

*Comprehensive*  *NeuroScience*

***ALASKA BPM Conversation  
with  
Stakeholder Committee***

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The background is a solid dark blue color with several lighter blue, wavy, horizontal bands that create a sense of depth and movement. The text is centered horizontally and vertically.

# ***Welcome and Introductions***

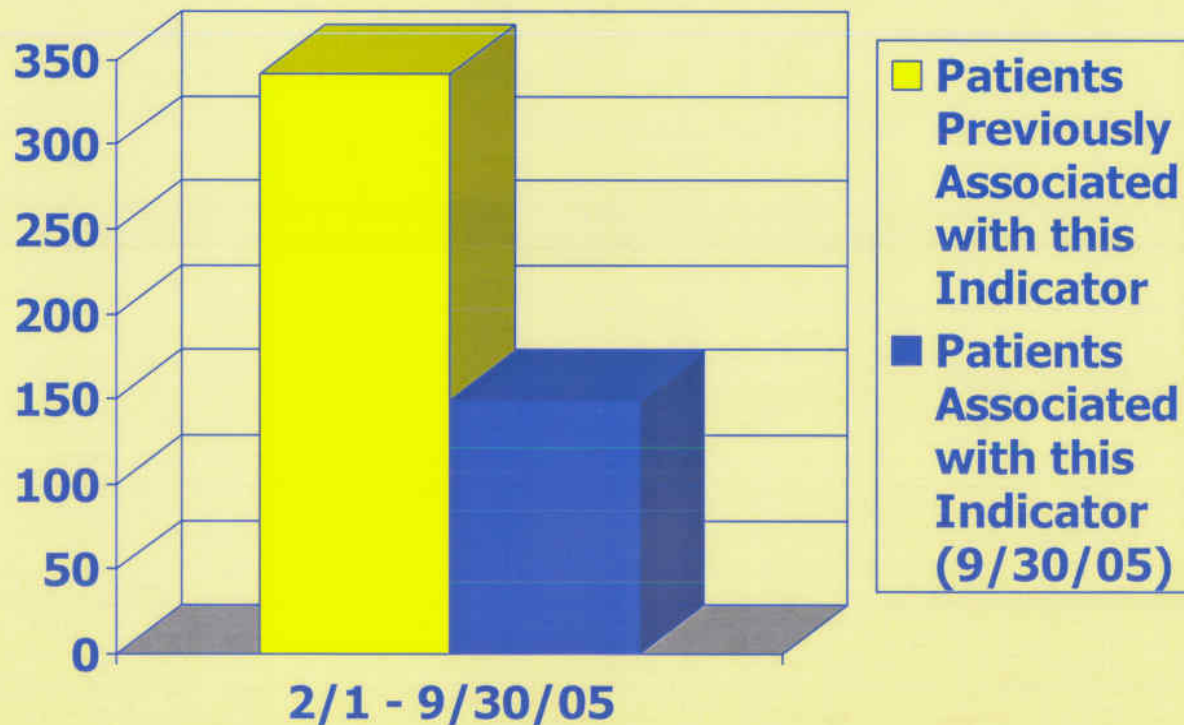
# BPM Results

## 2/05 through 11/05

- **Selected Patient Data**
- **Selected Prescriber Data**
- **Selected Executive Management Report Data**
- **Group Discussion**

