Overview
The Medicaid program in the District of Columbia finances a diverse array of antipsychotic prescription drugs for Medicaid beneficiaries with mental health needs. This snapshot provides a summary of antipsychotic drug delivery patterns among Fee-For-Service (FFS) DC Medicaid beneficiaries in Fiscal Year 2013 (FY13). The main findings were:

- Psychiatrists prescribed the majority of antipsychotic drugs to FFS Medicaid beneficiaries, followed by internal medicine doctors and family practice doctors.
- Quetiapine Fumarate was the top-prescribed antipsychotic drug by psychiatrists, internal medicine and family practice doctors but accounted for a small portion of total antipsychotic drug cost, presumably because it is a low-cost generic.
- Abilify® was the highest-cost antipsychotic drug prescribed among all provider groups.

Methodology
Medicaid claims data was extracted from the District of Columbia’s Medicaid Management Information System (MMIS) to identify all FFS claims in FY13 with a National Drug Code (NDC) coding for an antipsychotic drug. These claims were then grouped by prescribing provider specialty as well as by drug type. The number of paid claims for a given drug was used as a direct proxy for prescription rate among the FFS-enrolled district population, of which 17% enrolled are age 0 – 20 and 83% are age 21 and older.

Results
Psychiatrists prescribed 85% of all antipsychotic drugs to FFS Medicaid beneficiaries, followed by internal medicine doctors (10%), and family practice doctors (2%). Quetiapine Fumarate was the top-prescribed antipsychotic drug among all provider groups, accounting for 27% of all psychiatrist-prescribed antipsychotics and 30% of all internal medicine and family practice-prescribed antipsychotics. Despite its high prescription rate, Quetiapine Fumarate accounted for less than 6% of total antipsychotic drug cost among these provider groups, presumably because it is a low-cost generic version of Seroquel®. Abilify® was the most costly antipsychotic drug prescribed, comprising 49% of the total cost of psychiatry-prescribed antipsychotics and 74% of the total cost of internal medicine and family practice-prescribed antipsychotics.

Conclusions/Future Directions
Doctors in specialties other than psychiatry prescribed 15% of all antipsychotic prescription drugs to District of Columbia Medicaid beneficiaries in FY13. Atypical antipsychotics Quetiapine Fumarate and Abilify® comprised the largest prescription rate and cost, respectively, among these prescriptions. As atypical antipsychotics are used to treat more serious mental health conditions, future research could investigate the underlying causes of this high prescription rate among non-psychiatric providers.

Data was extracted by date of service from the DC Government’s Medicaid Management Information System (MMIS) in March, 2014. All denied and zero-dollar FFS claims were excluded for this analysis. For code strings or for more information about this snapshot, please contact the Division of Research and Rate-Setting Analysis at the DC Department of Health Care Finance at 202-442-5988.