**INTRODUCTION**

- Increasing concerns regarding obesity and diabetes emergence in younger populations are heightened for youth prescribed antipsychotic medications due to adverse metabolic and other physical effects.
- A multi-year study that enrolled in three health maintenance organizations found that exposure to atypical antipsychotics was associated with a fourfold risk of diabetes in the following year, compared to children not prescribed psychotropic medication.
- Monitoring of metabolic indices is important to ensure the appropriate management of side effect risks, especially in children and adolescents.
- In 2013, the National Collaborative for Innovation in Quality Measurement (NCINQ) proposed that a measure of metabolic monitoring for children taking APs be considered for use in Medicaid and CHIP programs.

**OBJECTIVE**

To evaluate how the MS Medicaid program performs on the NCINQ proposed quality measure for metabolic monitoring of children on Antipsychotics.

**METHODS**

- A retrospective analysis was conducted using Mississippi Medicaid medical and pharmacy claims data and beneficiary eligibility data for July 2013 through June 2014.
- Both fee-for-service (FFS) and managed care claims were used for the analysis.
- This measure addresses “the percentage of children 0 to 20 years of age on any antipsychotic who had metabolic screening documented during the measurement year”.

**RESULTS**

Health plans included in the analysis are Mississippi Medicaid fee for service (FFS) (N = 6,163) and the two pharmacy benefit plans (N = 1,101) and Magnolia (N = 1,648). The percentage of beneficiaries receiving the metabolic monitoring tests doesn’t seem to differ much across the health plans. For the overall population, 30% had a blood glucose test, 14% had a cholesterol test, and only 13% had both tests (Table 1).

Table 1: Metabolic Monitoring in Children Taking Antipsychotics

<table>
<thead>
<tr>
<th>Test</th>
<th>No of Beneficiaries (N= 8,912)</th>
<th>Percentage of Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood glucose test</td>
<td>2,469</td>
<td>29.9%</td>
</tr>
<tr>
<td>Cholesterol test</td>
<td>1,268</td>
<td>14.1%</td>
</tr>
<tr>
<td>Both tests</td>
<td>1,162</td>
<td>13.0%</td>
</tr>
</tbody>
</table>

**CONCLUSION**

Based on the performance ratings for the last year, the Mississippi Medicaid program currently has a performance rating on metabolic monitoring for children taking antipsychotic medications that is barely above the 25th percentile for Medicaid programs. Since this is an important quality of care measure being developed by CMS, it was determined that some action was needed to improve our performance on this measure.

Although a hard clinical edit using electronic prior authorization in the pharmacy point-of-sale (POS) system could assure compliance, this was not considered to be a viable approach due the potential for causing breaks in therapy for a critical mental health condition. Since metabolic monitoring can occur at any time during the year, the only practical way to achieve improvement in performance on this quality measure will be through provider education. A provider education program was implemented in March 2015.

**REFERENCES**