

**COMPARISON OF HEALTHCARE USE AND  
COSTS OF ADULT PATIENTS WITH “PURE  
OBSESSIVE-COMPULSIVE DISORDER” VERSUS  
“PURE DEPRESSION”:  
*NINE-YEAR CLAIMS ANALYSIS OF FLORIDA  
MEDICAID ENROLLEES***

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**Research Funded by Jazz Pharmaceuticals, Inc.**

# BACKGROUND: OBSESSIVE-COMPULSIVE DISORDER (OCD)

- Anxiety disorder characterized by
  - Recurrent, unwanted thoughts (obsessions) and/or
  - Repetitive behaviors (compulsions)
- U.S. estimated prevalence 2%
- Many studies document higher use of outpatient medical services among depressed patients
  - Anecdotal reports among patients with OCD
- Healthcare (medical and psychiatric) costs?

# OBJECTIVE

- **Compare healthcare use and costs of newly-diagnosed<sup>1</sup> patients with “pure OCD”<sup>2</sup> (P-OCD) to matched<sup>3</sup> sample of newly-diagnosed patients with “pure depression”(P-D)<sup>4</sup>**
1. Newly-diagnosed: No OCD (or depression) diagnosis 2 years preceding 1st (index) diagnosis
  2. Pure OCD: no pre-existing or comorbid bipolar disorder, psychoses, or depression
  3. Matched: sex, race/ethnicity, medical illness severity (Charlson index), age/year at index diagnosis
  4. Pure Depression: no pre-existing or comorbid bipolar disorder, psychoses, or OCD)



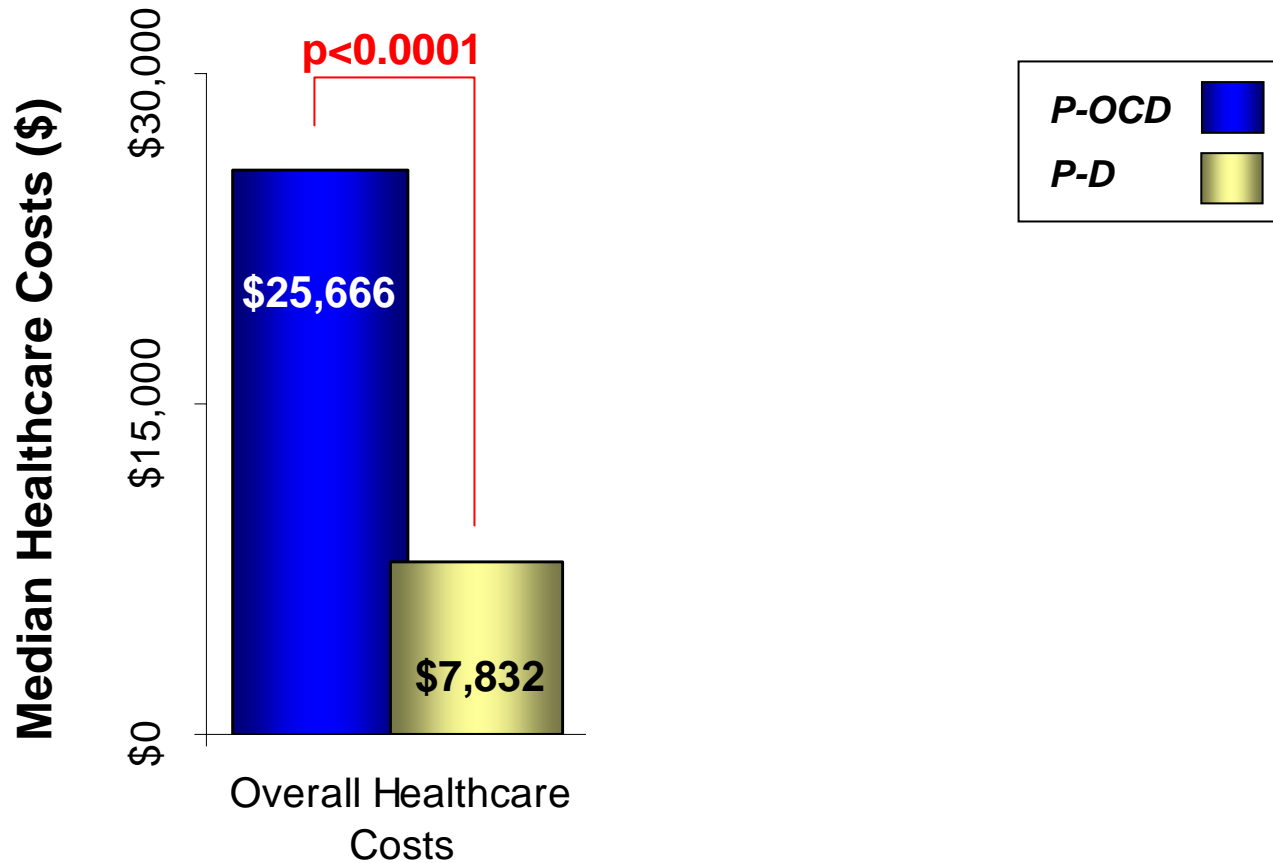
# METHODS: FLORIDA MEDICAID DATASET

- Florida Medicaid: > 5 million enrollees
- Computerized claims records
  - Demographics
  - ICD-9 (diagnoses)
  - CPT (procedures)
  - NDC (drugs)
- Information patient de-identified and HIPAA compliant
- BioMedEcon obtained 9 years of data (1997-2006)



