



To: Texas Judges Hearing Child Protective Services Cases
From: Hon. John Specia (ret.), Jurist in Residence
Office of Court Administration
Date: November 28, 2011

RE: Psychoactive Medications

Children in foster care often have mental health disorders that can be treated with medications known as psychotropic, or psychoactive, drugs – so called because they affect the mind and alter mental processes such as perception, mood and behavior. Psychotropic drugs can be stimulants, depressants, antipsychotics and hallucinogens, and examples range from caffeine and alcohol, to marijuana and LSD, to prescription medications for anxiety, depression or ADHD.

Many of the children and youth on your dockets are taking at least one prescribed psychotropic medication, and many are taking or have been prescribed several at the same time. In 2005, DFPS released the *Psychotropic Medication Utilization Parameters for Foster Children* (the Parameters) to address concerns about over-reliance on psychotropic drugs in the foster care system. The Parameters were developed to offer guidance on the appropriate administration of psychotropic medications and were updated in 2007, and again in December 2010. You can link to them here:

http://www.dfps.state.tx.us/Child_Protection/medical/default.asp#psychotropic

Q: How do the Parameters work?

A: When a child enters the system or begins receiving medical or psychiatric services, medical professionals use the criteria in the Parameters to determine if the child's regimen falls outside of the Parameters and further review is needed. Also, once a month all pharmacy claims from Texas foster care are run through an algorithm based on the Parameters which identifies prescriptions that must be reviewed.

Q: How can I use the Parameters on the bench?

A: Judges can refer to the Parameters' criteria and ask questions to determine if the Parameters suggest the need for additional review.

1. How old is the child? (Prescriptions need further review if the child is under 3 or 4, depending on the class of medication.)
2. Is the child taking two or more medications from the same drug class?
(Two mood stabilizers are allowed, but otherwise two or more meds from the same class indicate further review is needed.)
3. Is the child taking five or more psychotropic medications?
4. Is there a documented mental health diagnosis?

A: How do I request further review?

Q: Any judge, attorney, caseworker, advocate, foster parent, medication consentor or other concerned entity can request a **Psychotropic Medication Utilization Review (PMUR)** for any child in care, known. Star Health has committed to priority responses to inquiries from judges concerning children under their supervision. A judge can

request a PMUR by calling 1-866-912-6283 or by submitting an online request via SHPNFC@centene.com. Star Health also plans to pilot a medication information hotline for questions not addressed by the Parameters such as recommended dosages for new medications.

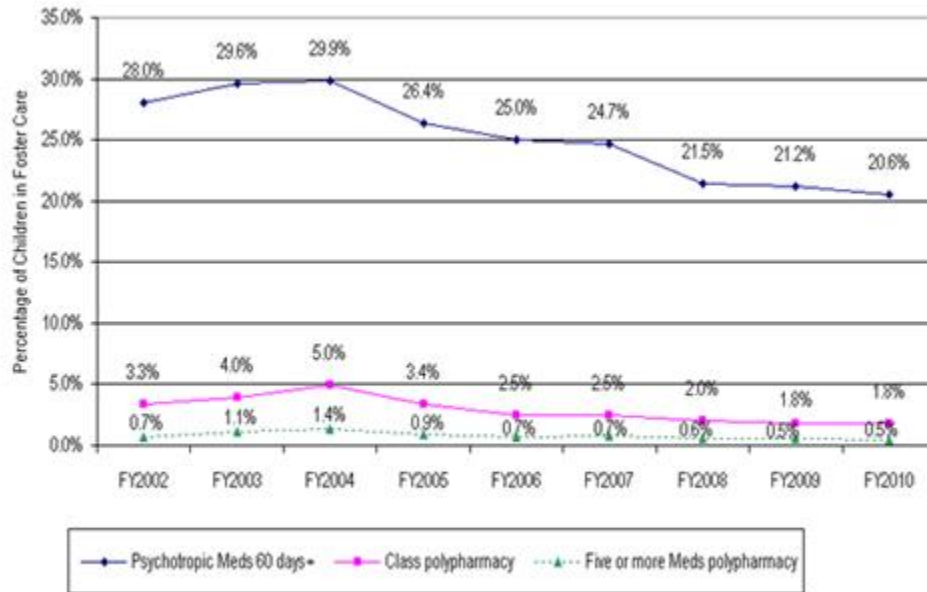
Q: How does the 2010 version of the Parameters differ from the original 2005 version?

A: The 2010 version, which is based on the most current, evidence-based medical literature, offers an expanded narrative section, updated references, and information about new medications. More detailed information has been added about indications for usage, warnings and precautions, age-specific dosage ranges and metabolic monitoring.

Q: Have the Parameters affected the prescribing of psychoactive medications to Texas foster children?

A: Yes, as the chart below shows there has been a significant (31%) decrease in psychotropic prescribing of all types since the release of the Parameters in early 2005, both in terms of the percentage of foster care children receiving them, and in the overall percentage of children receiving medication regimens outside the recommended criteria of the Parameters.

FY2002 to FY2010: Percentages of Foster Care Children: receiving psychotropic medication for 60 days or more, two or more medications from the same class, and five or more concurrent prescriptions.



1. This row represents any child who met either of the two polypharmacy criteria of the Parameters.
2. No MH diagnosis is defined as no ICD 9 code reflecting any mental health diagnosis listed on any claim form for services at any time during the year. The full June 2006 report contains a list of diagnosis codes used.
3. No MH diagnosis >60 days is defined as no ICD 9 code reflecting any psychiatric diagnosis listed on any claim form at any time during the year for those children who received greater than 60 days of any psychotropic medication. This row addresses Criteria 1 from the Parameters.