



STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

P. O. Box 339
Honolulu, Hawaii 96809-0339

December 26, 2019

The Honorable Ronald D. Kouchi
President and Members of the Senate
Thirtieth State Legislature
State Capitol, Room 409
Honolulu, Hawaii 96813

The Honorable Scott Saiki
Speaker and Members of the House
of Representatives
Thirtieth State Legislature
State Capitol, Room 431
Honolulu, Hawaii 96813

SUBJECT: REPORT IN ACCORDANCE WITH SECTION 346-59.9, HAWAII REVISED STATUTES, ON
PSYCHOTROPIC MEDICATION

Dear President Kouchi, Speaker Saiki, and members of the Legislature,

Attached is the following report submitted in accordance with:

- SECTION 346-59.9, HAWAII REVISED STATUTES, ON PSYCHOTROPIC MEDICATION.

In accordance with section 93-16, HRS, copies of these reports have been transmitted to the
Legislative Reference Bureau Library and the reports may be viewed electronically at
<http://humanservices.hawaii.gov/reports/legislative-reports/>.

Sincerely,

Cathy Betts
Deputy Director

Ecopy only:

Office of the Governor
Office of the Lieutenant Governor
Department of Budget & Finance
Legislative Auditor
Senator Russell E. Ruderman, Chair, Senate Committee on Human Services
Representative Joy A. San Buenaventura, House Committee on Human Services &
Homelessness

**REPORT TO THE THIRTIETH HAWAII STATE LEGISLATURE
2020**

**IN ACCORDANCE WITH THE PROVISIONS OF
SECTION 346-59.9, HAWAII REVISED STATUTES,
ON PSYCHOTROPIC MEDICATION**

**DEPARTMENT OF HUMAN SERVICES
MED-QUEST DIVISION
DECEMBER 2019**

**2019 ANNUAL REPORT ON PSYCHOTROPIC MEDICATION,
SECTION 346-59.9, HAWAII REVISED STATUTES**

Act 102, Session Laws of Hawaii (SLH) 2012, amended section 346-59.9, Hawaii Revised Statutes (HRS), Psychotropic Medication. Section 346-59.9 (g), HRS, requires the Department of Human Services to report annually on:

- (1) The number of brand-name and generic prescriptions written to which this section applies; and
- (2) The amount expended on brand-name prescriptions and the amount expended on generic prescriptions written each fiscal year to which this section applies.

The information is provided in the tables below. The data is as reported by each QUEST Integration (QI) health plan, the Community Care Services (CCS) contractor, and the Fee-For-Service (FFS) program.

Hawaii Medicaid Psychotropic Cost for State Fiscal Year (SFY) 2019

Includes QI Health Plans, CCS and FFS

	Total Number of Claims				Total Expenditure			
	Brand		Generic		Brand		Generic	
	#	%	#	%	\$	%	\$	%
Antipsychotic Total								
7/1/2015-6/30/2016	9,337	19%	40,019	81%	\$11,145,728	54%	\$9,491,857	46%
7/1/2016-6/30/2017	12,807	18%	58,477	82%	\$18,984,689	69%	\$8,628,201	31%
7/1/2017-6/30/2018	13,340	19%	58,439	81%	\$23,091,797	83%	\$4,719,574	17%
7/1/2018-6/30/2019	15,356	21%	58,278	79%	27,848,873	88%	3,731,913	12%
Antidepressant Total								
7/1/2015-6/30/2016	3,559	3%	111,133	97%	\$1,042,335	31%	\$2,284,742	69%
7/1/2016-6/30/2017	4,381	3%	138,676	97%	\$1,390,375	39%	\$2,199,437	61%
7/1/2017-6/30/2018	3,784	3%	140,684	97%	\$1,401,666	38%	\$2,299,834	62%
7/1/2018-6/30/2019	4,167	3%	134,004	97%	\$1,573,590	47%	\$2,033,479	56%
Anti-anxiety Total								
7/1/2015-6/30/2016	158	<1%	57,220	100%	\$84,757	16%	\$442,140	84%
7/1/2016-6/30/2017	221	<1%	62,667	100%	\$95,637	17%	\$471,682	83%
7/1/2017-6/30/2018*	155	<1%	54,945	100%	\$82,509	20%	\$337,105	80%
7/1/2018-6/30/2019	133	<1%	49,042	100%	\$81,933	21%	\$305,036	79%

*Change from last year's reported data is due to health plan's correction of data.

