

## CMS Prescribing Limits for PRN Psychotropics

### **Psychotropics are a broad class of medications that act on brain chemicals**

Psychotropics include: anti-anxiety agents • antidepressants • antipsychotics • mood stabilizers • sedatives • stimulants

Due to increased adverse effect risk in the elderly CMS issued limits for psychotropics when prescribed “as needed”:

### **Psychotropics (EXCLUDING antipsychotics)**

E.g.: Clonazepam, Lorazepam, Trazodone, Zolpidem

- Therapy Duration limit – 14 days
- Exception – can be > 14 days if prescriber rationalizes need:
  - o Documents rationale in medical record
  - o Indicates a specific duration
    - Can be up to 60-90 days to cover until the next evaluation of the resident
- If no rationale provided: order should be discontinued and provider contacted
- During community behavior meetings, evaluate PRN orders for:
  - o Continued clinical necessity
  - o Appropriate nursing documentation

### **Checking for Psychotropics – ViewMasterRx**

- Request ViewMasterRx psych report to be emailed daily
- Click blue Reports tab on left hand side of VMRx main menu
  - o Scroll down and click Report Scheduler under TOOLS
  - o Find Daily Psychotropic Drug New Starts report and click Schedule in right column
    - Selected Frequency: daily
    - Start date: “todays” date
    - Click boxes for: No End Date & Email (enter email)
    - Change Report Run Time to 7 AM (or a morning time you’d like to receive email)
    - Click acknowledgment statement (that requested emails are valid)
    - Click Schedule button in bottom right corner

### **Antipsychotic Psychotropics**

E.g.: Aripiprazole, Haloperidol, Olanzapine, Risperidone

- Therapy Duration Limit – 14 days (NO exceptions)
- Prescriber/physician may write for a new order (≤14 days) only if:
  - o Resident is evaluated via direct examination & assessment of current condition/progress
- Prescribers must document the following in the medical record for a new order as part of the evaluation:
  - o Is the medication still needed on PRN basis?
  - o What is the benefit to the resident?
  - o Have the resident’s expressions or indications of distress improved as a result of the PRN medication?

### **Guide for Nurse Managers in managing PRN orders**

- Keep track of PRN psychotropics in order to:
  - o Obtain and enforce stop dates from prescribers
  - o Prompt prescribers to document appropriately
- Check all PRN psychotropic orders for stop dates at least weekly
- Check for resident-specific rationale if stop date >14 days
- Notify prescriber if stop date is within the week (allows time for prescriber to clinically evaluate)

**Nurse Managers** play an essential role in managing PRN psychotropic use!