The Florida Expert Panel comprised of experts on women health met in April 2019 to update the Florida Best Practice Recommendations for Women of Reproductive Age with Serious Mental Illness and Comorbid Substance Use Disorders.

The new recommendations provide treatment updates for women of reproductive age with opioid use disorders, alcohol use disorders and other substances of use, with a focus on pregnant and breastfeeding women.

The updated recommendations also include sections on the management of postpartum psychosis and management of obesity during pregnancy.

Other available Program guidelines include Best Practice Psychotherapeutic Medication Guidelines for Adults and Children/Adolescents; Autism Spectrum Disorder and Intellectual Developmental Disorder Best Practice Psychotherapeutic Medication Recommendations for Target Symptoms in Children and Adolescents; and Monitoring Physical Health and Side-Effects of Psychotherapeutic Medications in Adults and Children: An Integrated Approach.

Guidelines can be downloaded electronically from the Program website at http://floridamedicaidmentalhealth.org.

For printed copies of the guidelines, contact Sabrina Singh at sabrinasingh@usf.edu

**PROGRAM WEBINARS**

The Program offers webinars on an ongoing basis to ensure clinicians remain updated on the current evidence-based best-practice recommendations for care integration, and treatment of a range of behavioral health symptoms and conditions.

Visit the Program’s website to view recent webinars:

- Enhanced Collaboration Across Specialties to Improve Outcomes in Pediatrics - Daniel Castellanos, MD
- Insomnia Pharmacotherapy: Past, Present, and Future - David Neubauer, MD

FLORIDA MEDICAID DRUG THERAPY MANAGEMENT PROGRAM FOR
BEHAVIORAL HEALTH

SELECTED PROGRAM HIGHLIGHTS

- **USF/Aunt Bertha Comprehensive Web-Based Florida Resource Guide**
  - Available at [https://floridamedicaidmentalhealth.auntbertha.com/](https://floridamedicaidmentalhealth.auntbertha.com/)
  - The USF Florida Medicaid Drug Therapy Management Program for Behavioral Health has collaborated with Aunt Bertha, a search and referral platform to create a free, web-based search tool for behavioral and physical health services and community resources available throughout Florida, with a focus on resources available in the 30 rural Florida counties. The Program is also actively collaborating with community partners to increase awareness of resources that address social determinants of health such as homelessness.
  - Community resources include health, housing, food banks, transportation, and other services. These resources will be updated quarterly.
  - The site first became available on April 15, 2019. Between April 15 and May 31, 2019, there have already been over 1,000 searches conducted on the site.
  - Clinicians can visit [https://floridamedicaidmentalhealth.auntbertha.com](https://floridamedicaidmentalhealth.auntbertha.com) and search by zip code, category, or keyword for local Florida resources.
  - For more information, visit our Program website at [http://floridamedicaidmentalhealth.org](http://floridamedicaidmentalhealth.org).

- **COMING SOON: Expanding Telepsychiatry Services Throughout Florida—July 1, 2019**
  - From May 1, 2018 to April 30, 2019, the Program conducted a pilot project to bring telepsychiatry services to three rural pediatric practice sites in Florida. All three pediatric sites operate in areas with shortages of child and adolescent psychiatrists.
  - A total of 109 initial and follow-up telepsychiatry consults were completed during the year.
  - Among the children referred for telepsychiatry services, 54.7% had two to three comorbid behavioral health conditions. 18.9% had four or more comorbid behavioral health conditions.
  - At the end of the pilot project, providers at the three sites completed a satisfaction survey and took part in the Telepsychiatry Summit, which was held on May 11, 2019.
  - Pediatricians who participated in the project reported satisfaction with the quality of the telepsychiatry service, valued support with medication management for behavioral health conditions, and requested greater availability of resources and materials for behavioral health.
  - Based on results from the pilot project, the Program plans to expand telepsychiatry services to more practice sites throughout Florida starting July 1, 2019.
  - For information on how to connect with the telepsychiatry network call Sabrina Singh at 813-974-9879 or e-mail sabrinasingh@usf.edu.

Summer 2019
USF/Aunt Bertha Comprehensive Web-Based Florida Resource Guide

https://floridamedicaidmentalhealth.auntbertha.com/

About

- The USF Florida Medicaid Drug Therapy Management Program for Behavioral Health has collaborated with Aunt Bertha to create a free, web-based search tool for behavioral and physical health services and community resources.
- Resources include health, housing, food banks, transportation, and other services.

How to Search for Local Resources

- After entering a local zip code, providers can search by category or keyword.
- Click the specific category of interest (e.g., food, housing, transit, health) to view available resources, or enter a keyword to narrow the search.
- Click on the program of interest to view information such as services provided, location, hours, and contact information about that program.

