

Fiscal Year 2019

**Administration of Psychotropic Medications to Children Act
A Report to the General Assembly**

Prepared by

The Illinois Department of Children and Family Services

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JB Pritzker
Governor



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To: The Governor of the State of Illinois, the Speaker of the Illinois House of Representatives, the President of the Illinois Senate, the Minority Leader of the Illinois House of Representatives, the Minority Leader of the Illinois Senate, Commission on Government Forecasting and Accountability Library (formerly known as the Legislative Research Unit), the Secretary of the Senate, the Acting Clerk of the Illinois House of Representatives, and the Deputy Director of the Illinois State Library Government Report Distribution Center

From: The Illinois Department of Children and Family Services

Date: December 31, 2019

Re: Administration of Psychotropic Medications to Children Act: A Report to the General Assembly for Fiscal Year 2019 (July 1, 2018 - June 30, 2019)

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Public Act 097-0245, the Administration of Psychotropic Medication to Children Act was enacted in Fiscal Year 2011. Among other things, it required that the Department of Children and Family Services (“DCFS”) promulgate final rules, amending its current rules establishing and maintaining standards and procedures to govern the administration of psychotropic medications. Rule 325 “Administration of Psychotropic Medications to Children for whom The Department of Children and Family Services is Legally Responsible” was promulgated February 24, 2012.

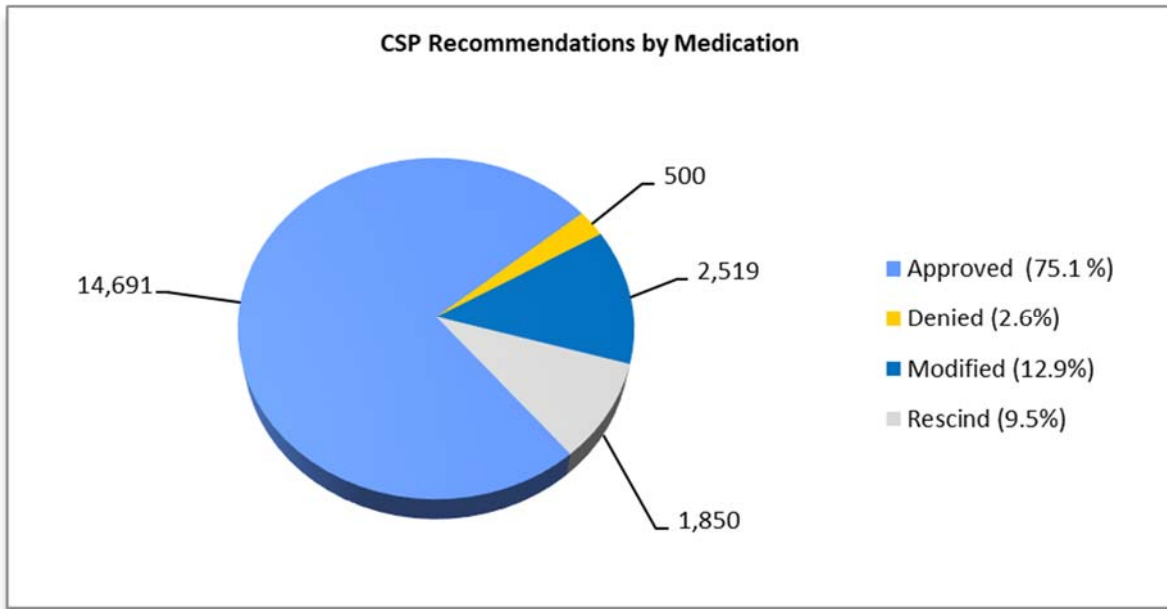
The Act also requires that no later than December 31st of each year, the Department shall prepare and submit an annual report covering the previous fiscal year, to the General Assembly concerning the administration of psychotropic medication. The report should include the number of clinicians and facilities that regularly prescribe/administer psychotropic medications to foster children without the consent of the DCFS Guardian, the number of warnings issued to these individuals and the number of physicians and facilities that have been reported to their licensing bodies. The following is the Fiscal Year 2018 report to the General Assembly detailing the actions the Department has taken pursuant to this Act’s requirements.

In Fiscal Year 2019 there were 18 violations of Rule 325 by providers compromising a total of 22 medications. The chart below reflects those violations.

Fiscal Year 19 Report to the General Assembly				
Violations of Rule 325				
	# Youth with		Total # Med	
	Meds out of Compliance	# Meds Out of Compliance	Requests in FY19	% Compliance
Consent Violations by Providers				
Physicians / Nurse Practitioners ¹	10	14		
Unknown ²	8	8		
Total Violations³	18	22	19,560	99.9%
Other Violations not counted against Providers⁴				
	330	467		
Notice to Physicians / Nurse Practitioners⁵				
Warnings Issued	1			
Prescribers issued Warnings	1			
Reports to Regulatory Bodies				
	# Reported	Results		
Physicians reported to IDFP	0	N/A		
Facilities reported to IDPH	0	N/A		
Facilities reported to Licensing	0	N/A		
NOTES:				
¹ Violations by providers who prescribed or continued psychotropic medications without consent, or who prescribed a dose beyond the consented range for 5 or more youth in care in the reporting period.				
² The computer data is unable to identify all of the doctors who prescribed without consents. We now pull payment data from the Department of Healthcare and Family Services to reduce the number of unknown providers. We increased the frequency payment data from HFS on psychotropic medications and prescribers to a weekly basis in order to better monitor use of psychotropic medications.				
³ DCFS/UIC and HFS are working to reestablish a real time connection to the DCFS youth Medicaid Payment data feed. This data is critical to the transition to IlliniCare in order to access information on prescriptions actually filled at the pharmacy compared with their approvals. Accurate and detailed information about all current medications that a youth is taking enables us to make the best decisions for the safety of the youth when consenting to psychotropic medications. We have worked out the data sharing issues with HFS and are working on the mechanism to “run” and transfer the data.				
⁴ We have identified situations in which compliance is hindered by factors outside of the prescribing physician's control (e.g. New Youth in Care, New Clinician, Over the Counter Medication taken at home, Placement of the minor in the Department of Corrections.) These violations are no longer counted against the current prescribers, allowing them time to come into compliance and avoid disruptions in treatment.				
⁵ DCFS/UIC work directly with HFS to require proof of DCFS consent prior to the dispensing of psychotropic medications, resulting in fewer medications being administered without consent. In addition, DCFS has entered into ongoing relationships with several of the physicians with prior violations, bringing them into compliance and ensuring continued adherence with the law.				

Of the 19,560 psychotropic medication consent requests submitted for approval in Fiscal Year 19, 75.1% were approved as written, 12.9% were approved as modified, 9.5% were rescinded by the provider and 2.6% were denied.

**UIC Clinical Services in Psychopharmacology
Quarterly Report: July 2018 - June 2019**



Recommendation	
Approved (75.1 %)	14,691
Denied (2.6%)	500
Modified (12.9%)	2,519
Rescind (9.5%)	1,850
Total	19,560

There are no recommendations for legislative changes or amendments to any of its rules or procedures established or maintained in compliance with this Act.