

## Summary of State Programs to Address Psychotropic Medication Use in Children in Foster Care

The use of psychotropic medications in children in foster care in Medicaid has been on the rise. Many of the principles regarding improving prescribing practices in this population can and should be utilized for the prescribing of these medications in children in Medicaid in general. Medicaid Drug Utilization Review (DUR) programs are employing a variety of techniques to intensify the oversight of prescribing of these potent medications to children. There are challenges to providing optimal care to children in foster care with mental health and/or behavioral health issues and wide variations in services not only across the nation but within an individual state.

In general, every state has pre-programmed edits in their pharmacy point-of sale system to screen for appropriate dose, duration of therapy, duplicate therapy and drug-drug interactions. Below are a few examples of specific ways states have targeted edits for children who are prescribed psychotropic medication:

- Many states have implemented specific edits for children under certain ages (e.g. under age five, under age six, under age seven, etc.) which require the prescriber to complete a form providing prescriber information, patient diagnosis, target symptoms being treated, other drugs prescribed and laboratory tests.
- Other states have a system by which a prescription for a psychotropic medication in a child triggers an edit for a preauthorization which requires a manual review of the prescription request by a panel of experts of a multi-disciplinary team, a psychiatrist or by the Medicaid agency's pharmacy staff.
- Still other states, recognizing that the primary care doctor is often the first to see the patient, have developed hotlines or psychiatric consultation lines that the primary care doctors can access to guide them in their choice of therapy.
- A few states have data registries which analyze the prescribing of these drugs and provide physician feedback and training.

For your convenience, below are links to some state programs that utilize a comprehensive, collaborative approach to oversight of the use of psychotropic drugs in children in foster care, sometimes as a targeted alone program and other times as part of a broader initiative.

Florida: <http://medicaidmentalhealth.org/>

Maryland: <http://mmcp.dhmh.maryland.gov/pap/SitePages/Peer%20Review%20Program.aspx>

Massachusetts: <http://www.mcpap.com/>

Minnesota: [www.dhs.state.mn.us/psychconsult](http://www.dhs.state.mn.us/psychconsult)

Texas: [http://www.dfps.state.tx.us/Child\\_Protection/medical/default.asp#psychotropic](http://www.dfps.state.tx.us/Child_Protection/medical/default.asp#psychotropic)

Below are several links to the American Academy of Child & Adolescent Psychiatry (AACAP) as a resource for states to review as they consider how to strengthen medication oversight for this population.

AACAP Position Statement on Oversight of Psychotropic Medication Use for Children in State Custody: A Best Principles Guideline.

[http://www.aacap.org/galleries/PracticeInformation/FosterCare\\_BestPrinciples\\_FINAL.pdf](http://www.aacap.org/galleries/PracticeInformation/FosterCare_BestPrinciples_FINAL.pdf).

AACAP Policy Statement: Prescribing Psychoactive Medication for Children and Adolescents, September 20, 2001.

[http://www.aacap.org/cs/root/policy\\_statements/prescribing\\_pschoactive\\_medication\\_for\\_children\\_and\\_adolescents](http://www.aacap.org/cs/root/policy_statements/prescribing_pschoactive_medication_for_children_and_adolescents)

AACAP: A Guide for Community Child Serving Agencies on Psychotropic Medications for Children and Adolescents. [http://www.aacap.org/galleries/default-file/guide\\_for\\_community\\_child\\_serving\\_agencies\\_on\\_psychotropic\\_medications\\_for\\_children\\_and\\_adolescents\\_2012.pdf](http://www.aacap.org/galleries/default-file/guide_for_community_child_serving_agencies_on_psychotropic_medications_for_children_and_adolescents_2012.pdf)

Information, research, resources, and recordings of technical assistance webinars held in the past are available at:

<http://www.childwelfare.gov/systemwide/mentalhealth/effectiveness/psychotropic.cfm>.

ACF has published two Information Memoranda (IM) detailing research, legislation, programs and practices in support of an expectation that child welfare systems will support and enhance the social and emotional well-being of the children and youth served. The first IM, *Promoting the Safe, Appropriate, and Effective Use of Psychotropic Medication for Children in Foster Care*, can be found here:

[http://www.acf.hhs.gov/programs/cb/laws\\_policies/policy/im/2012/im1203.pdf](http://www.acf.hhs.gov/programs/cb/laws_policies/policy/im/2012/im1203.pdf).

The second IM, *Promoting Social and Emotional Well-Being for Children and Youth Receiving Child Welfare Services*, can be found here:

[http://www.acf.hhs.gov/programs/cb/laws\\_policies/policy/im/2012/im1204.pdf](http://www.acf.hhs.gov/programs/cb/laws_policies/policy/im/2012/im1204.pdf)

Helpful practice information is available here:

[http://www.ahrq.gov/about/annualconf11/crystal\\_tyutyulkova\\_yager/crystal.htm](http://www.ahrq.gov/about/annualconf11/crystal_tyutyulkova_yager/crystal.htm)