The total expenditure for psychotropic medication in SFY 2019 is approximately \$35,575,000. This total includes the QI health plans (\$21,041,000), CCS (\$14,530,000) program and the FFS

program (\$3,296).

AlohaCare QUEST Integration Psychotropic Cost

	Total Number of Claims				Total Expenditure				Total No. Unique Utilizers	
	Brand		Generic		Brand		Generic			
	#	%	#	%	\$	%	\$	%		
Antipsychotic										
7/1/09-6/30/10	5,887	85%	1,022	15%	\$2,182,797	94%	\$141,089	6%	1,259	
7/1/10-6/30/11	6,545	81%	1,460	19%	\$2,915,457	94%	\$183,521	6%	1,410	
7/1/11-6/30/12	5,062	64%	2,887	36%	\$2,614,657	83%	\$523,881	17%	1,392	
7/1/12-6/30/13	3,517	46%	4,138	54%	\$1,951,363	80%	\$484,644	20%	1,220	
7/1/13-6/30/14	2,703	40%	4,010	60%	\$2,323,691	86%	\$365,329	14%	1,088	
7/1/14-6/30/15	1,550	34%	3,021	66%	\$1,404,173	86%	\$224,212	14%	907	
7/1/15-6/30/16	785	16%	4,067	84%	\$794,990	52%	\$743,892	48%	926	
7/1/16-6/30/17*	922	16%	4,748	84%	\$1,072,207	61%	\$679,612	39%	966	
7/1/17-6/30/18*	965	17%	4,582	83%	\$1,355,938	71%	\$544,753	29%	907	
7/1/18-6/30/19	1,249	20%	4,997	80%	\$2,005,402	82%	\$433,982	18%	979	
Antidepressant										
7/1/09-6/30/10	4,380	26%	12,376	74%	\$602,689	59%	\$423,742	41%	3,355	
7/1/10-6/30/11	3,580	20%	14,613	80%	\$509,803	46%	\$607,128	54%	3,623	
7/1/11-6/30/12	2,303	12%	16,663	88%	\$375,886	38%	\$621,367	62%	3,593	
7/1/12-6/30/13	1,913	10%	17,247	90%	\$274,955	36%	\$489,987	64%	3,314	
7/1/13-6/30/14	712	4%	17,915	96%	\$170,763	24%	\$553,019	76%	3,192	
7/1/14-6/30/15	259	2%	16,857	98%	\$61,252	17%	\$366,514	83%	3,182	
7/1/15-6/30/16	291	2%	18,202	98%	\$78,660	20%	\$321,469	80%	3,263	
7/1/16-6/30/17*	374	2%	19,255	98%	\$109,221	22%	\$385,603	78%	3,298	
7/1/17-6/30/18*	324	2%	18,603	98%	\$121,565	21%	\$463,865	79%	3,132	
7/1/18-6/30/19	365	2%	17,131	98%	\$154,742	28%	\$397,926	72%	2,956	
Anti-anxiety										
7/1/09-6/30/10	15	<1%	8,206	100%	\$2,505	3%	\$79,318	97%	1,786	
7/1/10-6/30/11	18	<1%	8,111	100%	\$1,951	2%	\$80,947	98%	1,894	
7/1/11-6/30/12	2	<1%	8,362	100%	\$247	<1%	\$93,660	100%	1,835	
7/1/12-6/30/13	0	0%	6,731	100%	\$0	0%	\$61,849	100%	1,734	
7/1/13-6/30/14	28	<1%	11,583	100%	\$8,176	6%	\$138,556	94%	2,290	
7/1/14-6/30/15	16	<1%	11,658	100%	\$5,809	4%	\$139,536	96%	3,058	
7/1/15-6/30/16	54	<1%	12,269	100%	\$20,744	10%	\$182,755	90%	2,968	
7/1/16-6/30/17*	0	0%	8,411	100%	\$0.00	0%	\$104,935	100%	2,847	

7/1/17-6/30/18*	0	0%	7,155	100%	\$0.00	0%	\$92,363	100%	2,605
7/1/18-6/30/19	0	0%	6,180	100%	\$0.00	0%	\$76,404	100%	1,432

*Change from last year's reported data is due to health plan's correction of data: removal of Food and Drug Administration (FDA) approved benzodiazepines for seizure or insomnia diagnoses.