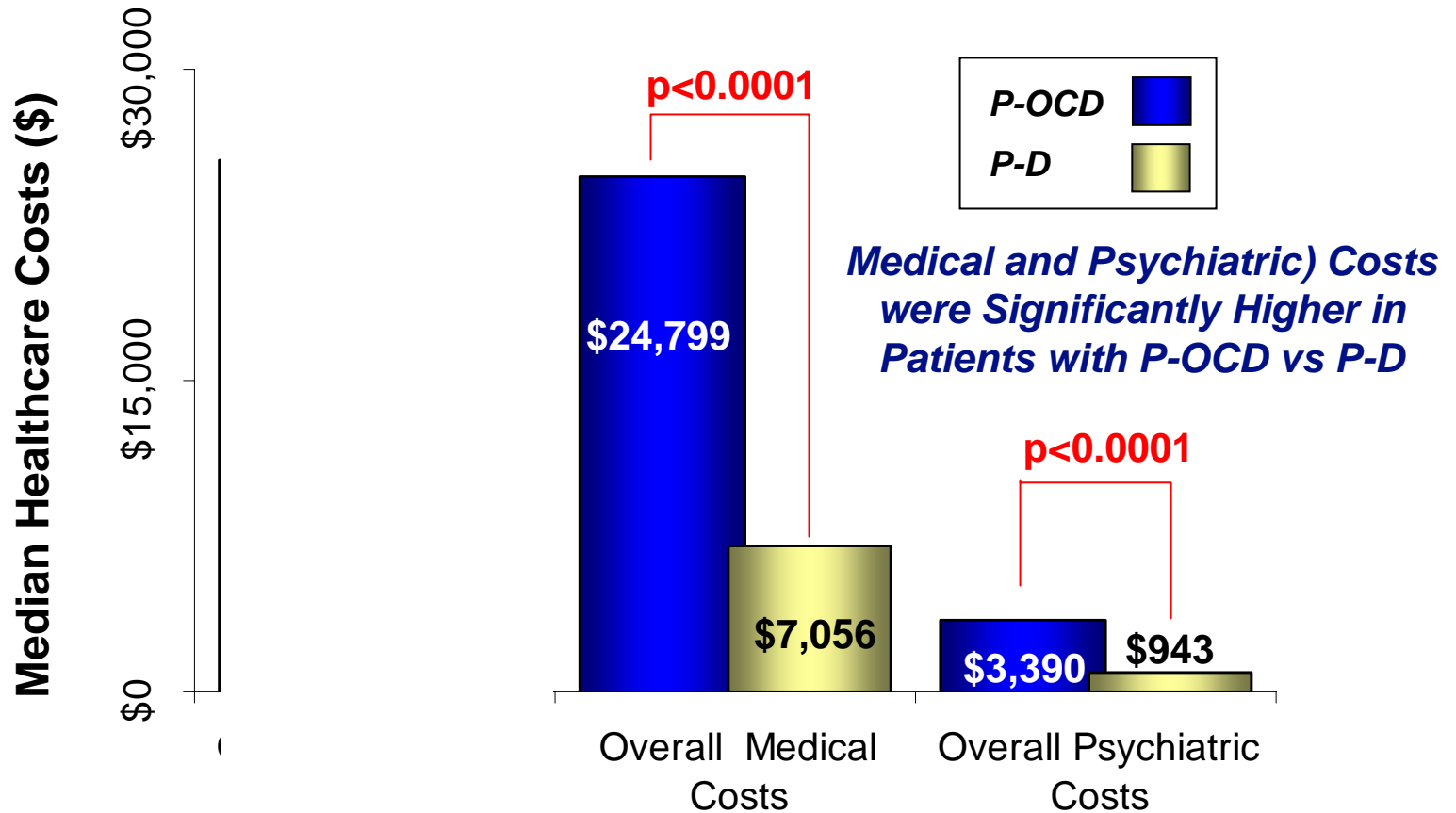
# RESULTS: MEDIAN OVERALL 2-YEAR HEALTHCARE COSTS