# Quality Indicator: Children on 3 or More Psychotropics

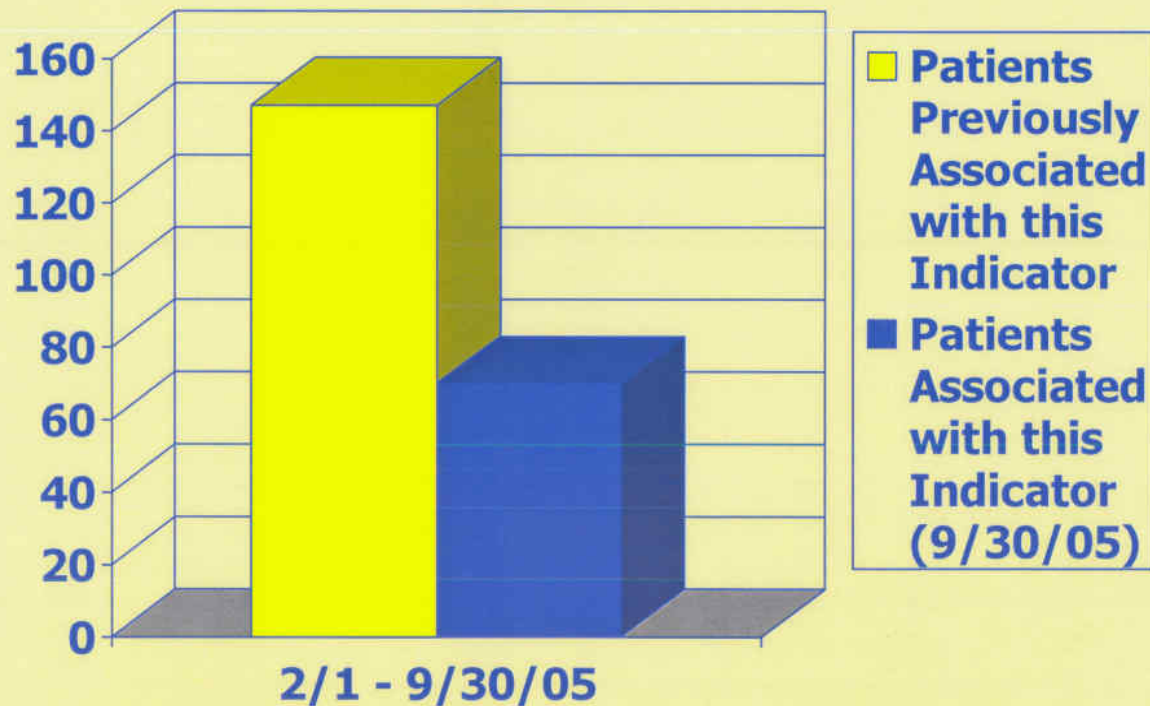
- The number of **patients** associated with this indicator decreased from 342 to 149 (56%).





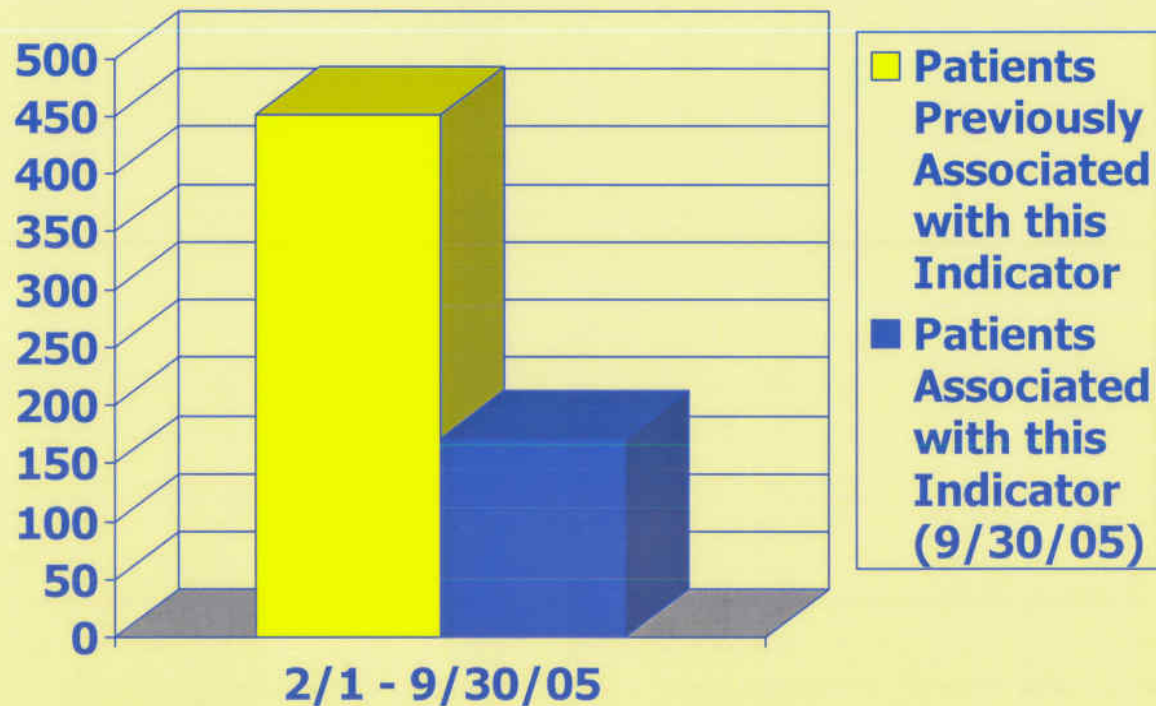
# Quality Indicator: Adults on 5 or More Psychotropics