HMSA QUEST Integration Psychotropic Cost

	Total Number of Claims				Total Expenditure				Total No. Unique Utilizers
	Brand		Generic		Brand		Generic		
	#	%	#	%	\$	%	\$	%	
Antipsychotic									
7/1/09-6/30/10	11,615	83%	2,430	17%	\$4,319,335	96%	\$160,146	4%	2,127*
7/1/10-6/30/11	11,406	80%	2,810	19%	\$4,847,964	98%	\$103,154	2%	2,171
7/1/11-6/30/12	9,978	66%	5,290	34%	\$5,009,526	88%	\$664,503	12%	2,221
7/1/12-6/30/13	7,586	44%	9,642	56%	\$4,626,576	86%	\$768,865	14%	2,469
7/1/13-6/30/14	7,055	45%	8,755	55%	\$5,011,583	90%	\$555,836	10%	2,429
7/1/14-6/30/15	6,074	41%	8,770	59%	\$4,866,243	89%	\$598,551	11%	2,214
7/1/15-6/30/16	3,458	20%	13,895	80%	\$3,029,597	60%	\$2,003,703	40%	2,439
7/1/16-6/30/17	3,129	17%	15,743	83%	\$3,313,766	62%	\$1,999,102	38%	2,629
7/1/17-6/30/18	3,494	17%	17,278	83%	\$4,292,902	77%	\$1,309,563	23%	2,901
7/1/18-6/30/19	4,180	19%	17,873	81%	\$5,715,478	81%	\$1,306,238	19%	2,984
Antidepressant									
7/1/09-6/30/10	8,864	27%	24,262	73%	\$1,185,654	58%	\$875,185	42%	5,565*
7/1/10-6/30/11	7,410	19%	30,843	81%	\$1,004,692	51%	\$947,123	49%	6,199
7/1/11-6/30/12	5,237	13%	35,348	87%	\$904,502	54%	\$781,470	46%	6,442
7/1/12-6/30/13	3,870	8%	43,422	92%	\$902,444	51%	\$880,628	49%	7,428
7/1/13-6/30/14	2,376	5%	46,341	95%	\$620,624	42%	\$871,708	58%	7,895
7/1/14-6/30/15	2,279	4%	50,516	96%	\$562,786	38%	\$909,438	62%	8,276
7/1/15-6/30/16	2,622	4%	57,011	96%	\$756,377	49%	\$783,261	51%	8,893
7/1/16-6/30/17	2,812	4%	62,578	96%	\$884,042	50%	\$888,569	50%	9,509
7/1/17-6/30/18	2,533	4%	68,823	96%	\$902,682	47%	\$1,027,492	53%	10,151
7/1/18-6/30/19	2,828	4%	67,376	96%	\$1,033,062	51%	\$991,503	49%	10,015
Anti-anxiety									
7/1/09-6/30/10	18	<1%	11,536	100%	\$5,910	4%	\$137,248	96%	2,360*
7/1/10-6/30/11	31	<1%	13,316	100%	\$6,803	6%	\$111,448	94%	2,667
7/1/11-6/30/12	18	<1%	13,545	100%	\$4,540	4%	\$116,889	96%	2,488
7/1/12-6/30/13	34	<1%	17,584	100%	\$10,378	8%	\$118,503	92%	3,606
7/1/13-6/30/14	44	<1%	21,076	100%	\$18,801	14%	\$115,739	86%	4,461

7/1/14-6/30/15	30	<1%	22,374	100%	\$37,788	29%	\$92,723	71%	4,979
7/1/15-6/30/16	24	<1%	24,761	100%	\$60,906	43%	\$81,824	57%	5,374
7/1/16-6/30/17	50	<1%	22,777	100%	\$73,147	46%	\$86,197	54%	5,205
7/1/17-6/30/18	43	<1%	23,457	100%	\$75,622	47%	\$86,971	53%	5,317
7/1/18-6/30/19	29	<1%	20,985	100%	\$72,926	47%	\$80,873	53%	4,850

*The change of a pharmacy claims processor during this period results in some inconsistencies in data sets.

