collaborative for Innovation in Quality Measurement (NCINQ)*. Collaborating organizations include Nationwide Children's Hospital; New York University and the New York State Office of Mental Health; the National Partnership for Women & Families; the American Academy of Pediatrics; Rutgers, the State University of New Jersey; and a broad network of health plans, providers, and consumers.

Proposed Measures for Antipsychotic Medication Use

Antipsychotic medication use is an area of interest for measures development given their increased use in children and adolescents and potentially harmful health effects. While these medications offer the potential for effective treatment of psychiatric disorders, they can also increase a child's risk for developing health concerns such as metabolic and physical complications. Working in coordination with MEDNET, another AHRQ-funded effort to promote quality, NCQA developed a set of measures assessing the use of antipsychotic medications in a general population of children as well as those in the foster care system. The measures will be considered for use by state and federal programs.

NCINQ is seeking feedback to assess the measures' importance, usability and understandability. Attached specifications are for state-level reporting using administrative data. Measures assess whether needed follow-up care occurred in children who are taking antipsychotic medications as well as potential overuse of medications, which reflect concerns heard from stakeholders including state Medicaid directors, consumer advocates and families.

Measures to Assess Appropriateness/Overuse of Medications

1. Children on Higher than Recommended Doses of Antipsychotics
2. Use of Antipsychotics in Very Young Children
3. Use of Multiple Concurrent Antipsychotics in Children
4. Use of Antipsychotics in Children without a Primary Indication

Measures to Assess Use of Needed Services Associated with Medication Use

5. Follow-Up Care for Children on Antipsychotics
6. Metabolic Screening for Children on Antipsychotics
7. Access to Psychosocial Care for Children on Antipsychotics

About NCINQ's Measure Development Process

NCINQ employs a multi-step process that includes working with a wide range of stakeholders to prioritize measure topics and define and test measures. NCINQ considers the importance and prevalence of the condition being assessed, whether measures inform access to care or quality improvement efforts, and the feasibility of collecting and reporting the data. NCINQ's stakeholders include patients and families, clinicians, state Medicaid officials, and experts in the field of child health. This process ensures measures are reasonable and important to those using them.

Feedback Needed

While reviewing this measure set, questions to consider include the following.

- Are these measures important to inform state-level quality improvement activities?
- Do these measures address critical concerns for Medicaid and CHIP?
- Do these measures address critical concerns for children in the foster care system?
- Are the measure specifications clear and understandable?
- Is information required to calculate these measures available?
- Do these measures reflect realistic clinical processes and workflow?

Additional questions are listed in the draft specifications document.

Supporting Documents

Draft Specifications, Literature and Guideline Review, Preliminary Performance Results

NCINQ thanks its advisory panels for their input on this work.

Mississippi Division of Medicaid / MS-DUR Presentations at National Conferences

Drug Information Association Annual Meeting – Boston, MA, June, 2013

Ramachandran S, Banahan BF III, Null KD, Clark JP, Minor DS. ***Estimating The Risk Of Angioedema Associated With Use Of Dipeptidyl-Peptidase Inhibitors.*** (Submitted – Being Reviewed)

International Society for Pharmacoeconomic and Outcomes Research Annual Meeting – New Orleans, LA, May, 2013

Ramachandran S, Yang Y, Hardwick SP, Clark JP, Null K, Banahan BF III. ***Patterns of Use of Atypical Antipsychotics in Children and Young Adults.*** PMH65.

Shah R, Banahan BF III, Hardwick SP, Clark JP. ***Need for Case-Mix Adjustment in Evaluating Geographic Disparities in Medication Adherence to Oral Hypoglycemics.*** PDB66.

Datar M, Null KD, Hardwick SP, Clark JP. ***Evaluation of Asthma-Related Pharmacy Quality Alliance (Pqa) Measures In The Mississippi Medicaid Population.*** PRS50.

Datar M, Banahan BF III, Hardwick SP, Clark JP. ***Analysis of the Impact of Prescription Synchronization on Adherence Among Medicaid Beneficiaries.*** PCV102.

Academy of Managed Care Pharmacy National Spring Meeting – San Diego, CA, April, 2013

Null KD, Banahan BF III, Clark JP, Hardwick SP. ***One State Medicaid's Strategy to Overcome Limitations to a Prescription Drug Cap Policy Using a 90 Day Maintenance List.***

International Society for Pharmacoeconomic and Outcomes Research Annual Meeting – Washington, DC, June, 2012

Athavale AS, Banahan BF III, Hardwick SP, Clark JP. ***Are You Counting Prescription Medications Utilization Correctly?*** PRM6.

Datar M, Banahan BF III, Null KD, Hardwick SP, Clark JP. ***Palavizumab (Synagis) Use and Outcomes Among Medicaid Beneficiaries.*** PRS39.

Przybyla SM, Banahan BF III, Null KD, Hardwick SP, Clark JP. ***HIV Treatment Guideline Compliance Among Treatment-Naïve Mississippi Medicaid Adult Beneficiaries.*** PIN62.