



THE STATE
of **ALASKA**
GOVERNOR SEAN PARNELL

**Department of
Health and Social Services**

DIVISION OF HEALTH CARE SERVICES
Director's Office

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March 15, 2013

Dear Provider:

The Alaska Department of Health and Social Services (DHSS) is implementing new policy to ensure that psychiatric medications are prescribed only when medically necessary and in a manner that minimizes risk of side effects for children receiving Department benefits. The initiative applies to beneficiaries under the age of 18 prescribed antipsychotics, antidepressants, ADHD treatments, mood stabilizers, or CNS depressants.

The new policy will require that informed consent is obtained before psychiatric medications are prescribed to:

- **Children in out-of-home placement with supports funded by the State of Alaska**
- **Children in the Office of Children's Services (OCS) custody**
- **Children in the Division of Juvenile Justice (DJJ) custody, including those who reside in the community and in facilities**
- **Children in Psychiatric Residential Treatment Facilities (PRTF) whose treatment is funded by Alaska Medicaid**
- **Children in out-of-state residential behavioral health treatment funded by Alaska Medicaid**

Ongoing clinical monitoring for side effects will also be required, as will interventions to avoid the unnecessary use of multiple medications.

For any child on Medicaid, Prior Authorization will be required to approve claim payment for the **use of multiple atypical antipsychotics**, contingent on supportive documentation. Doses, or regimens, of atypical antipsychotics exceeding the Maximum Units per 30 Days will require justification of medical necessity from the medical provider.

To help facilitate evidence-based use of these medications, provider consultation by the Department or its agents may be required for children on **4 or more psychiatric medications** or **more than 2 atypical antipsychotics**. Certain Divisions may choose to require such consultations under broader circumstances. When clinical monitoring identifies a side effect or adverse drug reaction, providers shall develop an updated treatment plan, describing how the identified problem shall be addressed.

Please see the enclosed policy for further information.

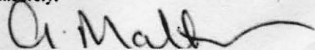
For question please contact:

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Or

Alex Malter, MD
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Medicaid Medical Director
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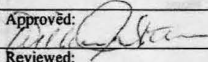
Sincerely,



Alex Malter, MD
Medicaid Medical Director

Attachments: State of Alaska DHSS Policy: Use of Psychiatric Medications for Children in Out of Home Care or Receiving Medication through Medicaid

CC: Craig Christenson, Deputy Commissioner, Department of Health and Social Services
Christy Lawton, Director, Office of Children's Services
Melissa Witzler Stone, Director, Division of Behavioral Health
Margaret Brodie, Director, Health Care Services

STATE OF ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES	SECTION:	NUMBER:	PAGE: 2
	SUBJECT: Use of Psychiatric Medications for Children in Out of Home Care or Receiving Medication through Medicaid		
POLICY & PROCEDURE	Approved: 		Date: 11/29/2012
ATTACHMENTS/FORMS: None	Reviewed:		
	Revised:		

POLICY:

The State of Alaska will ensure that informed consent is obtained before children in the specified populations are treated with psychiatric medications. When the use of psychiatric medications is necessary, ongoing monitoring of side effects and procedures to avoid the unnecessary use of multiple medications are required. Due to an increased incidence of metabolic abnormalities associated with this class of medications, Medicaid Prior Authorization will be required to approve the use of multiple atypical antipsychotics for children. Consultation by the Department or through its contractors may be required to help reduce medication for children on four or more psychiatric medications or more than two atypical antipsychotics, and to help facilitate the evidence-based use of psychiatric medications.

I. Prior authorization of atypical antipsychotics

- a. The contemporaneous use of more than one (1) atypical antipsychotic in a child less than 18 years old will require the prescriber to obtain prior authorization and provide documentation that the medication to be added is medically necessary. The requirement to obtain prior authorization for multiple atypical antipsychotics will be uniformly applied to all children enrolled with Alaska Medicaid.
- b. Doses, or regimens, of atypical antipsychotics exceeding the Maximum Units per 30 Days will require justification of medical necessity from the medical provider. The Maximum Units per 30 Days will be uniformly applied to all claims for atypical antipsychotics for all Alaska Medicaid recipients.