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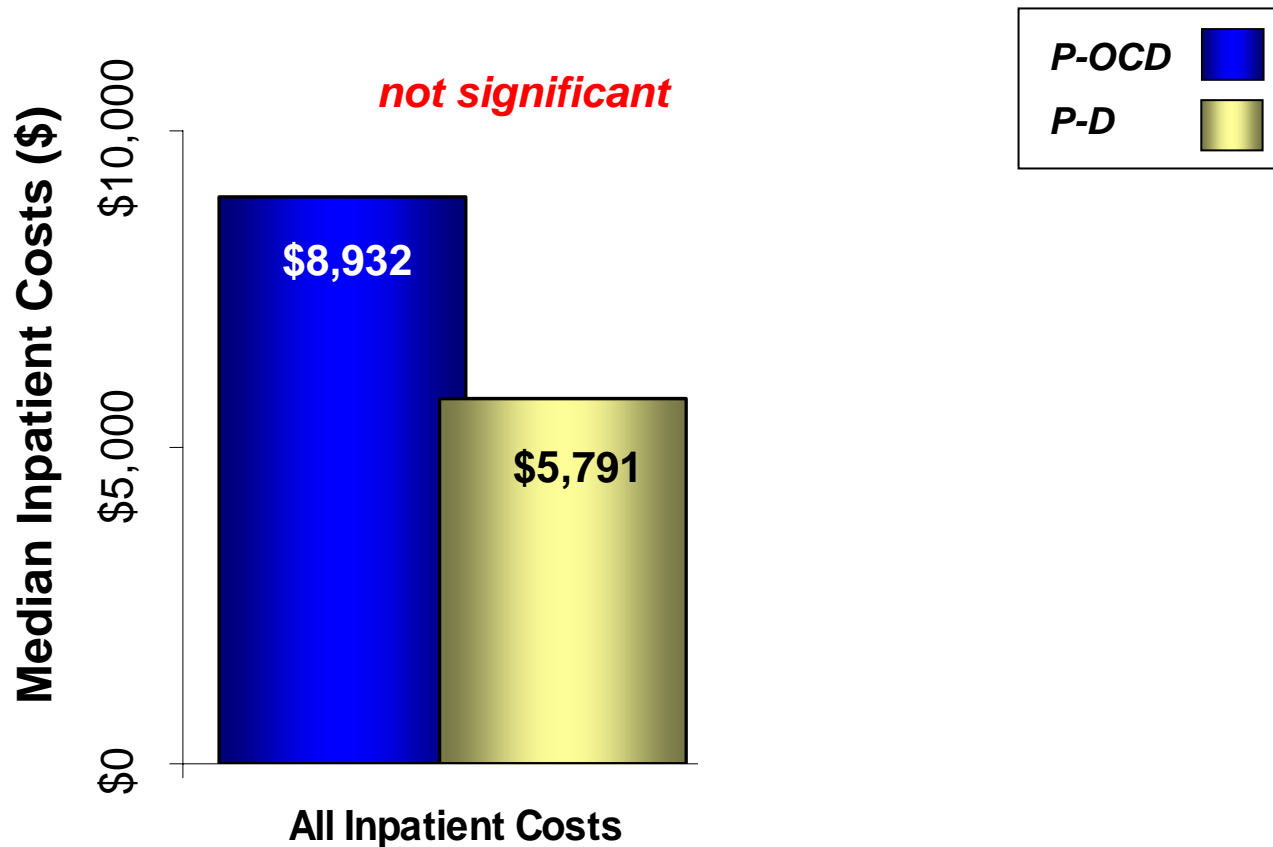


# Summary of Results

	<b>Total Costs</b>	<b>Medical Costs</b>	<b>Psychiatric Costs</b>
<b>Overall Healthcare Costs</b>	▲	▲	▲
<b>Inpatient Costs</b>			
<b>Outpatient Costs</b>			
<b>Pharmacy Costs</b>			

