The Service Coordinator's Role in Medication Management

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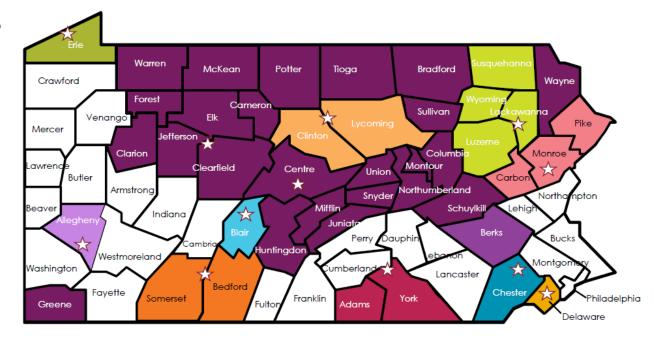
Learning Objectives

- Identify your role as a Service Coordinator in medication adherence
- Identify barriers to medication adherence
- Have a general understanding of medication and their classification
- Identify free medication education resources
- Identify common side effects associated with medication and medications with specific considerations



Community Care Membership

- Community Care is a Managed Care Organization (MCO) in the state of Pennsylvania. We cover 43 counties and have a membership of over 1,340,000 people.
- In Allegheny County, we have over 255,000 members
- Of that, 4496 members receive Blended Service Coordination services





Reasons Members Do Not Take Medication

• Individuals want to take medication as prescribed but have barriers that get in the way (e.g., psychiatric symptoms, unable to afford medication, unable to read/understand medication directions)

 Individuals who choose not to take medication because of an underlying reason (e.g., side effects, stigma)

Parental perspectives to managing medication

Why You Should be Concerned

- Taking medication as prescribed reduces psychiatric symptoms, improves role functioning, improves quality of life
- Not taking medication can lead to poor to lethal outcomes in both their medical and psychiatric diagnoses
- Having a stockpile of medication are risk factors for those individuals considering suicide
- Members with a Serious and Persistent Medical Illness (SPMI) have a shorter lifespan compared to their peers
 - Disparities include side effects due to medication; delayed, untreated or inadequately treated medical concerns; reduced access to quality nutrition; limited education about healthy dietary choices, etc.



Typical Doctor Visit

- 15-minute medication check
 - 5 minutes discussing current events
 - 5 minutes discussion medication
 - 5 minutes reviewing documentation



Your Role as a Service Coordinator

- Help individuals prepare for their appointment
 - doctors-visit-checklist-adult-purple (ccbh.com)
 - Doctor's Visit Checklist (ccbh.com)
- Support members during the appointment and/or provide information unknown to the psychiatrist or medical doctor
- Serve as a liaison to Primary Care Doctors
- Provide linkage to resources to assist with medication adherence
- Advocate, advocate, advocate

Doctor's Visit Checklist

Ooctor's name:		Date/time of visit:	
he reason why I am here t	today:		
What I want to talk to my d	octor about today:		
Medicine	How much do I take?	When do I take it?	How should I take it? (pill, liquid)
	_		
	_		
	_		-
Things I need to tell my d	loctor today:		
☐ Any symptoms.		☐ If I am on any me	dicine from other
□ Any side effects.		doctors.	
 If I am I taking the med ordered. 	dicine as my doctor	 If I am taking any buy at the store. 	medicine I can just
☐ How the medicine is working.		 If I am drinking or taking other medicine or drugs. 	
☐ Worries I have about the medicine.		☐ If there is something I don't understand.	
□ How I have been doing.		☐ Ideas I have abou	ut managing my illness.
☐ How I have been feeling.			
☐ If I saw any other doctor	ors, even medical doctors		



Addressing Barriers to Medication Adherence

- What you can look for:
 - Unused medication
 - Expired medication
 - Medication all in one bottle
 - Medications belonging to someone else
 - Medications in unmarked bottles
 - Side effects that are both reported and not reported
 - Irregular timing of medication doses



Addressing Barriers to Medication Adherence

• Free Phone applications: epocrates (can assist with pill identification)

• Websites:

- www.uptodate.com
- www.micromedex.com
- www.nami.org
- www.wikipedia.com
- Medication reminders: phone calendar reminder, pill box, bubble pack, pill dispensing machine, mobile medication referral, long-acting injectables, compounding pharmacies



Behavioral Health Medication

Medication Type	Side Effects and Signs of Toxicity	Withdrawal/Discontinuation Symptoms
Anticonvulsants	Weight gain, confusion, sedation, rash	Seizures, irritability, anxiety
Anxiolytics	Sedation, falls, confusion	Seizures, tremors, anxiety, fast HR
Stimulants	Fast HR, tremors, insomnia, low appetite	Fatigue, hypersomnia, depression
Antidepressants	Akathisia, agitation, insomnia, weight changes, mania, sexual side effects, cardiac arrhythmias	Flu-like symptoms, sensory disturbances, nausea, hyperarousal
Antipsychotics	High cholesterol, diabetes, sedation, movement disorders, dry mouth, constipation, gynecomastia/lactation, cardiac arrythmias	Increased psychotic symptoms, movement disorders, insomnia, nausea, high BP, anxiety
Lithium	Vomiting/diarrhea, tremors, confusion, balance problems, kidney failure, neuropathy	Recurrence of mania



Medications with Specific Considerations

- Clozapine: missing more than a few doses requires restarting at a very small dose due to risk to white blood cells
- Lamotrigine: missing more than a few doses requires restarting at a very small dose due to risk of triggering autoimmune rash
- All benzodiazepines: tolerance is quickly developed, leading to patterns of overuse/abuse. Stopping suddenly can be life threatening, more so from high doses
- Effexor/Cymbalta: withdrawal symptoms can occur after missing 1-2 doses due to short half-life; other antidepressants may be preferred if this keeps happening
- Many antipsychotics become less effective if people are smoking cigarettes, so doses often need to be increased after discharge from the hospital
- Lithium is cleared by the kidneys and affected by hydration status. Lithium levels can also be increased significantly if people take with ibuprofen or naproxen



Questions?



Contact Us

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