Kaiser QUEST Integration Psychotropic Cost

	Total Number of Claims				Total Expenditure				Total No. Unique Utilizers	
	Brand		Generic		Brand		Generic			
	#	%	#	%	\$	%	\$	%		
Antipsychotic										
7/1/09-6/30/10	714	53%	628	47%	\$210,251	98%	\$3,932	2%	289	
7/1/10-6/30/11	853	54%	730	46%	\$301,307	98%	\$6,176	2%	360	
7/1/11-6/30/12	625	38%	1,023	62%	\$258,603	89%	\$32,444	11%	372	
7/1/12-6/30/13	404	24%	1,307	76%	\$204,739	92%	\$17,232	8%	335	
7/1/13-6/30/14	391	24%	1,251	76%	\$242,048	94%	\$16,517	6%	321	
7/1/14-6/30/15	252	22%	905	78%	\$197,867	75%	\$65,471	25%	353	
7/1/15-6/30/16	49	3%	1,379	97%	\$48,694	27%	\$134,555	73%	417	
7/1/16-6/30/17	109	5%	1,972	95%	\$102,231	66%	\$52,436	34%	416	
7/1/17-6/30/18	134	7%	1,860	93%	\$186,140	84%	\$36,781	16%	455	
7/1/18-6/30/19	160	7%	2,250	93%	\$310,786	87%	\$45,384	13%	500	
Antidepressant										
7/1/09-6/30/10	497	8%	5,857	92%	\$75,263	66%	\$38,422	34%	1,181	
7/1/10-6/30/11	463	6%	6,968	94%	\$80,249	66%	\$41,292	34%	1,378	
7/1/11-6/30/12	485	5%	8,444	95%	\$107,488	66%	\$55,350	34%	1,589	
7/1/12-6/30/13	458	5%	7,943	95%	\$124,731	71%	\$51,058	29%	1,398	
7/1/13-6/30/14	248	4%	6,811	96%	\$82,406	52%	\$77,015	49%	1,358	
7/1/14-6/30/15	20	<1%	5,582	100%	\$8,669	14%	\$51,510	86%	1,524	
7/1/15-6/30/16	37	<1%	6,143	100%	\$17,195	30%	\$39,477	70%	1,721	
7/1/16-6/30/17	85	1%	9,04a4	99%	\$28,566	35%	\$53,950	65%	1,695	
7/1/17-6/30/18	102	1%	7,660	99%	\$38,854	43%	\$51,103	57%	1,722	
7/1/18-6/30/19	110	2%	7,132	98%	\$55,713	50%	\$56,203	50%	1,749	
Anti-anxiety										
7/1/09-6/30/10	1	<1%	2,469	100%	\$147	3%	\$4,851	97%	648	
7/1/10-6/30/11	1	<1%	2,789	100%	\$661	11%	\$5,101	89%	777	
7/1/11-6/30/12	15	<1%	2,972	100%	\$5,503	53%	\$4,915	47%	867	

7/1/12-6/30/13	13	<1%	2,646	100%	\$4,555	53%	\$4,095	47%	758
7/1/13-6/30/14	13	<1%	2,374	100%	\$6,912	65%	\$3,746	35%	760
7/1/14-6/30/15	2	<1%	2,758	100%	\$50	1%	\$3,843	99%	898
7/1/15-6/30/16	1	<1%	3,403	100%	\$48	<1%	\$11,032	100%	1,041
7/1/16-6/30/17	3	<1%	3,539	100%	\$69	<1%	\$17,336	100%	986
7/1/17-6/30/18	11	<1%	3,227	100%	\$2,926	14%	\$17,332	86%	950
7/1/18-6/30/19	1	<1%	2,842	100%	\$4.16	<1%	\$16,936	100%	879