- The number of **patients** associated with this indicator decreased from 147 to 70 (52%).



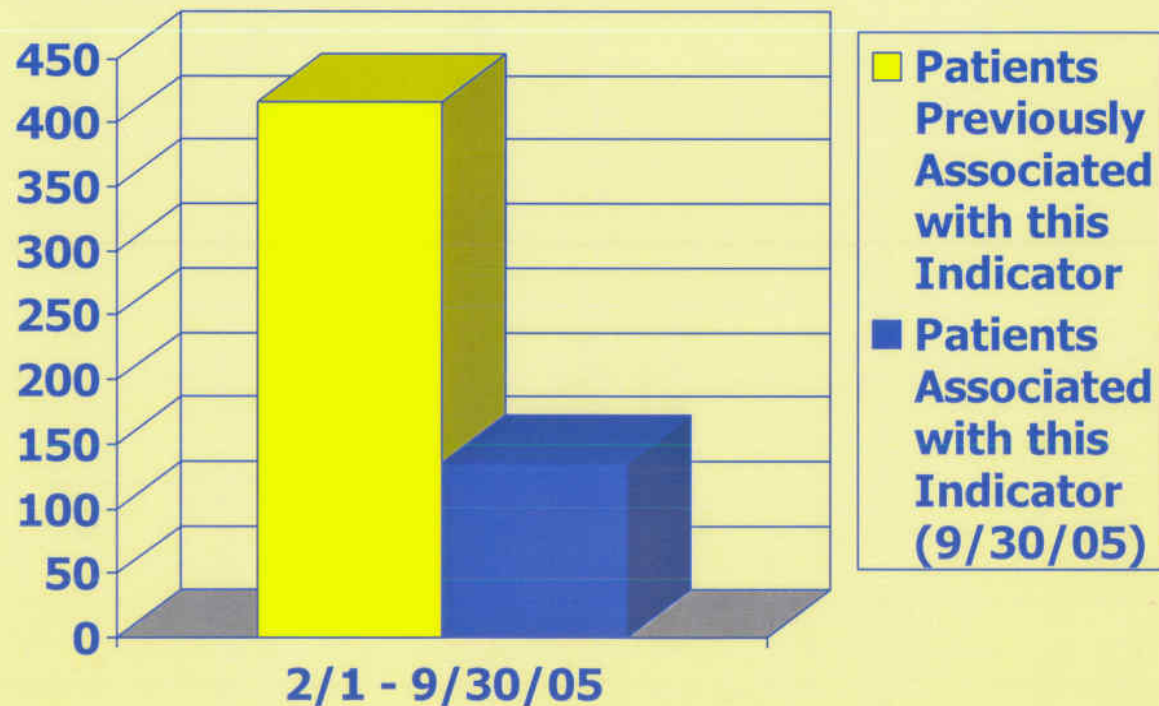
# Quality Indicator: Multiple Prescribers of Any Class of Drugs

- The number of **patients** associated with this indicator decreased from 452 to 172 (62%).