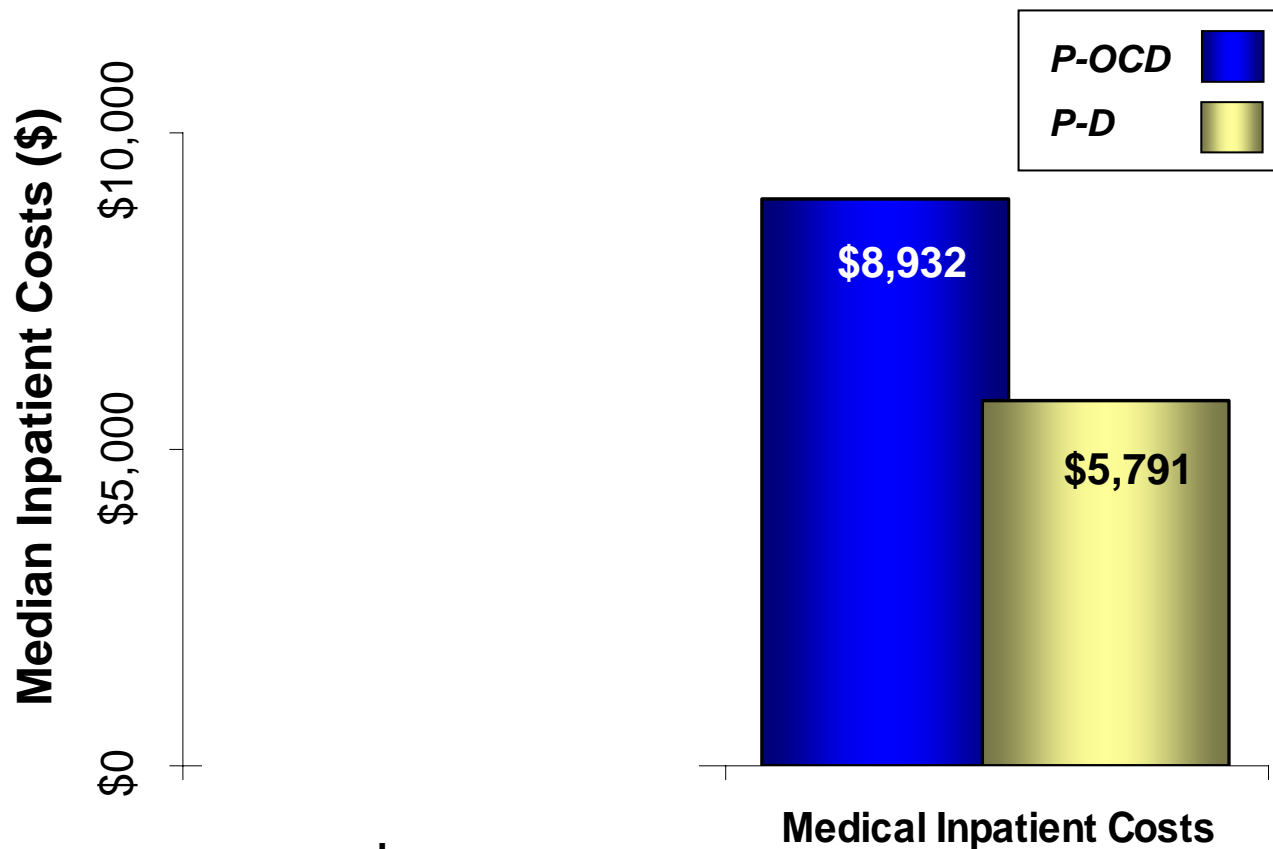
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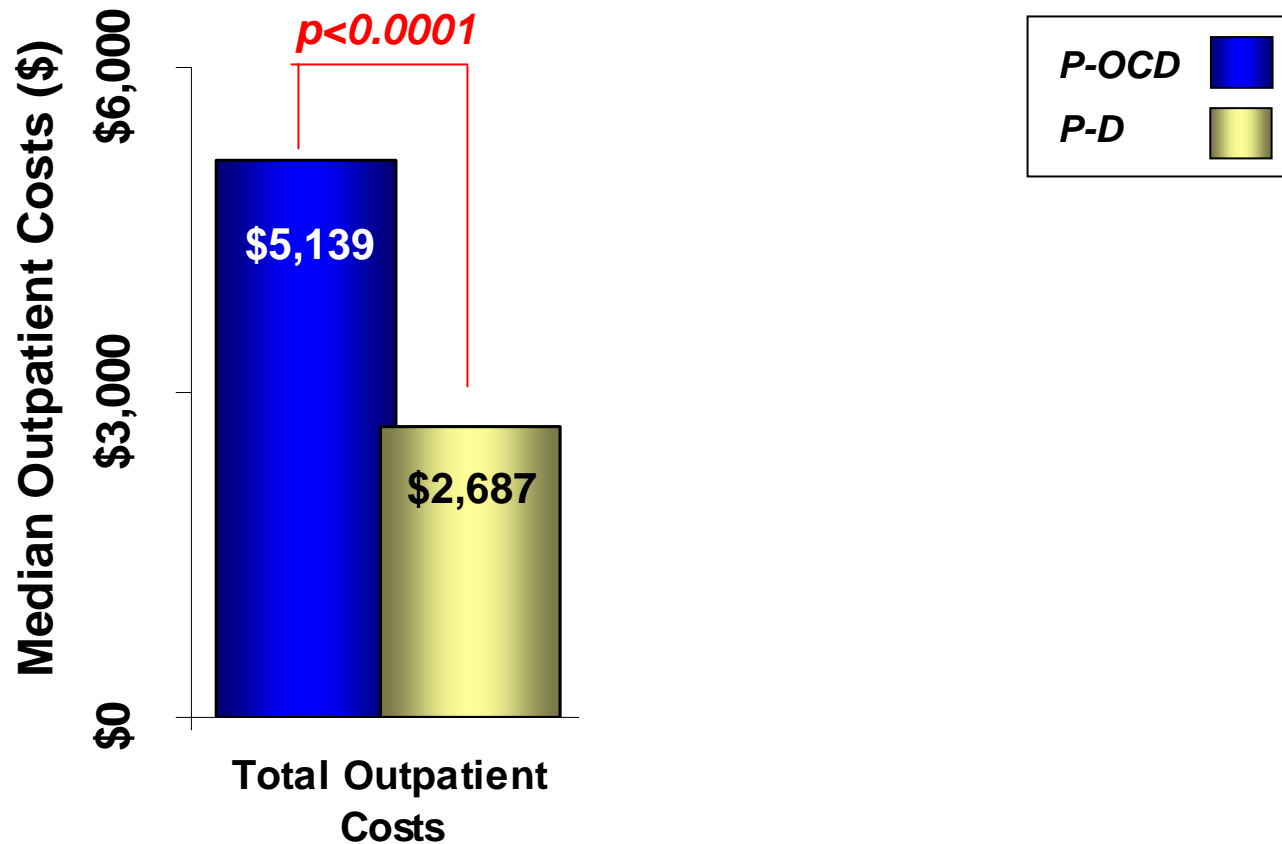


