

CHALLENGE:

Claimant sustained industrial injury to head and neck in 2009. Diagnoses at the time of MSA preparation included concussion, headache, anxiety and depression. Intervention triggers identified by Tower's clinical team included combined use of opioids and benzodiazepines, multiple prescribers, multiple antidepressants, and off label use of lamotrigine. Total Morphine Equivalent Dosage (MED) was 160 mg / day and patient was experiencing opioid induced side effects. Total MSA cost projection = **\$269,015**.

Multiple Subscriber/ Off Label Drugs Case Study

SOLUTION:

With client approval, Tower's clinical team initiated a Physician Peer Review to determine the appropriateness and necessity of the prescription drug regimen. The objective was to determine whether addictive behaviors were driving treatment and to make recommendations as to long term drug therapy to improve quality of life for the injured worker. Following the physician reviewer's dialogue with the two treating physicians, a written agreement was obtained to wean and discontinue opioid therapy to assess the need for antidepressants post-opioid and focus treatment on effective management of migraine pain and frequency.



RESULTS: \$210,143 IN SAVINGS

Through its Clinical Oversight Service, Tower contacted both psych and neuro physicians to monitor the weaning process. With each change in drug therapy, previous drugs were blocked with the PBM. An office summary overview was obtained and the current Rx history was reviewed for consistency with the medical record. Over a period of one year, both antidepressant and anti-anxiety medications were discontinued and Rizatriptan 10 mg was prescribed to manage patient's migraine headaches. MSA was finalized, submitted and approved by CMS at **\$58,872**. Total MSA savings were **\$210,143**.

