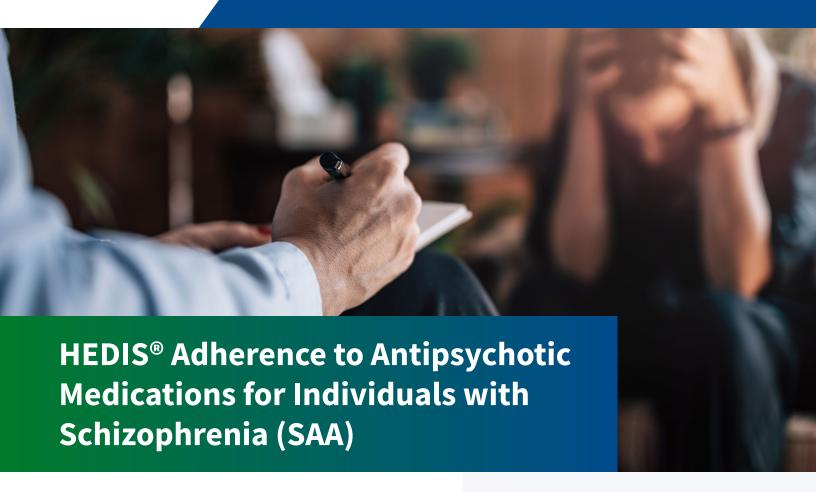


Provider Practice Transformation Academy



What is the SAA Measure Description?

The percentage of members 18+ diagnosed with schizophrenia who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period. The treatment period is the time between the members first antipsychotic medication fill date in the current year through December 31 of the current year.

Who is Included in the Measure?

Members with either one acute inpatient encounter or two outpatient encounters with a diagnosis of either schizophrenia or schizoaffective disorder with at least two antipsychotic medication dispensing events.

Why is the HEDIS SAA Measure Important?

As many as 60% of patients diagnosed with schizophrenia do not take medications as prescribed When antipsychotics are not taken correctly, member outcomes can be severe, including hospitalization and interference with the recovery process.¹ Adherence problems may make it difficult for a prescriber to assess the member's medication response. Prescribers may unnecessarily alter medication type of dosage in order to resolve what appears to be medication complications for a member who actually has an adherence problem.

¹Velligan, D. I. and Weiden, P. J. (2006, August). Interventions to Improve Adherence to Antipsychotic Medications. Psychiatric Times, 23(9). Retrieved from www.psychiatrictimes.com/articles/interventions-improve-adherence-antipsychotic-medications

Continued

Strategies for Success

As we shift to the Behavioral Health and Intellectual/Developmental Disabilities Tailored Plan, we will need to provide integrated, whole person care across the healthcare continuum. Behavioral health providers may need to monitor some routine lab tests to help detect chronic illnesses that may arise from medication side effects. As Alliance shifts towards the Tailored Plan, we will be monitoring your performance on two measures requiring POC labs:

- Listen to your members to better assess their stressors and barriers to determine the best course of treatment.
- Outreach directly to members who were recently prescribed antipsychotics or who have prescription refills that are past due:
 - · Follow up with members to confirm they are taking medications as prescribed.
 - Inform members they should talk to their prescriber if they are experiencing side effects.
- O Develop member driven plans for medication reminders.
 - Possible reminders include text messages, automated phone calls, alarms, signs in the members' home and technology equipped pillboxes that prompt members of the appropriate time to take medications.
- ⊗ Reconcile medications at each visit to engage members in discussing medications.
- O Discuss potential side effects with members.
- Address risk factors and barriers associated with non-adherence, such as negative stigmas, homelessness and substance abuse.
- Refer to Cognitive Behavioral Therapy (CBT) techniques to address beliefs and negative perceptions about medications and need for treatment.
- ② Encourage shared decision-making by educating members and caregivers.