2025 Star measure (polypharmacy): Use of multiple central nervous system-active medications in older adults

This measure tracks the number of older adults (age 65 and older) prescribed three or more unique central nervous system (CNS) medications with fills for two or more 30-day supplies. An example patient is prescribed three different CNS medications. This patient has an increased safety risk. This can affect the overall Star rating.

- **Amitriptyline** (for sleep): Filled 30 tablets on January 5 and 30 tablets on February 5.

- **Lorazepam** (for anxiety): Filled 30 tablets on January 10 and 30 tablets on February 10.

- **Pregabalin** (for fibromyalgia): Filled 30 tablets on January 8 and 30 tablets on February 8.

The use of multiple CNS active medications puts older adults at increased risk of falls. Falls in older adults are associated with serious injuries.

CNS-active medications*

Class	CNS-active medications	Potentially Safer Alternatives
Antiepileptics ᵞ	Brivaracetam, cannabidiol, carbamazepine, divalproex sodium, eslicarbazepine, ethosuximide, ethotoin, felbamate, fenfluramine, gabapentin, lacosamide, lamotrigine, levetiracetam, methsuximide, oxcarbazepine, perampanel, phenobarbital, phenytoin, pregabalin, primidone, rufinamide, stripentol, tiagbine, topiramate, valproic acid, vigabatrin, zonisamide	If not used for seizures, alternatives found based on reason for use.
Antipsychotics	Apriprazole, asenapine, brexpiprazole, cariparzine,	Recommend lowest effective dose while avoiding other CNS

	chlorpromazine, clozapine, fluphenazine, haloperidol, iloperidone, loxapine, lumateperone, lurasidone, molindone, olanzapine, paliperidone, perphenazine, pimavanserin, pimozide, quetiapine, risperidone, thioridazine, thiothixene, trifluoperazine, ziprasidone	active medications where possible.
Benzodiazepines	Alprazolam, chlordiazepoxide, clobazam, clonazepam, clorazepate, diazepam, estazolam, flurazepam, lorazepam, midazolam, oxazepam, quazepam, temazepam, triazolam	Lorazepam, oxazepamπ
Sedative hypnotics	Eszopiclone, zaleplon, zolpidem	Doxepin (<6 mg), melatoninπ, ramelteonπ
Opioidsα	Benzhydrocodone, buprenorphineβ, butorphanol, codeine, dihydrocodeine, fentanyl, hydrocodone, hydromorphone, levorphanol, meperidine, methadone, morphine, opium, oxycodone, oxymorphone, tapentadol, tramadol	Alternatives found based on nature of pain syndrome (i.e., neuropathic, orthopedic, etc.)
Antidepressants: SNRI, SSRI, TCA**	Amitriptyline, amoxapine, citalopram, clomipramine, desipramine, desvenlafaxine, doxepin, duloxetine, escitalopram, fluoxetine, fluvoxamine, imipramine, levomilnacipram, milnacipram, nortriptyline, paroxetine, protriptyline, sertraline, trimipramine, venlafaxine	Recommend lowest effective dose while avoiding other CNS active medications where possible.

* Includes combination products that contain a target medication listed and the following routes of administration: buccal, nasal, oral, transdermal, rectal, and sublingual. Injectable and inhalation routes of administration are not included. α Includes prescription opioid cough medications. βExcludes single-agent and combination products used to treat opioid use disorder (i.e., buprenorphine sublingual tablets, all buprenorphine/naloxone combination products, and Probuphine®).

**SNRI = serotonin-norepinephrine reuptake inhibitors; SSRI = selective serotonin reuptake inhibitors; and TCA = tricyclic antidepressants.

π Non-formulary on Samaritan Advantage Health Plan (SAHP).

ᵞ Members with a diagnosis of seizures are excluded from the measure.

Samaritan Advantage Health Plan is an HMO with a Medicare contract and Oregon Medicaid contract. Enrollment in Samaritan Advantage Health Plan depends on contract renewal. InterCommunity Health Network CCO (IHN-CCO) is the Oregon Health Plan (OHP) Coordinated Care Organization for members who live in Benton, Lincoln and Linn counties. Samaritan Health Plans, including IHN-CCO, complies with applicable Federal civil rights laws and does not discriminate based on race, color, national origin, age, disability, or sex.