

**A-Engrossed**  
**House Bill 3114**

Ordered by the House May 4  
Including House Amendments dated May 4

Sponsored by Representative KOTEK; Representative TOMEI

**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.

Requires Department of Human Services to develop procedures for assessment by qualified mental health professional **or licensed medical professional** prior to issuance of prescription for **more than one** psychotropic medication for child in foster care. Requires annual review of prescriptions by licensed medical professional, or qualified mental health professional other than prescriber, when child in foster care has more than [*one prescription*] **two prescriptions** for psychotropic medications **or is under six years of age**. Prohibits prescribing of psychotropic medication unless used for medically accepted indication that is age appropriate.

**A BILL FOR AN ACT**

1  
2 Relating to 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) The Department of Human Services shall develop by rule procedures for the use of  
7 psychotropic medications for children placed in foster care by the department.

8 (2) The procedures shall include but not be limited to:

9 (a) **Required assessment by a qualified mental health professional or licensed medical**  
10 **professional, with expertise in children's mental health, as defined by rule of the department**  
11 **prior to issuance of a new prescription for more than one psychotropic medication or any**  
12 **antipsychotic medication, except in case of urgent medical need as defined by rule.**

13 [(a)] (b) Required notice by the foster parent to the department within one working day after  
14 receiving a new prescription of the psychotropic medication.

15 [(b)] (c) Required timely notice by the department to the child's parent and the parent's legal  
16 representative, if any, and the child's legal representative or the court appointed special advocate  
17 containing the following information:

18 (A) The prescribed psychotropic medication;

19 (B) The amount of the dosage;

20 (C) The dosage recommended [*by the manufacturer or the United States Food and Drug Admin-*  
21 *istration*] **pursuant to a medically accepted indication;**

22 (D) The reason for the medication;

23 (E) The efficacy of the medication; and

24 (F) The side effects of the medication.

25 [(c)] (d) Specified follow-up and monitoring by the department of a child taking psychotropic

**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 medication **including, but not limited to, an annual review of medications by a licensed med-**  
2 **ical professional, or qualified mental health professional with authority to prescribe drugs,**  
3 **other than the prescriber, if the child has more than two prescriptions for psychotropic**  
4 **medications or if the child is under the age of six years.**

5 **(3) A psychotropic medication may not be prescribed for a child under this section unless**  
6 **it is used for a medically accepted indication that is age appropriate.**

7 [(3)] (4) Any parent, legal representative of the parent, legal representative of the child or court  
8 appointed special advocate may petition the juvenile court for a hearing if the parent, the repre-  
9 sentative of the parent, if any, the legal representative of the child or the advocate objects to the  
10 use of or the prescribed dosage of the psychotropic medication. The court may order an independent  
11 evaluation of the need for or the prescribed dosage of the medication. The court may order that  
12 administration of the medication be discontinued or the prescribed dosage be modified upon a  
13 showing that either the prescribed medication or the dosage, or both, are inappropriate.

14 [(4)] (5) As used in this section[,]:

15 **(a) “Medically accepted indication” means any use for a covered outpatient drug that is**  
16 **approved under the Federal Food, Drug and Cosmetic Act, or recommended by the Drug Use**  
17 **Review Board, or the use of which is supported by one or more citations included or approved**  
18 **for inclusion in any of the following compendia:**

19 **(A) American Hospital Formulary Services drug information;**

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

21 **(C) The DRUGDEX Information System; or**

22 **(D) The peer-reviewed medical literature.**

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

27 **SECTION 2. The amendments to ORS 418.517 by section 1 of this 2009 Act become oper-**  
28 **ative on June 30, 2010.**

29 **SECTION 3. The Department of Human Services may take any action before the opera-**  
30 **tive date specified in section 2 of this 2009 Act necessary to enable the department to develop**  
31 **the procedures required by the amendments to ORS 418.517 by section 1 of this 2009 Act on**  
32 **and after the operative date specified in section 2 of this 2009 Act.**

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