Ohana Health Quest Integration Psychotropic Cost

	Total Number of Claims				Total Expenditure				Total No. Unique Utilizers
	Brand		Generic		Brand		Generic		
	#	%	#	%	\$	%	\$	%	
Antipsychotic									
7/1/09-6/30/10	15,653	76%	5,068	24%	\$7,510,115	92%	\$645,522	8%	1,944
7/1/10-6/30/11	18,771	76%	6,008	24%	\$10,069,923	93%	\$701,013	7%	2,164
7/1/11-6/30/12	15,357	58%	11,280	42%	\$9,537,668	75%	\$3,122,545	25%	2,129
7/1/12-6/30/13	9,555	35%	17,735	65%	\$7,532,671	66%	\$3,936,457	34%	2,216
7/1/13-6/30/14	1,123	8%	12,628	92%	\$1,274,736	28%	\$3,234,847	72%	1,691
7/1/14-6/30/15	3,837	27%	10,398	73%	\$3,747,958	62%	\$2,273,132	38%	1,757
7/1/15-6/30/16	1,115	15%	6,303	85%	\$1,271,849	38%	\$2,080,960	62%	1,295
7/1/16-6/30/17	1,795	12%	12,834	88%	\$2,682,837	60%	\$1,807,174	40%	1,745
7/1/17-6/30/18	1,686	13%	11,707	87%	\$2,917,700	80%	\$721,662	20%	1,566
7/1/18-6/30/19	1,932	15%	10,976	85%	\$3,508,317	89%	\$434,937	11%	1,501
Antidepressant									
7/1/09-6/30/10	5,462	26%	15,688	74%	\$786,111	60%	\$519,290	40%	2,559
7/1/10-6/30/11	5,335	22%	19,287	78%	\$754,409	49%	\$800,750	51%	2,846
7/1/11-6/30/12	4,310	16%	22,277	84%	\$736,653	49%	\$774,715	51%	2,856
7/1/12-6/30/13	2,561	9%	24,647	91%	\$631,605	42%	\$881,158	58%	2,904
7/1/13-6/30/14	239	1%	22,163	99%	\$67,074	9%	\$679,477	91%	3,241
7/1/14-6/30/15	548	2%	22,174	98%	\$128,668	12%	\$983,688	88%	3,403
7/1/15-6/30/16	214	2%	11,183	98%	\$50,611	9%	\$502,401	91%	2,418
7/1/16-6/30/17	481	2%	21,422	98%	\$139,268	28%	\$354,343	72%	3,119
7/1/17-6/30/18	362	2%	19,282	98%	\$116,285	33%	\$230,861	67%	2,771
7/1/18-6/30/19	420	2%	18,037	98%	\$134,737	46%	\$161,163	54%	2,601
Anti-anxiety									
7/1/09-6/30/10	76	<1%	18,057	100%	\$21,672	11%	\$171,815	89%	2,931
7/1/10-6/30/11	49	<1%	19,805	100%	\$17,288	8%	\$191,471	92%	3,032

7/1/11-6/30/12	48	<1%	21,810	100%	\$18,985	8%	\$207,492	92%	3,128
7/1/12-6/30/13	51	<1%	18,104	100%	\$22,898	12%	\$173,596	88%	2,838
7/1/13-6/30/14	208	2%	12,765	98%	\$120,112	52%	\$108,888	48%	2,482
7/1/14-6/30/15	419	3%	13,056	97%	\$153,167	51%	\$148,628	49%	2,529
7/1/15-6/30/16	66	1%	6,458	99%	\$2,260	3%	\$73,627	97%	1,743
7/1/16-6/30/17	106	1%	11,477	99%	\$3,550	5%	\$62,813	95%	2,337
7/1/17-6/30/18	88	1%	9,561	99%	\$2,348	5%	\$40,506	95%	1,975
7/1/18-6/30/19	72	1%	8,478	99%	\$1,927	4%	\$43,261	96%	1825

*Change from last year's reported data is due to health plan's correction of data.

