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## **Pennsylvania Takes Action to Address Psychotropic Medication Use among Medicaid-Eligible Foster Children**

*State-commissioned report shows foster children prescribed these powerful medications at up to four times the rate of other children*

**Philadelphia, PA** – Today, the Department of Human Services (DHS), in partnership with PolicyLab at The Children’s Hospital of Philadelphia (CHOP), released new data on psychotropic medication use among Medicaid-enrolled Pennsylvania children in foster care, as well as the state’s action plan to address the findings.

At both the state and federal levels, the prescribing of psychotropic medications to the foster care population has increasingly garnered critical attention over the past decade. Foster children in Pennsylvania enrolled in Medicaid are up to four times more likely to be prescribed psychotropic medications than other Pennsylvania children enrolled in Medicaid.

“In order to address the Department’s concerns surrounding the safety and efficacy of psychotropic medications prescribed to Medicaid-enrolled foster children, we asked PolicyLab to conduct an in-depth data analysis to identify trends and areas needing improvement in Pennsylvania,” said DHS Secretary Ted Dallas. “The research confirms our concerns and shows an unacceptable use of these medications for children in foster care. The steps we are announcing today 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.”

With emerging themes identified from PolicyLab’s research and analysis, DHS and the Administrative Office of Pennsylvania Courts convened workgroups, including a Psychotropic Medication Subcommittee. The committee reviewed research findings, current policies, and procedures and developed recommendations regarding the appropriate use and monitoring of psychotropic medications for children in foster care. The following are some of the steps DHS will take in response to the recommendations:

- Offering telephone child psychiatric consultative services to assist physicians, physician assistants or certified registered nurse practitioners in the prescribing of psychotropic medication for children;
- Updating assessment toolkits and revising regulations to encourage the use of trauma screening tools and require the use of state-approved screening and assessment tools;
- Revising guidance for health care providers that are seeking to treat a child, but are unable to secure timely consent from the parent(s); and
- Creating 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 publically available through the Department’s website.

“We commend the Department for recognizing this critical issue, and for working with PolicyLab and stakeholders throughout the state to develop recommendations to respond to this problem,” said Kathleen Noonan, one of the study’s authors and founding co-Director at CHOP’s PolicyLab. “While we know that many children benefit from medication, we also need to invest in proven alternatives, since too many children continue to be prescribed medications for non-approved indications.”

The research, funded by Casey Family Programs, 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 Pennsylvania children and youth enrolled in Medicaid with a particular focus on those who are in foster care. PolicyLab examined these trends for children and youth ages 3 to 18 years, using state Medicaid data from 2007-2010 and 2012.

Some key findings of the report include:

- For youth ages 6-18 years old in 2012, the use of psychotropic medications was nearly three times higher among youth in foster care than youth in Medicaid overall (prescribed at 43% versus 16%).
- The use of antipsychotics was four times higher among youth in foster care (22%) than youth in Medicaid overall (5%). More than half of youth antipsychotic users in Medicaid had a diagnosis of ADHD. This is concerning, as the majority of these youth did not have another 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 four times higher for youth in foster care than all youth in Medicaid (12% versus 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.

“As co-chair of the state’s Health Care Workgroup with Dr. David Kelley, I am delighted to see the release of the report and the state moving forward on these important efforts,” said Dr. Cindy Christian, who is a CHOP child abuse pediatrician in addition to her role as co-chair of the Health Care Workgroup.

The recommendations and DHS’ response to the recommendations can be found by visiting [www.dhs.state.pa.us/forchildren](http://www.dhs.state.pa.us/forchildren) and click on Psychotropic Medication Use among Medicaid-eligible Foster Children. For more information on the report, Psychotropic Medication Use by Pennsylvania Children in Foster Care and Enrolled in Medicaid: An Analysis of Children Ages 3-18 Years, please visit <http://policylab.chop.edu/report/psychotropic-medication-use-pennsylvania-children-foster-care-and-enrolled-medicaid>.

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