

# MAINE STATE LEGISLATURE

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# Prescription Drug Academic Detailing Program Calendar Year 2010

A Report by the Department of Health and Human Services  
Office of MaineCare Services

Submitted in accordance with  
Public Law 1999, c. 786, Pt. A, §3

**State of Maine  
Department of Health and Human Services  
Office of MaineCare Services  
Prescription Drug Academic Detailing Program**

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# **Reporting of Maine Prescription Drug Academic Detailing Program Calendar Year 2010**

## **Introduction**

Academic detailing is focused on improving the quality of care by providing unbiased, scientific evidence-based non-commercial data on the latest drug findings to prescribers.

The Department of Health and Human Services, Office of MaineCare Services (‘the Department’) is required by 22 MRS §2685 to

“...establish a prescription drug academic detailing program. . . to enhance the health of residents of the State, to improve the quality of decisions regarding drug prescribing, to encourage better communication between the Department and health care practitioners participating in publicly funded health programs and to reduce the health complications and unnecessary costs associated with inappropriate drug prescribing.”

As a result, the Department, working with Prescription Policy Choices, a nonprofit, nonpartisan 501(c)(3) educational and public policy organization which provides objective research, information, and on-the-ground expertise on prescription drug policy, began a workgroup that consisted of policy makers, advocates and medical leaders. The focus of the group is to educate prescribers on prescription medication using clinical information from an independent group of experts with no financial interest.

Emulating the Pennsylvania PACE academic detailing program, the Maine group received training from Harvard and incorporated material that was being used by many other states. A work group and committee were formed in 2008.

Maine’s academic detailing program was named Maine Independent Clinical Information Service or MICIS.

MICIS has an advisory committee that consists of representatives from advocate groups, universities, providers, pharmacists, detailers and a Department representative. The Academic Detailing Advisory Committee meets quarterly. Agenda topics include a review of recent detailing projects or office visits including survey results and comments, schedule of events, marketing material and future potential programs. Specialty Providers are asked to join the committee when topics pertain to their area of expertise. A smaller work group meets monthly to analyze data, prepare material, and plan an outreach schedule.

## **The Academic Detailers**

The academic detailers currently providing training and outreach are contractors with the Maine Medical Association.

Erika Pierce, a practicing physician assistant and native of Central Maine, has worked in primary care settings in Maine since graduating in 2005 and currently is employed both in the emergency department and as a hospitalist by Redington-Fairview Hospital in Skowhegan.

Wayne Jackson has an extensive career in medical sales. He spent over 33 years working for Sandoz/Novartis Pharmaceuticals with physician practices and health systems across Maine,

New Hampshire and Vermont and in specialties including endocrinology, rheumatology, dermatology, podiatry and psychiatry. Mr. Jackson currently lives in Windham.

While Ms. Pierce provides education to large provider offices in groups up to 30 participants, Mr. Jackson focuses on one-on-one detailing visits with prescribers.

### **Education**

Training and module materials for the academic detailers are provided by the Independent Drug Information Service (IDIS), a program of the Alosa Foundation. IDIS is made up of a team of physicians and drug researchers at Harvard Medical School who comprehensively evaluate medical journals and other data sources to pull together the best available information about drugs used commonly in primary care practice. They synthesize it into concise, clinically relevant summaries. These materials are presented to practitioners in their offices by the MICIS detailers.

The first detailing topic offered by the MICIS detailers, beginning in 2009, was Type 2 Diabetes. Practices continued to request the Type 2 Diabetes module through 2010. The program also launched a module on anti-platelet therapy in late-2009 and continued to offer this topic in 2010. The detailers were trained in a third module, hypertension therapy, in October 2010. Several practices requested trainings in this module before the close of 2010 and a number scheduled trainings for the beginning of 2011.

Between the efforts of the detailers we are pleased to report that the program exceeded the 2010 contract goals of reaching 25 practices and 100 prescribers. **In 2010, the program reached 32 practices and 327 prescribers through CME events and group presentations.** This included 16 trainings on the diabetes module, 14 on the anti-platelet module and two on the hypertension module. **Twenty-one additional prescribers and 19 practices were reached through one-on-one detailing visits** on the hypertension module. Together with 84 prescribers detailed in 2009 on the diabetes module, **the program has now educated a total of 432 prescribers.** The goals for the diabetes module are that prescribers who participate will be able to:

- Understand the treatment goals for patients with diabetes
- Recognize the role of non-medication management of diabetes, including weight management, diet and exercise
- Improve their ability to select evidence-based medications or combination therapies to treat diabetes, including oral agents and insulin

The diabetes module has received consistently positive evaluations. On a scale of 1 to 5, with 5 being the best,

- **93% of prescribers answered 4 or 5 when asked if the Maine Independent Clinical Information Services (MICIS) provided them with useful information about the commonly used medications for Type 2 Diabetes**
- 93% of prescribers answered 4 or 5 when asked if the content represented unbiased and balanced information about drugs
- 85% answered 4 or 5 when asked if the program provided a perspective on prescribing that was different from what they get from other sources
- 77% answered 4 or 5 when asked if they expect to make changes in their treatment plan and prescribing habits, based upon the clinical information that they received

The goals for the anti-platelet therapy module are that after the training, a prescriber will:

- Recognize the role of anti-platelet therapy for the primary and secondary prevention of myocardial infarction, stroke and other cardiovascular events
- Improve their ability to choose the right antiplatelet therapy
- Understand the benefits and risks of specific anti-platelet regimens; and
- Understand the roles anti-platelet drugs play in different clinical settings

The anti-platelet module has also received very positive evaluations. On a scale of 1 to 5, with 5 being the best,

- **97% of prescribers answered 4 or 5 when asked if the Maine Independent Clinical Information Services (MICIS) provided them with useful information about the commonly used medications for antiplatelet therapy**
- 96% of prescribers answered 4 or 5 when asked if the content represented unbiased and balanced information about drugs
- 86% answered 4 or 5 when asked if the program provided a perspective on prescribing that was different from what they get from other sources
- 76% answered 4 or 5 when asked if they expect to make changes in their treatment plan and prescribing habits, based upon the clinical information that they received

The MICIS program, overall, is strongly supported by those prescribers who have participated in both of the two programs.