United HealthCare QUEST Integration Psychotropic Cost

	Total Number of Claims				Total Expenditure				Total No. Unique Utilizers	
	Brand		Generic		Brand		Generic			
	#	%	#	%	\$	%	\$	%		
Antipsychotic										
7/1/09-6/30/10	7,268	71%	3,010	29%	\$5,724,344	92%	\$500,395	8%	2,045	
7/1/10-6/30/11	6,953	72%	2,743	28%	\$7,049,618	95%	\$395,039	5%	1,634	
7/1/11-6/30/12	5,760	58%	4,046	42%	\$6,084,993	85%	\$1,032,928	15%	1,493	
7/1/12-6/30/13	3,052	35%	5,691	65%	\$4,532,005	83%	\$902,203	17%	1,593	
7/1/13-6/30/14	2,132	34%	4,212	66%	\$3,219,152	92%	\$290,152	8%	1,500	
7/1/14-6/30/15	1,663	30%	3,798	70%	\$2,809,915	89%	\$358,261	11%	1,183	
7/1/15-6/30/16	914	16%	4,635	84%	\$1,998,940	62%	\$1,216,051	38%	1,211	
7/1/16-6/30/17	980	16%	5,040	84%	\$2,421,887	71%	\$1,003,613	29%	1,316	
7/1/17-6/30/18*	983	15%	5,505	85%	\$3,096,142	82%	\$669,871	18%	1,455	
7/1/18-6/30/19	1,061	17%	5,170	83%	\$3,132,677	87%	\$484,258	13%	1,461	
Antidepressant										
7/1/09-6/30/10	3,001	28%	7,765	72%	\$736,113	64%	\$417,611	36%	2,697	
7/1/10-6/30/11	1,931	20%	7,954	80%	\$539,340	56%	\$426,176	44%	2,093	
7/1/11-6/30/12	1,146	11%	9,024	89%	\$357,022	56%	\$285,514	44%	1,979	
7/1/12-6/30/13	719	8%	8,865	92%	\$340,744	56%	\$272,948	44%	2,301	
7/1/13-6/30/14	425	5%	8,550	95%	\$217,360	46%	\$258,976	54%	2,519	
7/1/14-6/30/15	147	2%	9,031	98%	\$81,075	21%	\$297,782	79%	2,532	
7/1/15-6/30/16	120	1%	9,392	99%	\$710,044	24%	\$223,818	76%	2,598	
7/1/16-6/30/17	79	1%	9,530	99%	\$45,018	16%	\$231,109	84%	2,665	
7/1/17-6/30/18	67	1%	10,266	99%	\$40,416	12%	\$309,443	88%	2,768	
7/1/18-6/30/19	77	1%	9,572	99%	\$55,273	17%	\$267,264	83%	2,731	

Anti-anxiety										
7/1/09-6/30/10	183	<1%	2,062	99%	\$10,627	5%	\$189,657	95%	2,640	
7/1/10-6/30/11	107	<1%	12,415	99%	\$11,423	5%	\$223,875	95%	2,880	
7/1/11-6/30/12	70	<1%	12,729	99%	\$9,734	5%	\$196,624	95%	2,813	
7/1/12-6/30/13	16	<1%	9,578	100%	\$6,208	4%	\$144,976	96%	2,779	
7/1/13-6/30/14	8	<1%	6,748	100%	\$4,166	6%	\$61,766	94%	1,917	
7/1/14-6/30/15	1	<1%	7,123	100%	\$724	1%	\$49,736	99%	1,949	
7/1/15-6/30/16	1	<1%	7,020	100%	\$78	<1%	\$53,372	100%	2,029	
7/1/16-6/30/17	0	0%	6,261	100%	\$0	0%	\$58,868	100%	1,907	
7/1/17-6/30/18	4	<1%	5,763	100%	\$1,933	3%	\$74,724	97%	1,873	
7/1/18-6/30/19	5	<1%	5,294	100%	\$5,220	8%	\$58,498	92%	1,798	

*Change from last year's reported data is due to health plan's correction of data.

Community Care Services (CCS)

	Total Number of Claims				Total Expenditure				Total No. Unique Utilizers	
	Brand		Generic		Brand		Generic			
	#	%	#	%	\$	%	\$	%		
Antipsychotic										
7/1/14-6/30/15	8,485	33%	17,085	67%	\$9,467,667	71%	\$3,950,018	29%	2,365	
7/1/15-6/30/16	3,017	24%	9,741	76%	\$4,003,135	55%	\$3,312,697	45%	1,997	
7/1/16-6/30/17	5,873	24%	18,146	76%	\$9,390,255	75%	\$3,088,022	25%	2,149	
7/1/17-6/30/18	6,078	26%	17,464	74%	\$10,923,143	89%	\$1,376,829	11%	2,143	
7/1/18-6/30/19	6,773	28%	17,155	72%	\$13,174,984	93%	\$1,026,384	7%	2,089	
Antidepressant										
7/1/14-6/30/15	622	3%	19,924	97%	\$159,353	15%	\$916,810	85%	2,167	
7/1/15-6/30/16	277	3%	9,206	97%	\$67,713	14%	\$416,698	86%	1,695	
7/1/16-6/30/17	548	3%	16,715	97%	\$183,952	39%	\$289,616	61%	1,785	
7/1/17-6/30/18	396	2%	15,958	98%	\$181,865	46%	\$213,552	54%	1,712	
7/1/18-6/30/19	367	2%	14,805	98%	\$140,064	47%	\$158,147	53%	1,586	
Anti-anxiety										
7/1/14-6/30/15	16	<1%	6,734	100%	\$1,347	2%	\$81,480	98%	1,044	
7/1/15-6/30/16	12	<1%	3,226	100%	\$721	2%	\$40,043	98%	758	
7/1/16-6/30/17	32	<1%	6,047	100%	\$3,505	8%	\$38,221	92%	899	
7/1/17-6/30/18	14	<1%	5,713	100%	\$383	1%	\$31,250	99%	876	
7/1/18-6/30/19	26	<1%	5,263	100%	\$1,855	6%	\$29,002	94%	860	