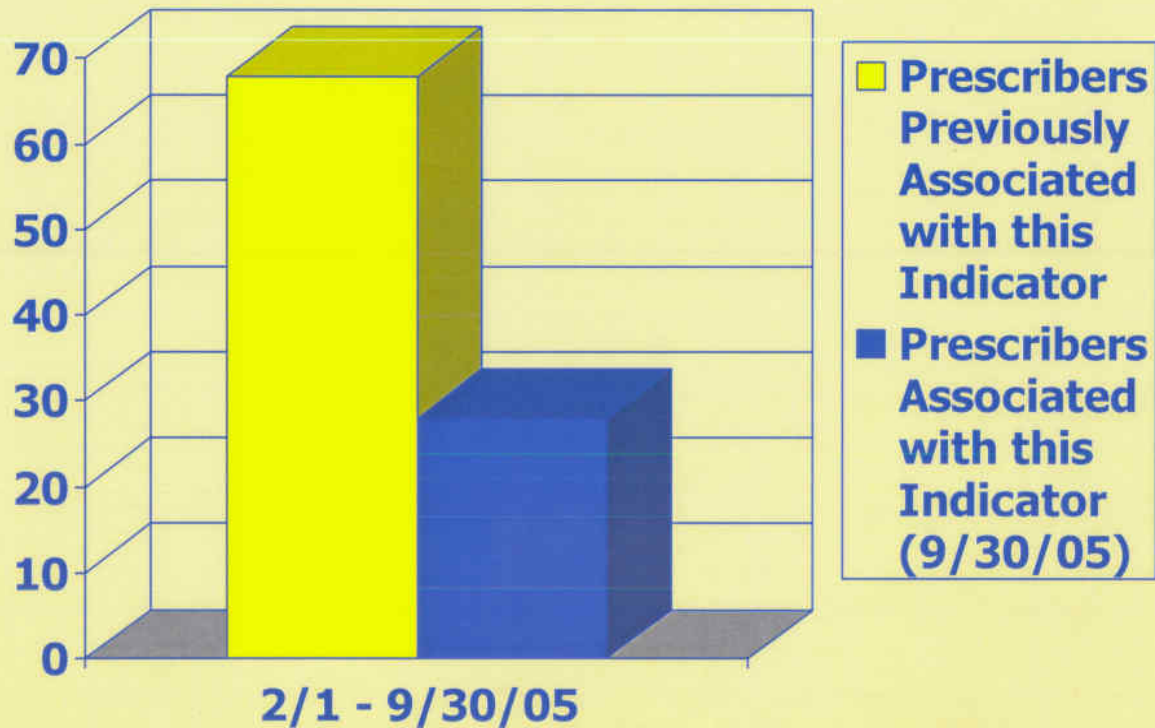
# Quality Indicator: Low Dose Use of Atypical Antipsychotics

- The number of **patients** associated with this indicator decreased from 417 to 136 (67%).