- **96% answered 4 or 5 when asked if it made sense for the state of Maine and the Maine Medical Association to devote resources to this activity.**

In addition, 98% of those who responded said that their overall evaluation of MICIS was either “excellent” or “good,” and 95% of those who responded said that the practical value of the service to their daily practice was either “excellent” or “good.”

The MICIS program is seeing a number of invitations to return with new modules to practices that have received trainings on older modules, also indicating that the program is well received by those who have participated.

The hypertension module began at the end of 2010. The goals for the hypertension module are that prescribers will:

- Recognize the current JNC-7 blood pressure classifications and treatment goals
- Understand that hypertension if untreated, increases the risk of stroke, myocardial infarction and heart failure
- Understand the JNC-7 guidelines for management of hypertension
- Recognize that JNC-7 recognizes some "compelling indications" which when present require tailoring hypertension therapy.

Evaluation data on the hypertension module will be available in 2011.

## **Funding**

The program is currently funded by fees collected from pharmaceutical companies as a cost of doing business in the state of Maine in accordance with 22 M.R.S.A. §2700-A, governing clinical drug trials. With this funding, the Department has entered into two contracts:

Goold Health Systems (GHS) to provide data analysis and clinical support.

Maine Medical Association (MMA) to provide detailers with marketing material such as:

- Brochure
- Web site - [www.mainemed.com/academic/index.php](http://www.mainemed.com/academic/index.php)
- Detailers' material
- Training provided to detailers by the PACE program

At this time the Department is not able to provide a savings number in drug cost that is directly attributable to detailing.

## **Conclusion**

As stated in the enabling statute, the Department was directed to establish a program to enhance the health of residents of the State of Maine by improving the quality of decisions regarding drug prescribing and encouraging better communication between the department and health care practitioners participating in publicly funded health programs. The Department has established such a program that resulted in an education program and a committee dedicated to making the program successful.

For 2011, the MICIS program plans to continue to detail with the three existing modules. The program is currently receiving requests to detail these modules at larger practices, residency training programs, and conferences, positioning the program to have a broad reach in the upcoming year. The detailers also plan to attend IDIS trainings and roll out modules on two additional topics: atrial fibrillation and management of routine chronic pain. In addition OMS has helped convene a group of psychiatrists who are working to develop a Maine-specific module on the appropriate use of antipsychotic medications.

For further information on the program, attached is an article published in the Press Herald on August 31, 2010.

## **Maine Voices: Doctors and patients don't have to rely on TV for drug information**

**Physicians have better sources than salesmen and advertisements to guide prescribing choices.**

By JENNIFER RECK

### **ABOUT THE AUTHOR**

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**HALLOWELL** — Pharmaceutical manufacturers reported spending \$90.6 million on marketing prescription drugs in Maine in 2008, according to a report by Maine's **Department of Health and Human Services**.

That represents an increase of 33 percent over the \$68 million spent in 2007. Though pharmaceutical marketing expenditures are increasing, a recent report by the market intelligence firm Access Monitor reveals that in 2009 the number of doctors willing to see most pharmaceutical sales representatives fell by 20 percent, and the number who would see no "reps" at all increased by 50 percent.

The data reflect an ongoing trend among doctors to limit pharmaceutical representatives' access to their practices. Physicians are saying "no" to industry marketing and "yes" to independent sources of information on prescription drugs.

As this shift away from information provided by sales representatives is taking place, where can doctors turn for reliable, unbiased information?

One new option is the Maine Independent Clinical Information Service, also known as MICIS. This program was launched last summer and is administered by the Maine Medical Association on behalf of the state.

The educational materials are produced by independent clinical experts from Harvard Medical School with no commercial ties to the pharmaceutical industry. They perform exhaustive reviews of the evidence to provide the information your doctor needs to help make the best drug choices for you.

To date, the program has reached approximately 350 Maine prescribers through outreach visits to discuss educational modules on type 2 diabetes and anti-platelet therapy. Survey responses to these modules have been very positive.

Consumers can get involved too and take advantage of independent information on prescription drugs provided by the nonprofit Consumers Union, publisher of the popular Consumer Reports magazine. Their freely accessible website, Consumer Reports Health Best Buy Drugs ([www.crbestbuydrugs.org](http://www.crbestbuydrugs.org)), compares the safety, efficacy and costs of commonly used drugs.

This information provides a better starting point for a conversation with your doctor about prescription drugs than an ad seen on TV. If you are intrigued by an ad though, before you ask your doctor, check this website for its AdWatch video series to learn about the important information these ads leave out.



Doctors and patients are making important changes to the practice of medicine when they turn to independent sources for information on prescription drugs such as MICIS and Consumer Reports Health Best Buy Drugs.

Join the trend by looking for independent information and make sure you are getting the best drug for you at the best price.

- Special to the Press Herald

*Prescription Policy Choices (PPC) is a nonprofit, nonpartisan 501(c) (3) educational and public policy organization that works to expand access to safe, effective, and affordable prescription drugs. Learn more about PPC @ [www.policychoices.org](http://www.policychoices.org).*