# Summary of Results

	<b>Total Costs</b>	<b>Medical Costs</b>	<b>Psychiatric Costs</b>
<b>Overall Healthcare Costs</b>	▲	▲	▲
<b>Inpatient Costs</b>	NS	NS	-
<b>Outpatient Costs</b>			
<b>Pharmacy Costs</b>			

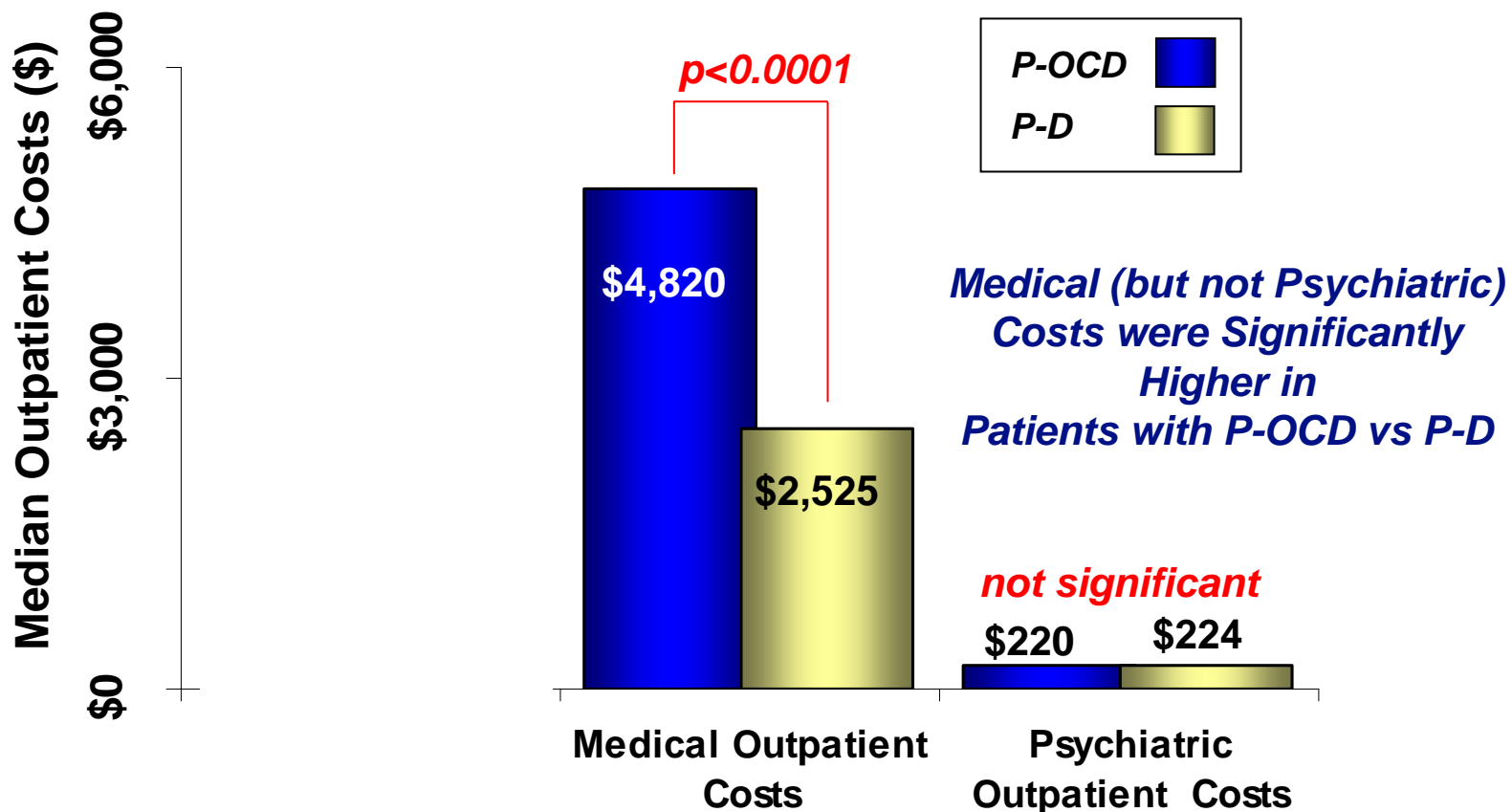
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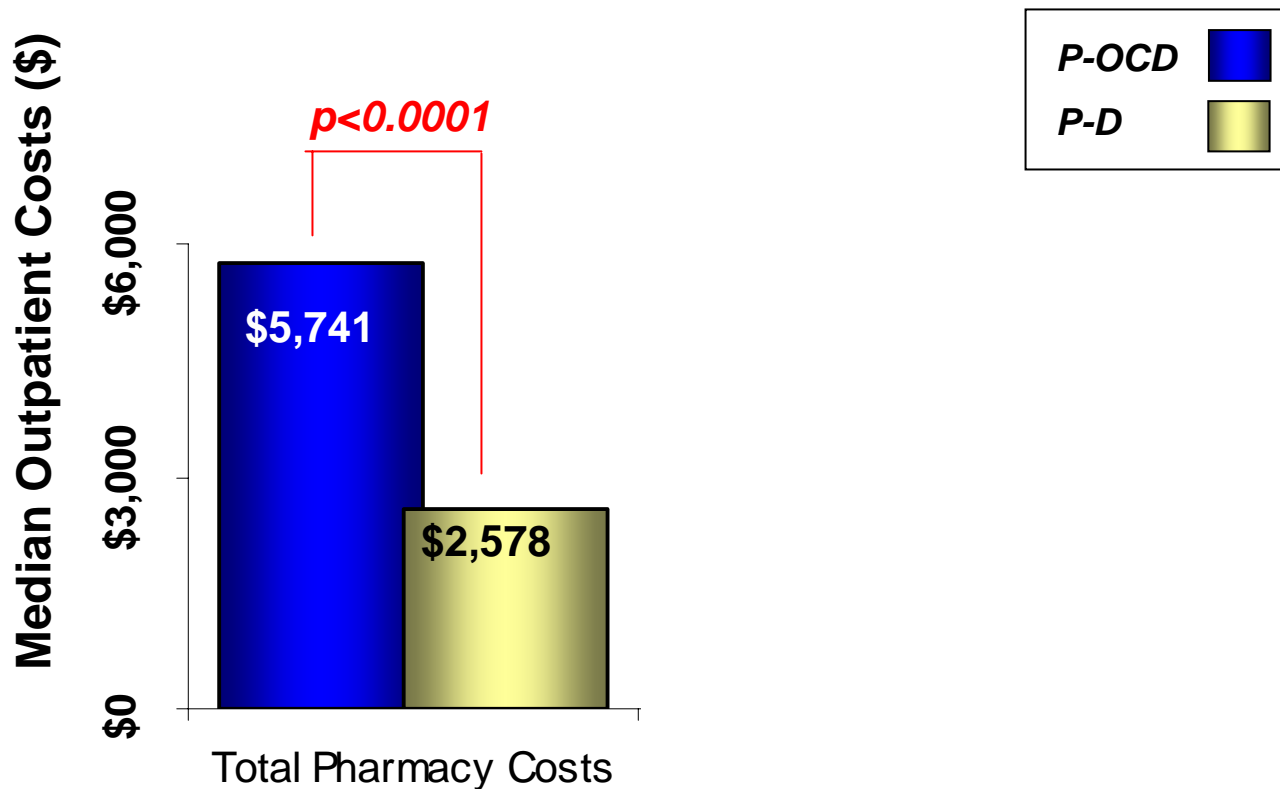