# Quality Indicator: Polypharmacy (various drug classes)

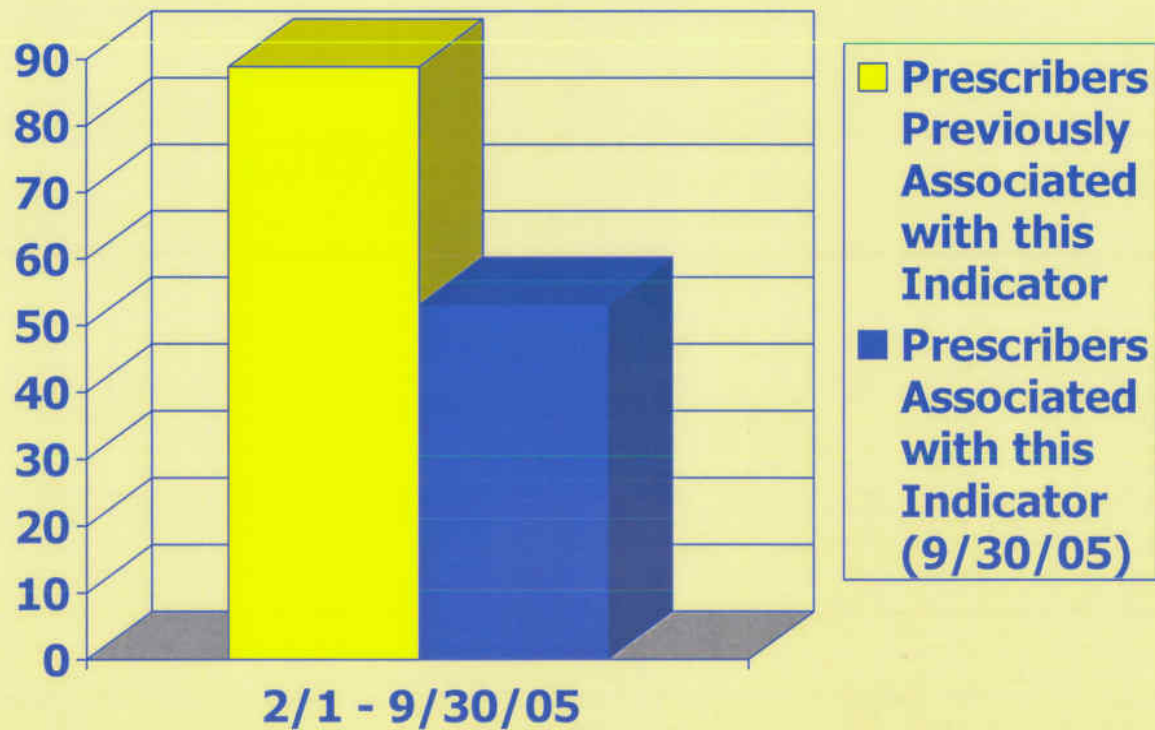
- The number of **prescribers** associated with this indicator decreased from 68 to 28 (59%).





# Quality Indicator: High Dose Use of Atypical Antipsychotics

- The number of **prescribers** associated with this indicator decreased from 89 to 53 (40%).

