P-1122 - TRANSPARENT EVIDENCE-BASED, PHYSICIAN APPROVED SMART DRUG UTILIZATION REVIEW

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Introduction: Childhood use of antipsychotics in the U.S. has grown dramatically over the past decade. In North Carolina (NC), roughly 20 thousand children under the age of 18 covered by Medicaid have filled more than $40 million in prescriptions for antipsychotics in the last year. Traditionally the primary mechanism of controlling drug use has been through prior authorization and determination of appropriate use through medical and pharmacy claims.
Objective: Determine if an online safety monitoring system can be successfully deployed without significant prescriber disruption.
Aims: Increase monitoring and best practice management of undesirable metabolic effects of current treatment regimens.
Methods: North Carolina Medicaid designed an online safety monitoring system that collects prescribing intentions and monitoring activities for children under the age of 18 and is tied to the pharmacy point-of-sale system. A comprehensive educational effort that included promotion of monitoring best practices and assistance with registration in the online system was endorsed by the professional medical societies and deployed using experts from four medical schools in NC. Data regarding call center activity were collected at the time of support and combined with data from the online documentation system. Claims data were examined to determine delays in time to refill medications.
Results: By the end of the first three months, the online system had been used by prescribers 87% of the time for antipsychotics with little evidence of delays in filling the scripts.

https://doi.org/10.1016/S0924-9338(12)75289-6 Published online by Cambridge University Press