For any questions, email vanitas@usf.edu or sabrinasingh@usf.edu. Visit http://floridamedicaidmentalhealth.org for more information.
Florida Medicaid Drug Therapy Management Program for Behavioral Health

Selected Program Highlights (continued)

- Utilizing Complex Care Indicators for Quality of Care Improvement
  - Every year, the Florida Expert Panel meets to review the latest literature on the management of behavioral health conditions and update the Florida Best Practice Psychotherapeutic Medication Guidelines.
  - Based on the latest literature and expert clinical consensus, the Florida Expert Panel also provides recommendations for complex care indicators, which are used to identify clinicians whose prescribing practices fall outside of established clinical and evidence-based standards.
  - Examples of complex care indicators include prescribing high antipsychotics and concurrent use of opioids and benzodiazepines.
  - Additional indicators include high utilization of health services such as multiple emergency department (ED) visits or inpatient hospitalizations for behavioral or physical health.
  - The complex care indicators are used to monitor prescribers on an ongoing basis to ensure safe prescribing practices.
  - Adults with Concurrent Use of Opioids and Benzodiazepines:
    - SMI recipients were prescribed concurrent opioids and benzodiazepines in larger numbers than recipients with any behavioral health diagnosis but no SMI and recipients with no behavioral health diagnosis.
    - Female SMI recipients ages 25-49 were the largest group of concurrent opioid and benzodiazepine users.
    - This analysis found that the longer the duration of concurrent opioid and benzodiazepine use, the greater the number of hospitalizations for an over-dose related event.
    - Among SMI recipients, there were 2,718 individuals who had concurrent opioids and benzodiazepines prescribed for 30 or more days, and 72 of these recipients (2.6%) had hospitalizations for overdose-related events.
  - Emergency Department (ED) Visits and Inpatient Hospitalizations Related to Opioid Overdoses:
    - In 2018, there were 1,672 overdose-related events that resulted in ED visits, and 1,534 overdose-related events that resulted in an inpatient hospitalization among Florida Medicaid recipients with SMI.
    - Female SMI recipients ages 25-49 years had the most opioid overdose-related events in CY2018.
**Selected Program Highlights (continued)**

- **Opioid Use Among Women of Childbearing Age with Serious Mental Illness (SMI) and Severe Emotional Disturbances (SED)**
  - Between 2014 and 2017, there were 13,786 babies born to women with SMI/SED and any opioid use, representing 13,467 deliveries.
  - Women in the SMI/SED + methadone or buprenorphine group had the highest percentages of babies diagnosed with NAS (59.4%), requiring NICU admissions (46.7%), or having inpatient hospital stays (56.6%) within the first year after birth.
  - Duval county had the most women with SMI/SED and chronic opioid use who gave birth between 2014-2017, followed by Hillsborough county.

- **Registry: Tracking Children and Adolescents Prescribed Psychotherapeutic Medications**
  - The purpose of the Registry is to collect, store, analyze, and evaluate the behavioral and physical health outcomes of children and adolescents prescribed psychotherapeutic medications. An important component of the Registry is also to track the experience of children who entered the Registry after receiving a second medical review (SMR) request for an antipsychotic medication in 2008 and have been continuously prescribed an antipsychotic medication since that time.
  - Since the beginning of the Registry, a total of 11,696 SMR requests have been received for 5,155 unique recipients.
  - Autism spectrum disorders, ADHD, and disruptive behaviors were the most common diagnoses associated with SMR requests for antipsychotic medications.
  - 126 recipients were under age six at the time of their first SMR request for an antipsychotic medication in 2008 and have continuously received an antipsychotic through April 2019.
  - 44.4% of these 126 children had behavioral health emergency room visits, and 58.7% had physical health emergency room visits between 2016-2018.

For printed copies of the guidelines, contact Sabrina Singh at sabrinasingh@usf.edu
Guidelines can also be downloaded electronically from the Program website at [http://floridamedicaidmentalhealth.org](http://floridamedicaidmentalhealth.org).
Florida Pediatric Psychiatry Hotline
1-866-487-9507

No registration required.
The Florida Pediatric Psychiatry Hotline provides timely telephonic psychiatric and clinical guidance to primary care clinicians treating children with behavioral health conditions. The hotline enables primary care clinicians to get assistance for any child under their care and is highly rated by those using the service.

The Florida Pediatric Psychiatry Hotline is operated by the University of South Florida Division of Child and Adolescent Psychiatry and the Rothman Center for Neuropsychiatry in St. Petersburg, Florida. A team of board certified child psychiatrists from the University of South Florida oversee the hotline and provide many of the consultations.

