

House Bill 2333

Sponsored by Representative BONHAM (at the request of Brittany Ruiz, Oregon Foster Families First) (Pre-session filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Directs Department of Human Services to report information regarding prescription of psychotropic medications to children in foster care.

A BILL FOR AN ACT

1
2 Relating to use of psychotropic medications for children in foster care; creating new provisions; and
3 amending ORS 418.517.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1.** ORS 418.517 is amended to read:

6 418.517. (1) As used in this section:

7 (a) "Medically accepted indication" means any use for a covered outpatient drug that is ap-
8 proved under the Federal Food, Drug and Cosmetic Act, or recommended by the Pharmacy and
9 Therapeutics Committee created by ORS 414.353, or the use of which is supported by one or more
10 citations included or approved for inclusion in any of the following compendia:

11 (A) American Hospital Formulary Service drug information;

12 (B) United States Pharmacopoeia drug information or any successor publication;

13 (C) The DRUGDEX Information System; or

14 (D) Peer-reviewed medical literature.

15 (b) "Psychotropic medication" means medication the prescribed intent of which is to affect or
16 alter thought processes, mood or behavior, including but not limited to antipsychotic, antidepressant
17 and anxiolytic medication and behavior medications. The classification of a medication depends upon
18 its stated intended effect when prescribed, because it may have many different effects.

19 (2) The Department of Human Services shall develop by rule procedures for the use of
20 psychotropic medications for children placed in foster care by the department.

21 (3) The procedures shall include but not be limited to:

22 (a) Required assessment by a qualified mental health professional or licensed medical profes-
23 sional, with expertise in children's mental health, as defined by rule of the department prior to is-
24 suance of a new prescription for more than one psychotropic medication or any antipsychotic
25 medication, except in case of urgent medical need as defined by rule.

26 (b) Required notice by the foster parent to the department within one working day after re-
27 ceiving a new prescription of the psychotropic medication.

28 (c) Required timely notice by the department to the child's parent and the parent's legal repre-
29 sentative, if any, and the child's legal representative or the court appointed special advocate con-
30 taining the following information:

31 (A) The prescribed psychotropic medication;

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

- 1 (B) The amount of the dosage;
- 2 (C) The dosage recommended pursuant to a medically accepted indication;
- 3 (D) The reason for the medication;
- 4 (E) The efficacy of the medication; and
- 5 (F) The side effects of the medication.

6 (d) Specified follow-up and monitoring by the department of a child taking psychotropic
7 medication including, but not limited to, an annual review of medications by a licensed medical
8 professional, or qualified mental health professional with authority to prescribe drugs, other than
9 the prescriber, if the child has more than two prescriptions for psychotropic medications or if the
10 child is under the age of six years.

11 (4) A psychotropic medication may not be prescribed for a child under this section unless it is
12 used for a medically accepted indication that is age appropriate.

13 (5) Any parent, legal representative of the parent, legal representative of the child or court ap-
14 pointed special advocate may petition the juvenile court for a hearing if the parent, the represen-
15 tative of the parent, if any, the legal representative of the child or the advocate objects to the use
16 of or the prescribed dosage of the psychotropic medication. The court may order an independent
17 evaluation of the need for or the prescribed dosage of the medication. The court may order that
18 administration of the medication be discontinued or the prescribed dosage be modified upon a
19 showing that either the prescribed medication or the dosage, or both, are inappropriate.

20 **(6) The department shall report quarterly to the appropriate committee or interim com-**
21 **mittee of the Legislative Assembly on the use of psychotropic medications for children placed**
22 **in foster care by the department. The report must provide the following information, re-**
23 **ported by county, regarding children in foster care:**

24 (a) **The number of children in each age group who are receiving:**

- 25 (A) **Not more than two psychotropic medications;**
- 26 (B) **Three to four psychotropic medications; and**
- 27 (C) **Five or more psychotropic medications;**

28 (b) **The name and contact information of each prescribing medical professional and the**
29 **number of foster children prescribed psychotropic medication by each prescribing medical**
30 **professional; and**

31 (c) **The name and contact information of each qualified mental health professional or li-**
32 **censed medical professional who conducted assessments described in subsection (3)(a) of this**
33 **section and the number of children assessed by each qualified mental health professional or**
34 **licensed medical professional.**

35 **SECTION 2. The report described in ORS 418.517 (6) is first due no later than April 1,**
36 **2022, and the first day of each quarter thereafter.**