

DCF Psychotropic Medication Advisory Committee
Monthly Meeting Notes

October 9, 2009, 1:00PM

Riverview Hospital for Children and Youth
Middletown, CT.

PRESENT: See enclosed attendance record.

1. Call to order: Dr. Williams called the meeting to order at 1:05 pm.
2. Set date/time of next meeting: The **next meeting is scheduled for November 06, 2009 from 1-3PM**; RHCY AB Conference Room.
3. Minutes: The minutes of the September 2009 PMAC meeting were reviewed and approved.
4. Announcements:
 - A publication "Pharmacology: Drugs On The Street" was distributed and discussed; Subjects to be aware of include:
 - An increase in ADHD medication abuse by adolescents/teens.
 - An increased prescribing of ADHD medications; mostly amphetamines.
 - A general increase in case severity.
 - It may be that parents, friends, etc. may be abusing the medications and not the patient.
 - AACAP Sept 09 issue: practice parameters discussed and reviewed.
 - PMAC members should adopt these as a good practice model.
 - DCF should adopt these as a good practice model.
 - Medicaid Issues: The DCF Health Advocate (Cheryl) gave an update.
 - Bulletin announcement effective 10/13/09; pharmacy dispensing fee is reduced from \$3.10 to \$2.65.
 - A voucher system is in effect to provide for the first 30days of medications for indigent individuals discharged from the department of corrections. It is unclear if this applies to children and adolescents.
 - Refill early prior authorization parameter change: new rules will require prior authorization as an early refill if 15% or more of the previous fill remains compared to the old rule of 25%. PMAC feels this will cause problems with DCF children and all ARG nurses should be notified of this rule change.
 - Health Advocate: the responsibilities of this position were described and discussed. There are five health advocates to cover the state of Connecticut. They act as liaisons to DSS, pharmacies, insurance companies, etc. to help resolve claims and other issues.
5. Update by Medicaid Pharmacy Data Sub-Committee:
 - Dr. Harris led the discussion: The following plan was developed and is being implemented:

- Review the current report and make recommendations for adjustments.
 - Apply the recommended adjustments to the next report covering the period July 1 – December 31, 2008.
 - Review this report and recommend additional changes (if needed).
 - This plan should result in the report covering the period Jan 1 – June 30, 2010 having more meaningful data.
 - It was noted that a limitation of the reporting tool is that committed vs. non-committed DCF children cannot be sub-categorized.
 - The data will be checked to determine what medications are in each category to insure there is no double counting (1 medication being in 2 or more categories).
 - It was noted that PMAC is the State Agency responsible for reviewing and analyzing this data.
6. Update by PMAC Annual Psychopharmacology Conference Sub-Committee
- Beth Muller led the discussion and provided an update on the activities of this sub-committee:
 - A date has been set: March 26, 2009.
 - The conference will carry 6 CME credits.
 - Sessions will be from 830a – 1230p, lunch break, then 1pm – 3pm.
 - The charge to attend the conference will be \$60.00
 - Time line: in general their needs to be more time allotted to each step compared to last year. The announcement will be as follows:
 1. A “Save the Date” email; Jan 1st.
 2. A mailing; Feb 1st.
 3. A reminder email; 3 weeks prior to conference.
 - The target audience will be PCP’s and APRN’s vs. psychiatrists.
 - Possible speakers and topics are still being discussed. There will be a Keynote speaker (Perhaps Pat Leebens), other topics a bit less complex than last years such as resource and screening tools. PMAC members are encouraged to email proposed topics to Beth Muller.
 - Suggested as possible speakers: Lisa Namerov, Ronald Angoff and Jean Marchi.
 - It was noted that a 2day PTSD conference organized by Clifford Beers to be held at Foxwoods might conflict with our proposed conference date. There was a discussion of the pros and cons of combining our conference with theirs.
 - The possibility of obtaining grant money was discussed possibly via. Drug manufactures or AAP. It was decided that drug manufacturers would not be the best source for funds as there might be an appearance of a conflict of interest. Dr. Flanagan will investigate the possibility of obtaining an educational grant from AAP.

7. Update on CMCU Data Collection

- Dr. Siegel distributed and discussed a report generated from LINK data. Key points of discussion included:
 - The number of committed children is down.
 - Discussion centered on the question: Does the difference in prescribing practices for DCF children bear out that the DCF population is sicker or is it a function of their being DCF children.

8. Review of Medication Guide for Parents, Guardians, and Children

- The guide was distributed for review and discussion; Key points included:
 - There is a need to describe the goals of the guide.
 - Should the PMAC be preparing and distributing this information?
 - Dr. Williams noted that written feedback received so far has been contradicting:
 1. The guide is too complex
 2. The guide is too simplistic
 3. To many possible side effects were described
 4. To few side effects were described
 - Language should be consistent; for example using the word medication in one part of the guide and the word drug in another.
 - The pages should be numbered.
 - A statement regarding the possible risk associated with the use of OTC and herbal medications should be included under the Getting Help section.
 - Change front-page language to “A Guide for Patents, Foster Parents, Families, Caregivers, Guardians, and Social Workers”.
 - Credit should be noted as to who contributed to the guide. This should be in the format of PMAC, Dr’s, Pharmacists, etc. vs. names of individuals.
 - It was generally agreed that this type of guide would be a good tool for social workers and foster parents. Possibly this guide should be incorporated into Pride Training. It could also be part of the training program for certification of foster parents.
 - A suggestion was made to develop a briefer document that would be a set of questions that a DCF worker should ask the prescribing practitioner at the time medications are prescribed for a child.
 - Funding for printing and distribution was discussed. Entities such as NAMI, UCONN School of Social Work, or other small foundations were suggested as funding sources.
 - It was suggested the guide be put on the DCF Web site as a pilot.

9. OTHER:

- Formulary Review: Intuniv (guanfacine extended release): A monograph was distributed, presented, and discussed in detail; Key points included:
 - Pricing and cost discussed: may be equivalent to long acting amphetamine salts and/or Straterra.
 - After careful consideration it was decided to wait until Intuniv is actually available in the marketplace and then again consider this medication for addition to the DCF approved drug list. This will most likely be at the November 09 meeting of the PMAC.
- Zyprexa update: it was discussed and noted that olanzapine related weight gain is not dose related.
- Newsletter: the publication of a PMAC newsletter was discussed. This will be coordinated by the P&T Pharmacist Consultants.
 - Initial plans include meeting with the CMCU team to discuss the newsletter they publish to determine if that can be used as a template or possibly combining the newsletters into one publication.
 - A meeting is scheduled to include the P&T Pharmacist Consultants and the CMCU team to be held at DCF in Hartford on November 10, 2009 from 9am – 10am.

10. Adjournment: Dr. Williams adjourned the Committee at 2:55PM.

Respectfully Submitted:

David S. Aresco