
Health Care & Wellness Committee

HB 1932

Brief Description: Concerning medication management for youth.

Sponsors: Representatives Kagi, Walsh, Caldier, Carlyle, Gregerson and Ryu.

Brief Summary of Bill

- Requires a second opinion from a psychiatric expert before approving a prescription for an antipsychotic medication for a person under 18 years old who is in foster care.
- Directs the Health Care Authority and the Evidence-Based Practice Institute to distribute a list of evidence-based treatments and the location of treatment programs and providers.

Hearing Date: 2/13/15

Staff: Chris Blake (786-7392).

Background:

Medicaid and Foster Children.

The Health Care Authority administers the Medicaid program which is a state-federal program that pays for health care for low-income state residents who meet certain eligibility criteria. Persons under 19 years old who are in foster care and are under the legal responsibility of the state or a tribe located within the state are eligible for Medicaid. Persons under 21 years old who are either in foster care or eligible for continued foster care services may also enroll in Medicaid. In addition, persons between 19 and 26 years old may receive Medicaid if they either were in foster care and enrolled in Medicaid on their eighteenth birthday or were older than 18 when their foster care assistance ended.

Antipsychotic Medications.

Antipsychotic medications were intended to help people with severe mental illnesses such as schizophrenia or bipolar disorder, but are now used for many other conditions. Early antipsychotics, commonly referred to as first generation antipsychotics, carried several side

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effects such as movement disorders and sedation. More recently developed antipsychotic medications, commonly referred to as second generation antipsychotics, have fewer side effects related to motor skills, although they have been associated with weight gain, type 2 diabetes, and other side effects. A 2012 report by the federal Agency for Healthcare Research and Quality noted the increased use of antipsychotic medications for children and youth despite the existence of few high-quality and longitudinal studies.

The Health Care Authority is required to review the psychotropic medications of all children under 5 years old and establish methods to evaluate the appropriateness of the medication for the children, including the use of second opinions from experts in child psychiatry. "Psychotropic medications" include the following drug classes: antipsychotic, antimania, antidepressant, antianxiety, and Attention Deficit Hyperactivity Disorder.

Evidence-Based Practice Institute.

The Evidence-Based Practice Institute (Institute) was established through legislation in 2007. It is located at the University of Washington School of Medicine. The Institute serves as a statewide resource to the Department of Social and Health Services and other entities for child and adolescent evidence-based, research-based, promising, or consensus-based practices for children's mental health treatment. The Institute also provides training and consultation to licensed children's mental health providers who are implementing evidence-based or research-based practices for treating emotional and behavioral disorders in children.

Summary of Bill:

Before the Health Care Authority (Authority) approves the prescription of one or more antipsychotic medications for any foster child under 18 years old on Medicaid, an expert in psychiatry must provide a second opinion review. The second opinion must address psychosocial interventions that have been or will be offered to the child and the caretaker to address the behavioral issues.

The Authority must collaborate with the Evidence-Based Practice Institute at the University of Washington to distribute a list of evidence-based treatments and the location of available treatment programs and providers. When appropriate interventions from the list are available, they must be included in the child's treatment plan.

The Authority must ensure the appropriate use of behavioral therapies in place of or in addition to prescription medications, rather than merely encouraging their use.

Legislative findings are made that foster children are prescribed antipsychotic medication at a much higher rate than children in the general population and that requiring a second opinion for antipsychotic prescriptions and the use of behavioral interventions may reduce the number of children being prescribed antipsychotic medications while improving outcomes for children.

Appropriation: None.

Fiscal Note: Requested on February 3, 2015.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.