# Summary of Results

	<b>Total Costs</b>	<b>Medical Costs</b>	<b>Psychiatric Costs</b>
<b>Overall Healthcare Costs</b>	▲	▲	▲
<b>Inpatient Costs</b>	NS	NS	-
<b>Outpatient Costs</b>	▲	▲	NS
<b>Pharmacy Costs</b>			

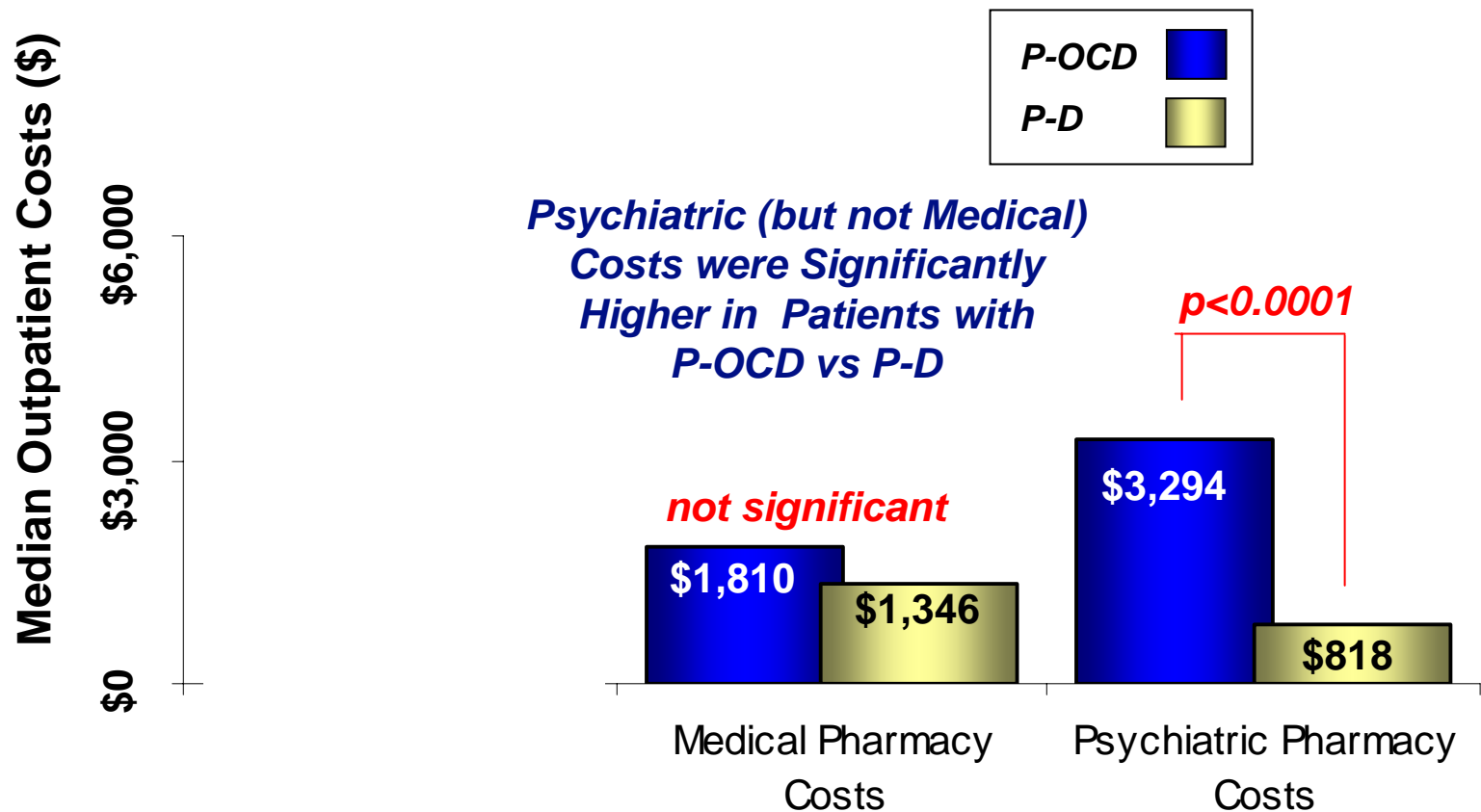
# MEDIAN 2-YEAR PHARMACY COSTS

*Total Pharmacy Costs Were Significantly Higher in Patients with P-OCD vs P-D*



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*Total Pharmacy Costs Were Significantly Higher in Patients with P-OCD vs P-D*



# Summary of Results

	Total Costs	Medical Costs	Psychiatric Costs
Overall Healthcare Costs	↑	↑	↑
Inpatient Costs	NS	NS	-
Outpatient Costs	↑	↑	NS
Pharmacy Costs	↑	NS	↑ *

\* Antimanics, Antidepressants, Antipsychotics, Anxiolytics, Mood Stabilizers, Sedative/Hypnotics, Stimulants

