



Dear Provider,

Magellan Behavioral Health of Pennsylvania, Inc. (Magellan) is committed to ensuring that members of all ages served from its Newtown and Bethlehem Care Management Centers receive behavioral health services consistent with best practice standards. Advances in clinical research and the documentation of best practice standards evolves each year and, as a Magellan network provider, we ask you to join in our dedication to continuous quality improvement and the delivery of a “best practice” standard of care.

As you are aware, metabolic syndrome and the importance of monitoring the metabolic side effects of atypical, or second generation antipsychotics (SGAs), continues to receive much attention from psychiatrists, endocrinologists, cardiologists, other medical specialists, and the legal profession. The SGAs are associated with a varying, but concerning risk for hyperglycemia, obesity, dyslipidemia, and diabetes. At the same time, individuals requiring antipsychotic treatment already are at a higher risk for the triad of obesity, diabetes and cardiovascular disease making them particularly vulnerable to additional medication-related effects. In 2003, the FDA changed the labeling of SGAs to include the risk for diabetes. Subsequently, in 2004, the American Psychiatric Association, the American Diabetes Association, the American Association of Clinical Endocrinologists and the North American Association for the Study of Obesity jointly published a rare consensus statement recommending routine monitoring of risk indicators of metabolic syndrome including body weight, fasting glucose, and serum lipid profiles.¹

If your facility provides medication management services to Magellan member and/or if you are a prescriber of medication associated with the risk factors for metabolic syndrome, Magellan requires that you have a policy and procedure for the screening and monitoring of metabolic syndrome parameters. With any organizational policy or procedure, your policies should include an internal self-audit process with data collection and corrective action plans for deficiencies.

To confirm the existence of such a policy, please complete, sign and return the attached compliance attestation, by April 30, 2014.

In the coming year, Magellan’s quality improvement representatives will be monitoring medical records for compliance with your policy and procedure. The audit team also will review the data/action plans resulting from your internal audits. Please include in your records all efforts to collaborate with primary care and other medical specialists, since care coordination among behavioral and physical health providers contributes to positive health outcomes. Partnering with primary care physicians in the monitoring effort may also increase the support for whole health issues perceived by your patients and their adherence to recommendations.

¹ (Consensus Development Conference on Antipsychotic Drugs and Obesity and Diabetes. J. Clin Psychiatry. 2004 Feb; 65(2):267-72. Review.PubMed PMID: 15003083).

Magellan would strongly recommend that, for your patients who are prescribed antipsychotic medication, visits and record documentation include educational materials regarding prescribed medications, side effects, and the need for ongoing monitoring. Documentation should also include all parameters used to monitor signs of metabolic syndrome including laboratory testing (see the attached sample *Metabolic Syndrome Monitoring Log*). When appropriate, medical notes should reflect both referrals made to the member's primary care physician for indicated testing and any follow up on identified abnormalities. Metabolic screening, according to the consensus statement, should include items in the table below:

	Baseline	4 Weeks	8 Weeks	12 Weeks	Quarterly	Annually
Personal/Family Hx	X					X
Weight/BMI	X	X	X	X	X	
Waist Size (Circumference)	X					X
Blood Pressure	X			X		X
Fasting glucose	X			X		X
Fasting lipid profile	X			X		X*

*Although the referenced Consensus Statement recommends monitoring this parameter every five years, there is peer support for a more conservative annual monitoring for these high risk individuals. Each prescriber is encouraged to use their judgment.

Magellan's medical and quality improvement teams are not requiring the use of the metabolic screening log, but rather encouraging you, the prescriber, to develop a plan of monitoring that best meets the needs of your patients and also the best practice standards.

Thank you in advance for your cooperation and for your continued interest in providing the highest quality of care to your patients. If you should have any questions, please contact me at 1-800-686-1356; I can be reached at extension 63901.

Sincerely,



Sandra Zebrowski, MD
 Chief Medical Officer
 Magellan Behavioral Health of Pennsylvania, Inc.

Attachments: Metabolic Monitoring Provider Attestation and Metabolic Monitoring Log

**Magellan Behavioral Health of Pennsylvania, Inc.
Metabolic Monitoring Provider Attestation**

ATTN: Randi Rosenthal

Please complete the attestation below and return by April 30, 2014, via Fax, to 1-866-667-7744.

ATTESTATION

I attest that my organization is in compliance with the Magellan requirement for a policy, procedure, and internal auditing process for metabolic monitoring.

Name of Provider/Facility: _____

Executive Director, CEO, or Medical Director (Signature)

Date

Executive Director, CEO, or Medical Director (Printed Name)



Metabolic Syndrome Monitoring Log

Patient Name: _____

	Risk Criteria ²	Baseline	4 weeks	8 weeks	12 weeks	Annually
Date of Assessment		_ / _ / _	_ / _ / _	_ / _ / _	_ / _ / _	_ / _ / _
Personal History	• Obesity	D Yes D No				D Yes D No
	• Diabetes	D Yes D No				D Yes D No
	• Dyslipidemia	D Yes D No				D Yes D No
	• Hypertension	D Yes D No				D Yes D No
	• Cardiovascular Disease	D Yes D No				D Yes D No
Family History	• Obesity	D Yes D No				D Yes D No
	• Diabetes	D Yes D No				D Yes D No
	• Dyslipidemia	D Yes D No				D Yes D No
	• Hypertension	D Yes D No				D Yes D No
	• Cardiovascular Disease	D Yes D No				D Yes D No
Weight (BMI)	Overweight: 25.0-29.9 Obese \geq 30.0					
Waist Circumference	Males < 40 ¹ Females < 35 ¹					
Blood Pressure	Hypertension- >140/90 ²					
Fasting Plasma Glucose	Pre-Diabetes 100-125 ¹ mg/dL Diabetes \geq 126 mg/dL					
Fasting Lipid Profile	Total Cholesterol < 200 mg/dL ¹ HDL > 40 ¹ LDL < 100 ¹ TG < 150 ¹					

Notes:

¹ Normal Values

² More frequent assessments may be warranted based on clinical status and specific anti-psychotic used