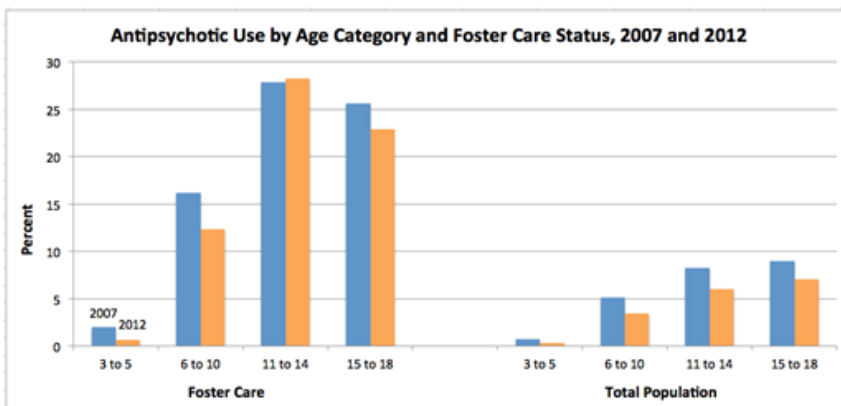


Psychotropic Medication Use among Medicaid-Eligible Foster Children

June 19, 2015

DHS, in partnership with PolicyLab at the Children’s Hospital of Philadelphia (CHOP), released new data on psychotropic medication use among Pennsylvania children in foster care enrolled in Medicaid, as well as the state’s action plan to address these findings. The prescribing of psychotropic medications to the foster care population has attracted critical attention at both the state and federal levels over the past decade.

The research focused on the use of psychotropic medications prescribed for conditions like ADHD, polypharmacy or the use of combined medications, off label psychotropic medication and behavioral health services by PA children and youth enrolled in MA with a particular focus on those in foster care. PolicyLab examined these trends for youth ages 3 to 18 years, using state Medicaid data from 2007-2010 and 2012.



“The research confirms our concerns and shows an unacceptable use of these medications for children in foster care. The steps we announced are designed to address this disturbing analysis. Starting with the Department, all of us have a responsibility to make sure children in foster care receive the care they need,” said Secretary Ted Dallas. **“To think that we’re compounding the trauma experienced by children who suffer abuse or neglect by inappropriately prescribing medication is simply unacceptable.”**

These medications can cause seizures, hallucinations and grogginess, which could harm a child’s education and cause unnecessary behavioral problems that could lead to even more prescriptions.

DHS Steps Based on the Psychotropic Medication Subcommittee Recommendations

- Offer telephone child psychiatric consultative services to assist physicians, physician assistants or certified registered nurse practitioners in the prescribing of psychotropic medication for children;
- Update assessment toolkits and revise regulations to encourage the use of trauma screening tools and require the use of state-approved screening and assessment tools;
- Revise guidance for health care providers who seek to treat a child, but are unable to secure timely consent from the parent(s); and
- Create an electronic dashboard to monitor the use of antipsychotics in children and adolescents and of those receiving behavioral health care services from DHS. Summaries of these reports, which will help state and county child welfare professionals ensure the needs of foster children are met, will be made available to the public through the DHS website.

Key Findings of the Report:

- For youth ages 6-18 years old in 2012, the use of psychotropic medications was nearly 3 times higher among youth in foster care than youth in MA overall (prescribed at 43% vs 16%).
- The use of antipsychotics was 4 times higher among youth in foster care (22%) than youth in MA overall (5%). More than half of youth antipsychotic users in MA had a diagnosis of ADHD. This is concerning, as the majority of these youth did not have a diagnosis that clinically indicated the use of antipsychotics, a medication class with significant side effects.
- Polypharmacy, the use of multiple classes of medications in combination, occurred at a rate 4 times higher for youth in foster care than all youth in MA (12% vs 3%).
- Youth in foster care were more likely to have not received any visits within the year with a provider for their behavioral health concerns while on psychotropic medications.

Please visit www.dhs.state.pa.us/forchildren and click on Psychotropic Medication Use Among Medicaid-Eligible Foster Children for more information.