# CONCLUSIONS

# CONCLUSIONS: OUTPATIENT COSTS

- Although patients were matched on medical illness severity, those with P-OCD had 2 times greater outpatient medical costs than those with P-D.
  - Findings suggest that care for patients with OCD occurs in the outpatient medical setting

	Total Costs	Medical Costs	Psychiatric Costs
Overall Healthcare Costs	▲	▲	▲
Inpatient Costs	NS	NS	-
Outpatient Costs	▲	▲	NS
Pharmacy Costs	▲	NS	▲

# CONCLUSIONS: PHARMACY COSTS

- P-OCD patients had significantly greater psychotropic costs than those with P-D. This may be attributable to
  - Higher SSRI doses required<sup>4</sup>
  - More frequent use of concomitant psychotropics<sup>5</sup>
  - Inappropriate pharmacologic treatment?

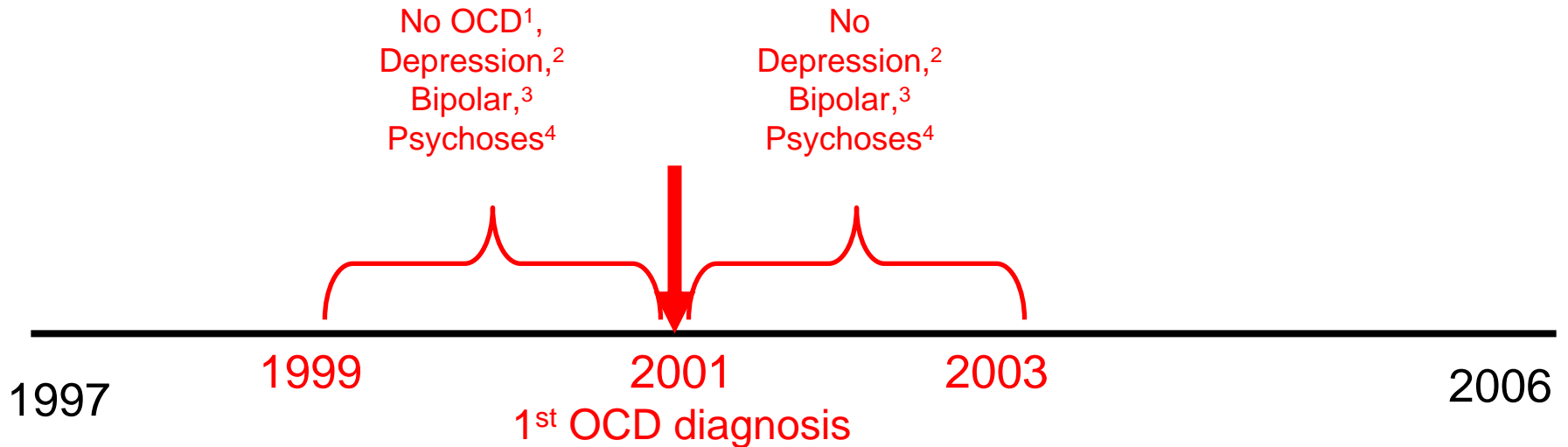
	Total Costs	Medical Costs	Psychiatric Costs
Overall Healthcare Costs	▲	▲	▲
Inpatient Costs	NS	NS	-
Outpatient Costs	▲	▲	NS
Pharmacy Costs	▲	NS	▲

