



Minnesota Department of **Human Services**

Drug Utilization Board

Minutes of March 8, 2006 Meeting

Final

Members present

Dr. Pierre Rioux, M.D., Dr. Tim Ronneberg, Ruth Buchmayer, R.Ph., Marilyn Ulseth, MS, RN, CNI, Ann Martin, CNP, Wendy St. Peter, Pharm.D., and Christine Ziebold, M.D.

DHS Staff present

Mary Beth Reinke, Pharm.D., Richard Doering, Pharm.D., Liz Schiller, Erin Schreiber.

Others present

Dr. David Adson, M.D., Clinical Lead, Sharon Autio, DHS Division Director of Mental Health, Benton Goon and Dr. Judy Dogin, M.D., both from CNS, Comprehensive NeuroScience.

Call to order

The meeting was called to order by Chairman Buchmayer.

Approval of the minutes

The minutes for the December 14, 2005 DUR Board meeting were approved.

Department opening remarks

Representatives from CNS were introduced. CNS presented (1) a status report of the mental health medication management project and (2) the 2006 Adult Quality Indicators.

Old business

The discussion of the additional demographic information provided on the Cardiovascular Disease Management outcomes report will be tabled until the next meeting. The other item of old business, the unexplained high level of compliance in the drug regimen simplification outcomes, may or may not be explained by pharmacies "pre-filling" prescriptions. It was reported no definitive DHS policy exists regarding this.

New business

Mr. Goon provided the overview of 2006 categories: high risk, redundancy, continuity and coordination of care, and antipsychotics. The educational component changed in both format and content. What used to be "clinical pearls", a paragraph in length, with a corresponding multipage "monograph" (which Minnesota did not use) is now changed to a one-page "clinical considerations" with the following column headings: clinical issue, clinical considerations, and corresponding references. In 2006, there will be two sets of Top 200 physicians using "adult" and "child" indicators in alternating monthly mailings.

Additionally, the educational component will include not only peer-to-peer consultations but also group presentations to select providers or organizations.

Mr. Benson reported that the preliminary trend for the 2005 outcomes appears favorable.

Dr. Judy Dogin presented the 2006 Adult Quality Indicators and their corresponding rationale. A few of the clinical indicators were totally new but most were revised from the



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previous year's existing indicators (i.e. overlap of 45 days or an overlap of 60 days). Noteworthy, the reference doses employed for the "high dose" atypical antipsychotic indicator changed from FDA-approved doses in 2005 to the highest dose from accepted guidelines in 2006.

Table 1. High Dose Threshold per Atypical Antipsychotic

Drug	High-2006	Old High-2005
Clozapine	900 mg	900 mg
Risperidone	6 mg	6-8 mg
Olanzapine	30 mg	20 mg
Quetiapine	800 mg	800 mg
Ziprasidone	200 mg	160 mg
Aripiprazole	30 mg	30 mg

Next, the recommendations of the DUR Board subcommittee, Dr. Pierre Rioux, and of the clinical lead, Dr. David Adson, were presented. The *final approved* Adult Indicators for Minnesota for 2006 are:

High Risk

- Use of 5 or more psychotropics for 60 or more days
- Use of benzodiazepines at a higher than recommended dose for 60 or more days
- Use of an atypical antipsychotics at a higher than recommended dose for 45 or more days.
- Use of an atypical antipsychotics at a lower than recommended dose for 45 or more days [the department has requested a report prior to beginning to mail on this one].

Redundancy

- Use of 2 or more atypical antipsychotics – one at a lower dose and one at a higher dose for 60 or more days
- Use of 2 or more insomnia agents for 60 or more days
- Use of 2 or more SSRIs for 60 or more days
- Use of 3 or more antidepressants for 60 or more days

Continuity and Coordination of Care

- Use of 2 or atypical antipsychotics – both at a lower than recommended dose for 60 or more days.
- Switch of prescribed atypical antipsychotics for 45 days or more
- Failure to refill a newly prescribed antidepressant within 30 days of prescription ending
- Failure to refill any antipsychotic for 45 days or more
- Multiple prescribers of any antipsychotics for 45 days or more
- Multiple prescribers of the same class of psychotropics for 45 or more days

Antipsychotics

- Use of 3 or more antipsychotics for 45 or more days
- Use of 2 or more antipsychotics for 45 or more days.

There were no public comments. Next meeting date is Thursday, May 11, 2006 with Dr. Judy Dogin, M.D. returning to present the "child" quality indicators.