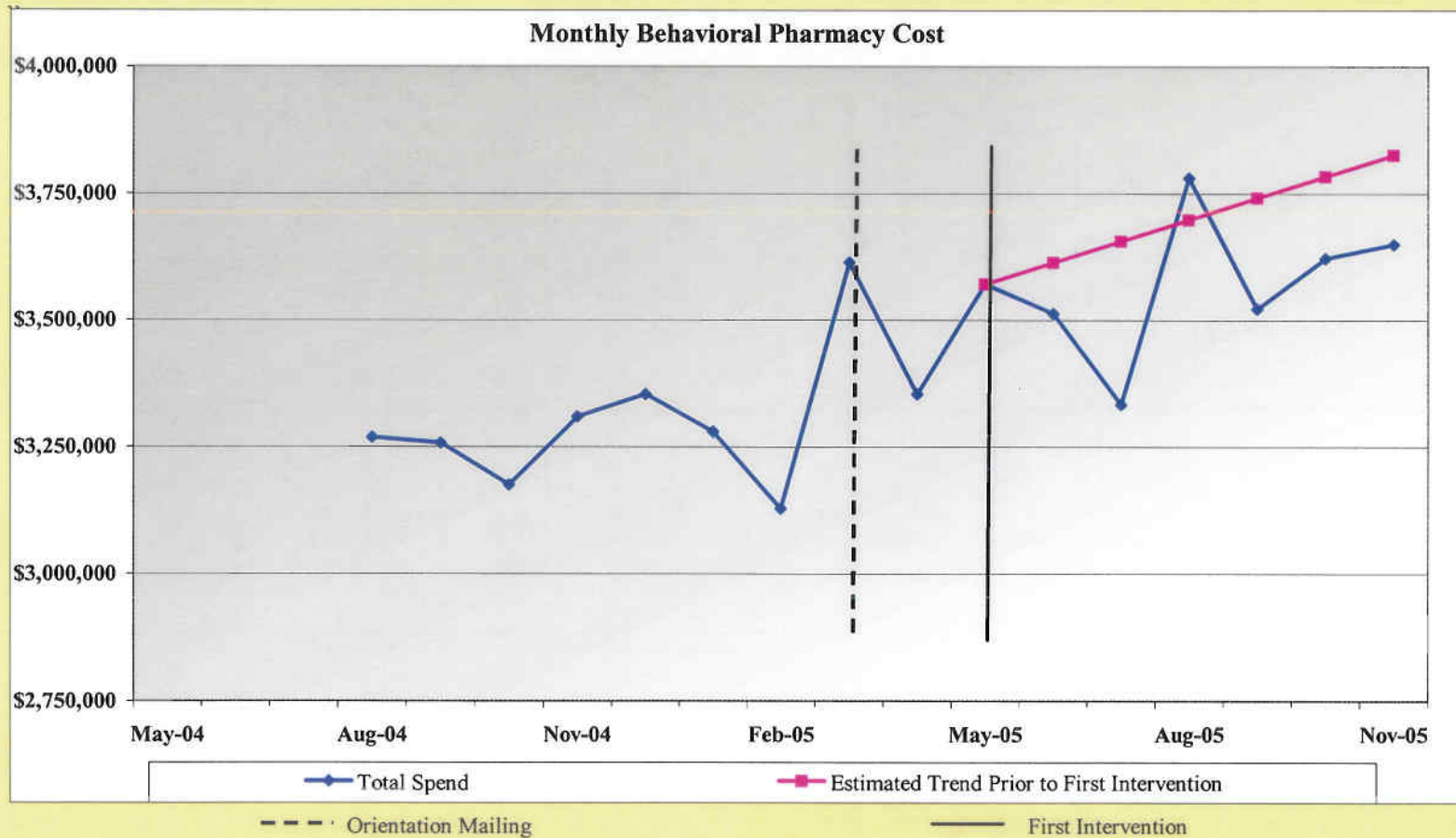


# Variance between Expected and Actual Monthly Behavioral Rx Claims Spend

## Executive Management Report

Alaska

May 2004 - November 2005