# CONCLUSIONS

- Although a relatively rare disorder, the overall healthcare costs of patients with OCD appear to exceed those of patients with depression
- Findings suggest that care for patients with OCD commonly occurs in the outpatient medical setting
- Further research is required to determine whether appropriate treatment of OCD improves patient outcomes and reduces costs

BACKUP

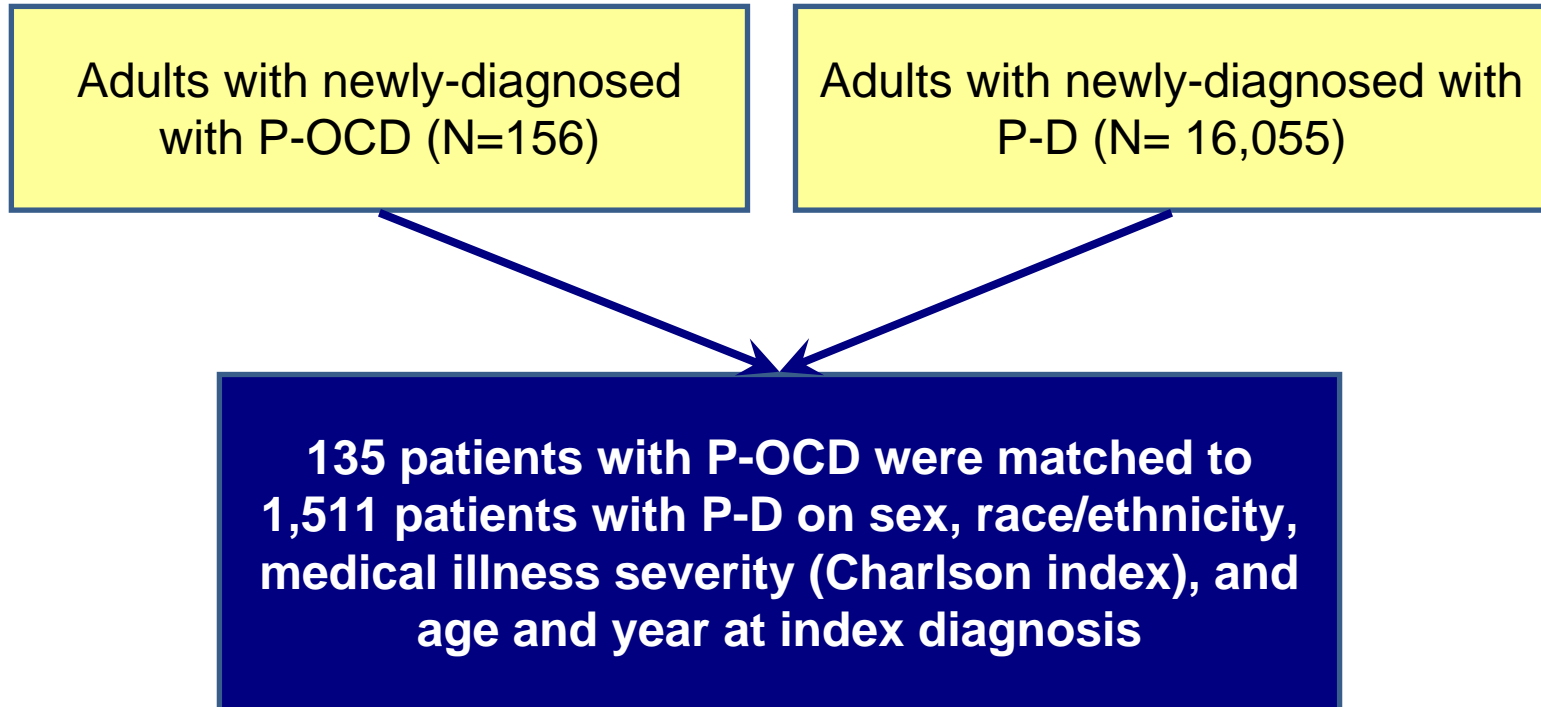
# METHODS: P-OCD PATIENT IDENTIFICATION



1. *OCD = ICD-9 300.3*
2. *Depression = ICD-9 296.2, 296.3, 296.9, 300.4, 309.0, 309.1, 311*
3. *Psychoses = ICD-9 295, 298*
4. *Bipolar disorder = ICD-9 296*

P-D patients were identified similarly, except index claim was depression and exclusion diagnoses included OCD rather than depression.

# RESULTS: PATIENT MATCHING



- 21 P-OCD patients could not be matched
- Numbers of matches of P-OCD to P-D patients ranged from 1 to 76