*Change from last year's reported data is due to health plan's correction of data.

Discussion

This State Fiscal Year (SFY) 2018-2019 report utilizes the term "QUEST Integration" to reflect the Medicaid managed care health plans for SFY 2019. The data is as reported by each QI health plan, CCS contractor, and FFS program.

Prior to this Act 205, SLH 2010,¹ effective on July 1, 2011, was implemented by the health plans during different quarters in State Fiscal Year (SFY) 2010-2011.² SFY 2011-2012, SFY 2012-2013 and SFY 2013-2014 each are a full year of all the plans complying with Act 205 (SLH 2010) without changes in the law or the program. Trends are noted. Data for SFY 2009-2010, prior to the implementation of Act 205 (SLH 2010), is represented for comparison purposes.

Two of the five Medicaid managed care plans had data updates. The following are noted:

- 97% of the antidepressant prescriptions are filled with a generic and account for 56% of the antidepressant expenditure. Generic utilization percentage is consistent with data for SFY 2016 through 2018 while the generic expenditure percentage has been decreasing since SFY 2016: 69% to 56%. A new brand antidepressant has been approved by the Food and Drug Administration (FDA). Diagnosis connected to the prescription improves provider education in at least one Medicaid managed care plan.
- 100% of the anti-anxiety prescriptions are filled with a generic and account for 79% of the anti-anxiety expenditure. Both brand and generic utilization and expenditures have been decreasing since SFY 2017. Although the expenditure is minor when compared to the antidepressant and antipsychotic prescriptions, the decreasing trend may be due to the following:
 - The prescriber may be empowered to prescribe less anti-anxiety medications by the July 2017 enactment of §329-38 Prescription (c) concerning "Initial concurrent prescriptions for opioids and benzodiazepines shall not be for longer than seven consecutive days unless a supply of longer than seven days is determined to be medically necessary for the treatment of...;"
 - At least one Medicaid managed care plan excludes seizure and insomnia use from this report;
 - Diagnosis connected to the prescription improves reporting accuracy in at least one Medicaid managed care plan;
 - The federal SUPPORT Act will impact the SFY2020 report with required criteria for concurrent use of anti-anxiety medications and opioids to decrease fraud,

misuse and abuse;

- 79% of the antipsychotic prescriptions are filled with a generic. Generic expenditure percentages have been decreasing since SFY 2016: 46% to 12%. The utilization of brand prescriptions increased by 2% in SFY 2019 over SFY 2018, while the expenditure increased each year since SFY2016: 54% to 88%;
- At least one Medicaid managed care plan noted an increase in brand injectables paid: although they are higher in expenditures the adherence rates using injectables for high-risk populations improves outcomes;
- A Food and Drug Administration (FDA) approved diagnosis code for all branded antipsychotics is required at point of sale (POS) processing to pay a prescription claim at the pharmacy to ensure safety and to deter misuse in at least one Medicaid managed care plan; and
- The SUPPORT Act will impact the SFY2020 report with criteria for concurrent use of antipsychotic medications with opioids and monitoring of antipsychotic use in children: therapeutic duplication, early refill and age edits as approved by the FDA.

¹ Access to brand medication is available after two generic failures are documented for antidepressant and anti-anxiety medications.

² Different approaches and combinations were initiated by the different plans during SFY 2010-2011, such as the following: Preferred Drug Lists/Formulary Coverage; Prospective DUR edits; Point-Of-Sale messaging; Step Therapy; Prior Authorization; Provider Education; and Call Center intervention.