Note: Monthly average % change is 1.2% prior to First Intervention.  
Note: Descriptive data – not intended as a measure of CNS' intervention

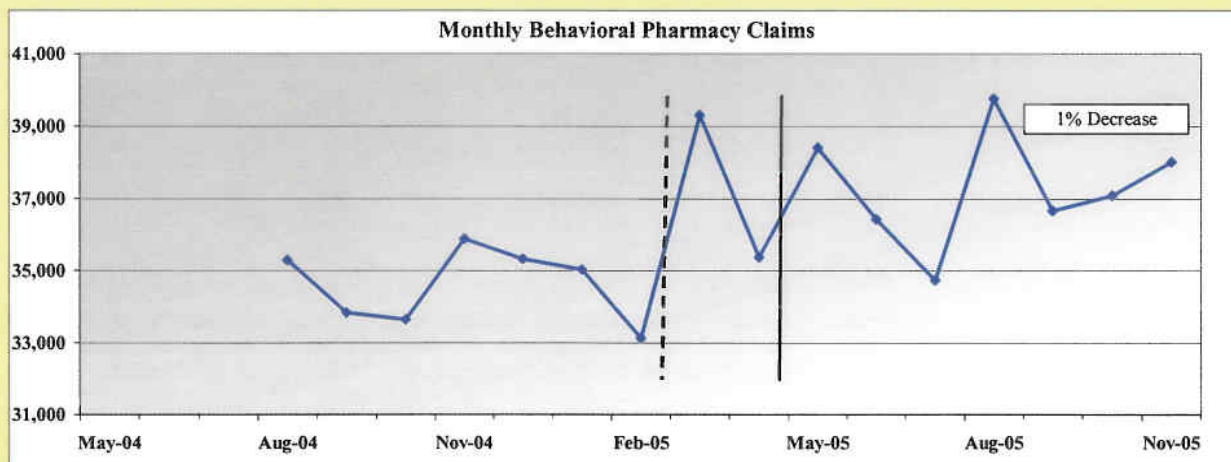
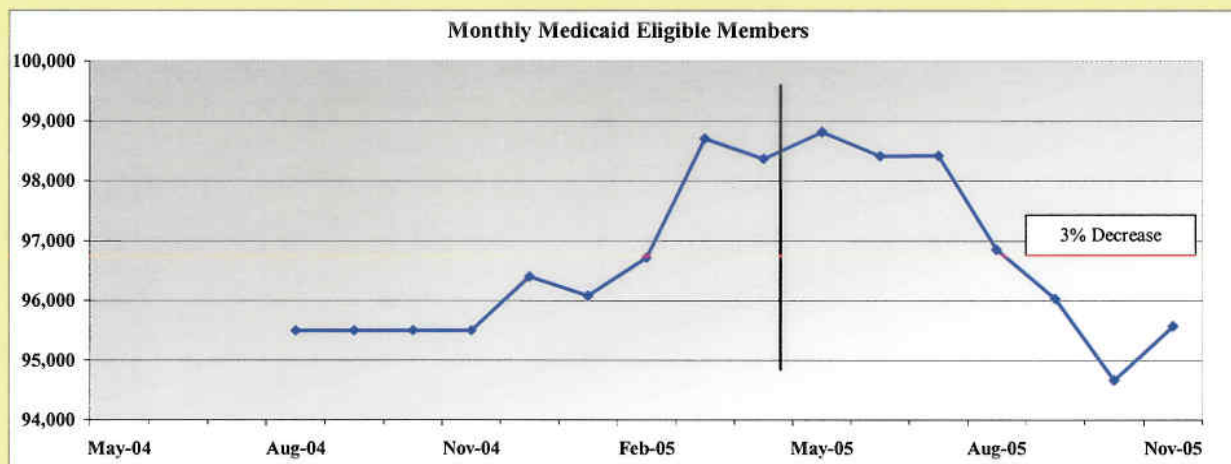