The goals of the Pediatric Psychiatry Hotline are to:
- Provide consultation about psychotherapeutic medications for children with behavioral health conditions.
- Facilitate a referral to a child psychiatrist or psychiatric advanced practice registered nurse (APRN) when possible.
- Promote a collaborative relationship between primary care clinicians and child psychiatrists.

About the service:
- The hotline is free and related to consultation about medication management.
- Calls will be answered on non-holiday weekdays between 8:30 am and 4:30 pm.
- Most calls will be scheduled with a child psychiatrist within 1 to 4 hours.
- Telephone consultations are limited to 20 minutes per call.
- Only information relevant to medication management will be discussed. No patient names or other unique identifying information needs to be provided.

http://floridamedicaidmentalhealth.org

The Florida Pediatric Psychiatry Hotline is funded by the Florida Medicaid Drug Therapy Management Program for Behavioral Health through a contract with the Florida Agency for Healthcare Administration.
SELECTED BEHAVIORAL HEALTH CLINICAL UPDATES

FOOD AND DRUG ADMINISTRATION (FDA) ANNOUNCES LABEL CHANGE FOR OPIOID MEDICATIONS

◊ The U.S. Food and Drug Administration (FDA) announced that it will require label changes to increase guidance on safely tapering opioid pain medications.
◊ The label changes were announced after the FDA received more reports of adverse events related to rapid discontinuation of opioid pain medications in patients who have physical dependence on these medications. Reports of serious harm included withdrawal symptoms, uncontrolled pain, psychological distress, and suicide.
◊ The Food and Drug Administration continues to track adverse events related to rapid discontinuation of opioid medications.

For more information on label changes for opioid medications, visit https://www.fda.gov/Drugs/DrugSafety/ucm635038.htm.

FDA APPROVES BREXANOLONE (ZULRESSO™) FOR POSTPARTUM DEPRESSION

◊ The FDA approved intravenous brexanolone (Zulresso™) in March 2019 to treat postpartum depression in adult women.
◊ Brexanolone was approved after two clinical trials comparing intravenous (IV) brexanolone versus placebo showed superiority of brexanolone when administered IV over 60 hours in patients diagnosed with postpartum depression.
◊ Brexanolone is only available through the ZulressoTM Risk Evaluation and Mitigation Strategy (REMS) Program due to concerns of serious risks associated with the drug, including excessive sedation or sudden loss of consciousness in patients when the drug is administered.


References:

FDA APPROVES ESKETAMINE NASAL SPRAY FOR TREATMENT-RESISTANT DEPRESSION

◊ In March 2019, the U.S. Food and Drug Administration (FDA) approved esketamine nasal spray (brand name Spravato™) as adjunctive treatment with oral antidepressants for adults with treatment-resistant depression.
◊ Esketamine nasal spray received approval for adults after the efficacy of the drug was evaluated in three four-week placebo-controlled trials and one longer-term trial. This was the first approved indication for esketamine. Esketamine nasal spray is not approved for use in children or adolescents.
◊ Boxed warnings include risk for sedation and dissociation after administration, potential for abuse and misuse, and increased risk of suicidal thoughts and behaviors in pediatric and young adult patients taking antidepressants.
◊ Availability of esketamine is restricted only to healthcare settings, prescribers, and patients who are enrolled in the Risk Evaluation and Mitigation Strategy (REMS) program. Enrollment in the REMS program is mandatory.

For more information on esketamine nasal spray (Spravato™), visit https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm632761.htm.

Newsletter compiled by Vanita Sahasranaman, MD (vanitas@usf.edu)
For inquiries, please contact Sabrina Singh, MPH at sabrinasingh@usf.edu

Summer 2019
Florida Medicaid Drug Therapy Management Program for Behavioral Health

Working with Medicaid health plans and providers to:

- Improve behavioral health prescribing practices
- Improve patient adherence to medication
- Reduce clinical risks and medication side effects
- Improve behavioral and physical health outcomes

The following treatment guidelines are available on our website at http://floridamedicaidmentalhealth.org.

- Best Practice Psychotherapeutic Medication Guidelines for Adults
- Monitoring Physical Health and Side-Effects of Psychotherapeutic Medications in Adults and Children: An Integrated Approach
- Best Practice Psychotherapeutic Medication Guidelines for Children and Adolescents
- Autism Spectrum Disorder & Intellectual Developmental Disorder: Best Practice Psychotherapeutic Medication Recommendations for Target Symptoms in Children and Adolescents
- Best Practice Recommendations for Women of Reproductive Age with Severe Mental Illness and Substance Use Disorders

The Florida Pediatric Psychiatry Hotline is a free service that provides consultation about medication management for behavioral health.

Florida Pediatric Psychiatry Hotline
1-866-487-9507

For more information, visit us at http://floridamedicaidmentalhealth.org