

Peer review policy cuts atypical antipsychotic use in children

November 16 2017



(HealthDay)—For young children, implementation of a peer review

prior authorization (PA) policy can reduce the use of atypical antipsychotic (AAP) medications, according to a research letter published online Nov. 15 in *JAMA Psychiatry*.

Julie M. Zito, Ph.D., from the University of Maryland in Baltimore, and colleagues used Medicaid administrative claims data from four geographically diverse [states](#) to examine the impact of [peer review](#) PA policies on AAP use among Medicaid-insured youth. Monthly and quarterly use of AAPs was assessed pre-[policy](#), during the transition period, and post-policy. Peer review policies were implemented for children younger than 8 years in state A, younger than 6 years in states B and C, and younger than 5 years in state D.

The researchers found that there was a significant decrease in AAP prevalence after policy implementation compared with the pre-policy period for children younger than 8 in state A (from 0.25 to 0.17 percent; odds ratio, 0.68); younger than 6 in states B and C (from 0.09 to 0.05 percent; odds ratio, 0.57 and from 0.09 to 0.07 percent; odds ratio, 0.76); and younger than 5 in state D (0.03 to 0.02 percent; odds ratio, 0.64). In states A, B, and C, AAP use among older youth (lacking [peer review](#)) increased significantly, while a non-significant decrease was seen in state D.

"These findings are consistent with recent national estimates suggesting that the rapid increase in AAP use among publicly insured [young children](#) had stabilized since 2008," the authors write.

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Citation: Peer review policy cuts atypical antipsychotic use in children (2017, November 16)
retrieved 10 April 2023 from

<https://medicalxpress.com/news/2017-11-peer-policy-atypical-antipsychotic-children.html>

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