II. Medical monitoring for children on psychiatric medications

- a. The Department expects medical providers prescribing medications to treat children with psychiatric diagnoses to monitor for adverse drug reactions on a continuing basis.
 - i. For children on atypical antipsychotics, monitoring must include:
 1. Performing a Body Mass Index (BMI) at least once a month to identify excessive or inappropriate weight gain. The Department recognizes "excessive or inappropriate weight gain" as >10% increase in body weight within a three month timeframe or less.

<p style="text-align: center;">STATE OF ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES</p> <p style="text-align: center;">POLICY & PROCEDURE MANUAL</p>	SECTION:	NUMBER:	PAGE: 1
	SUBJECT: Use of Psychiatric Medications for Children in Out of Home Care or Receiving Medication through Medicaid		
ATTACHMENTS/FORMS: None	Approved: <i>[Signature]</i>	Date: 11/30/2012	
	Reviewed:		
	Revised:		

AUTHORITY:

- Department of Health and Social Services (DHSS) (AS 47.07; 47.10; AS 47.12; AS 47.17)

PURPOSE:

To ensure that psychiatric medications are prescribed and administered to children only when medically necessary and in a manner that minimizes risks of side effects.

SCOPE:

This policy applies to the following populations and related medications:

APPLICABLE POPULATIONS:

- Section I applies to all children who receive Alaska Medicaid
- Sections II and III apply to all youth who are in Psychiatric Residential Treatment Facilities and services are paid for by Alaska Medicaid
- Sections I - V apply to all children who are in the custody of Office of Children's Services
- Sections I - V apply to all children who are in the custody of Division of Juvenile Justice, including those who reside in the community and in facilities

APPLICABLE MEDICATIONS:

This policy applies to the following medications as classified in the Physician's Desk Reference (PDR)

- Antipsychotics (typical and atypical)
- Antidepressants
- Central Nervous System (CNS) stimulants and non-stimulant therapies for hyperactivity disorders or sleep disorders
- Mood stabilizers (including lithium)
- Anticonvulsants
- Barbiturates, benzodiazepines, and other miscellaneous CNS depressants

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ATTACHMENTS/FORMS: None	Approved:	Date: 11/30/2012	
	Reviewed:		
	Revised:		

2. Laboratory monitoring performed biannually including:
 - a. Fasting glucose levels, and
 - b. Fasting lipid levels.
- ii. Behavioral Health, Juvenile Justice, and Office of Children's Services will develop policies consistent with this Departmental policy to ensure that children who are receiving psychiatric medications are adequately monitored for adverse drug reactions.
- iii. If monitoring identifies a medical abnormality or adverse drug reaction, the medical provider will develop an updated treatment plan that includes how the identified problem will be addressed, who will address the problem, and in what timeframes.

III. Informed Consent

- a. **Informed consent must be obtained prior to any child being administered psychiatric medications.** For children in custody, Alaska Statutes AS 47.10.084, AS 47.12.150, and AS 25.20.025 will be adhered to when informed consent is obtained.
- b. Informed consent includes at least the following:
 - i. Information about the medication, including intended benefits;
 - ii. Long term and short term risks and side effects associated with the medication; and
 - iii. Alternative therapies.

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ATTACHMENTS/FORMS: None	Reviewed:		
	Revised:		

IV. Children receiving four or more psychiatric medications or more than two atypical antipsychotics

- a. Medical providers will provide a copy of the child's chart to the Department when a child is on four or more psychiatric medications or two or more atypical antipsychotics.
- b. The Department will perform a review of the child's chart and determine if there is a need for further consultation with the medical provider.

V. Ongoing Training

- a. Technical assistance or consultation on evidence-based use of psychiatric medications for children will be available as needed and when requested from the provider.