# Decrease in Monthly Behavioral Rx Claims

## Executive Management Report

Alaska

May 2004 - November 2005



--- Orientation Mailing

— First Intervention

Note: % change based on numbers at First Intervention and Current Month

Note: Descriptive data – not intended as a measure of CNS' intervention

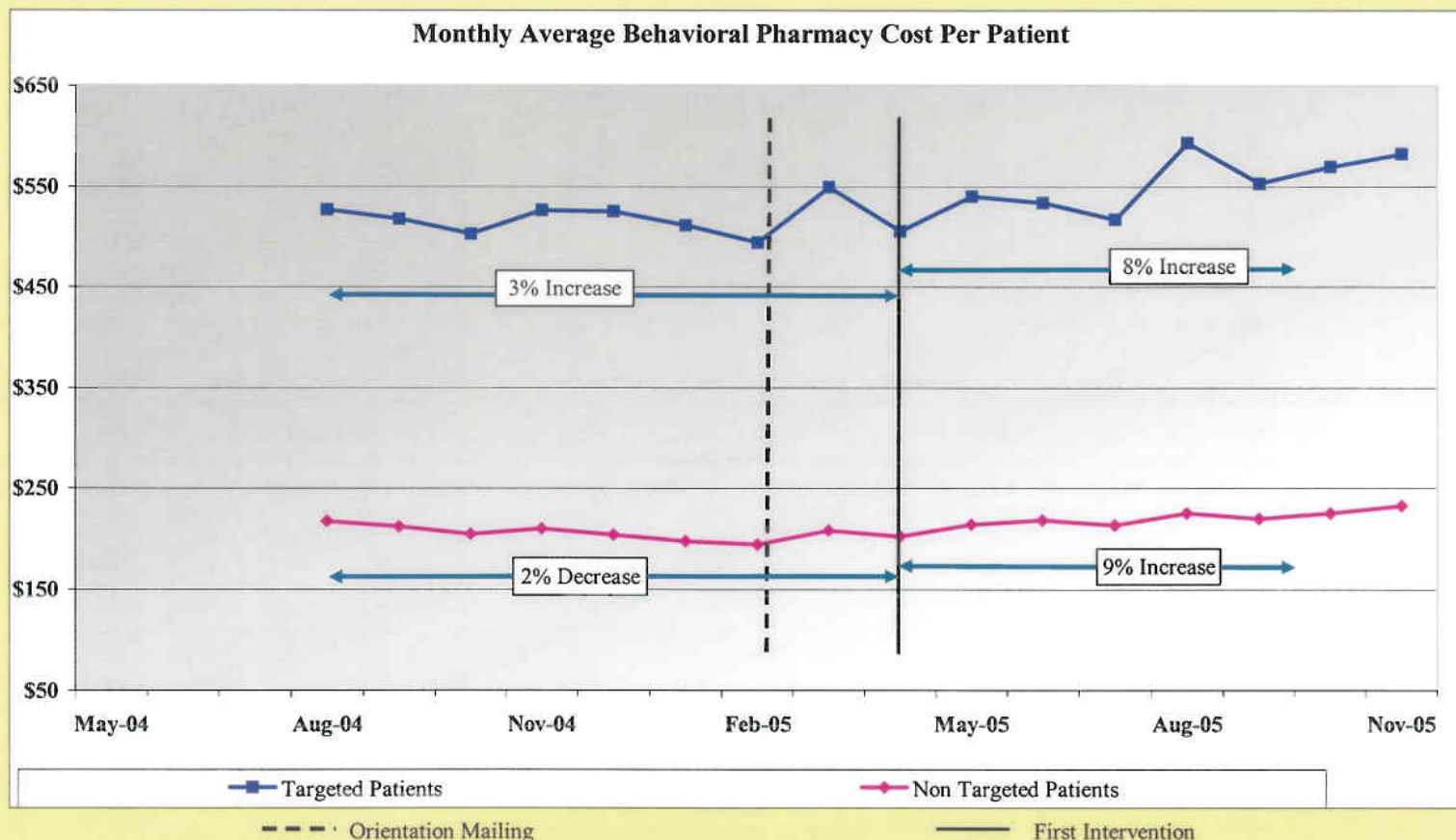


# Smaller Increase in Monthly Behavioral Rx Cost per Patient for "Targeted Patients"

## Executive Management Report

Alaska

May 2004 - November 2005



Note: % change prior to First Intervention based on August 2004 and May 2005 numbers

Note: % change after First Intervention based on May 2005 and Current month numbers

Note: Descriptive data – not intended as a measure of CNS' intervention





# Update on BPM '06

- **Selected New Quality Indicators:  
Child/Adolescents and Adults**
- **Selected Quality Indicator Preliminary  
Data**
- **Review of Sample Prescriber Packets**
- **Feedback and Suggestions**

## **BPM '06 Selected Child/Adolescent Data (11-1-05 through 1-31-06)**

- **Use of 5 or More Psychotropics During a 90 Day Period (Under 18 Years): 86 patients, 56 prescribers**
- **Use of 2 or More Antipsychotics for 45 or More Days (Under 18 Years): 43 patients, 27 prescribers**
- **Use of an Antipsychotic at Higher Than Recommended Dose for 45 or More Days (Under 18 Years): 119 patients, 55 prescribers**
- **Failure to Refill a Newly Prescribed Stimulant or ADHD Non-Stimulant within 30 Days of RX Ending (Under 18 years): 54 patients, 28 prescribers**



## BPM '06 Selected Adult Data (11-1-05 through 1-31-06)

- Use of an Atypical Antipsychotic at a Higher Than Recommended Dose for 45 or More Days: **120 patients, 53 prescribers**
- Use of 1 or More Benzodiazepines and 1 or More Antidepressants for 60 Days or More: **228 patients, 192 prescribers**
- Failure to Refill a Newly Prescribed Antidepressant Within 30 Days of Prescription: **212 patients, 123 prescribers**
- Multiple Prescribers of Same Class of Psychotropic Drug for 45 or More Days: **57 patients, 112 prescribers**

# *Next Steps*



## Launch BPM '06

- **Mail orientation letter (completed)**
- **Mail to Child and Adolescent Prescribers (completed)**
- **Mail to Adult Prescribers (completed shortly)**
- **Enhance Peer Consulting Program**
- **Revisit Quality Indicators™ to Message On**

***Next Meeting***