# Empirical Validity of the Quality Measure 'Adherence to Antipsychotic Medications for Individuals With Schizophrenia' Among Medicaid Beneficiaries

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## Background

- Nonadherence to antipsychotic medications is a major concern among the schizophrenia population.
- SAA quality measure[1] – measures adherence to antipsychotics using Proportion of Days Covered (PDC)
- Nonadherence to antipsychotic medications among schizophrenia patients is associated with increased healthcare resource use.[2-4]

## Objectives

- Estimate the performance on the SAA quality measure.
- Examine the association between the SAA measure performance and healthcare resource utilization in Mississippi Medicaid.

## Methods

- Data source: Mississippi Medicaid medical and pharmacy claims (fee-for-service (FFS) and coordinated care organizations (CCOs)).
- Study period: January 1st,2020 – December 31st, 2021.
- Beneficiaries aged 18 years and older with a diagnosis of schizophrenia or schizoaffective disorder were identified.
- CY 2020 (measurement year) - assessment of SAA quality measure; individuals with PDC 80% and above during treatment period.
- CY 2021 (follow-up period) – outcomes: mental health-related hospitalization, all-cause hospitalization, mental health-related ER visits and all-cause ER visits.
- Data Analysis: Multivariable logistic regression to assess adherence to antipsychotic medications and mental health-related and all-cause hospitalizations and ER visits.

## Results

- Among beneficiaries with schizophrenia or schizoaffective disorder, 54% (N= 2008) were considered adherent.
- Individuals who were adherent to antipsychotic medications had 42.3% lower odds of mental health-related hospitalization.
- Individuals who were adherent to antipsychotic medications had 21% lower odds of an all-cause ER visit.

**Patients with Schizophrenia who were adherent to antipsychotic medications had 42.3% and 21% fewer odds of having a mental health hospitalization and an all-cause ER visit, respectively.**

**Figure 1. Description of study design for patients with schizophrenia on antipsychotics**

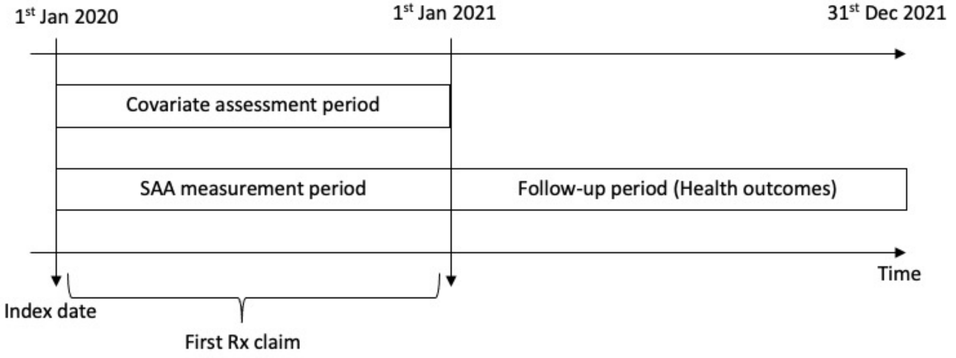


**Table 1: Association between Adherence to Antipsychotic medication and Mental Health Related Hospitalization and ER visits**

| Mental Health Hospitalization | | | |
|---|---|---|---|
| | OR | 95% Wald CI | |
| Adherence | 0.577 | 0.412 | 0.807 |
| **Mental health ER Visit** | | | |
| | OR | 95% Wald CI | |
| Adherence | 0.736 | 0.483 | 1.123 |

*Footnote: other covariates were included in the model but not shown here*

**Table 2: Association between Adherence to Antipsychotic medication and All-cause Hospitalization and ER visits**

| All-cause Hospitalization | | | |
|---|---|---|---|
| | OR | 95% Wald CI | |
| Adherence | 1.094 | 0.846 | 1.413 |
| **All-cause ER Visit** | | | |
| | OR | 95% Wald CI | |
| Adherence | 0.79 | 0.645 | 0.968 |

*Footnote: other covariates were included in the model but not shown here*

## Conclusion

- SAA quality measure significantly predicted both mental health-related hospitalization and all-cause ER visit among Medicaid beneficiaries with schizophrenia treated with antipsychotics.
- Further research is needed to estimate the empirical validity of the measure with additional outcomes (i.e, healthcare cost) and in more states.

**KEY REFERENCES**

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## Acknowledgement and Disclosures

*The work reported was conducted by the MS-DUR program in the Center for Pharmaceutical Marketing and Management as part of the retrospective drug use analysis activities conducted under contract with the Mississippi Division of Medicaid. The views expressed are those of the authors and do not necessarily reflect those of the Mississippi Division of Medicaid or the University of Mississippi.*