NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

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Pete Ricketts, Governor

PROVIDER BULLETIN

No. 17-17

Updated: December 18, 2018
Updated: May 2, 2018
Date: November 6, 2017

TO: Medicaid HCBS DD Services Agency Providers

FROM: Courtney Miller, Director
Division of Developmental Disabilities CM

BY: Pam Hovis, Policy Administrator I

RE: UPDATE: Use of Psychotropic Medications

This provider bulletin is being issued to inform agency providers that restraints and restrictive interventions are not differentiated, and all requirements that apply to restraints also apply to restrictive measures, as described in the approved applications for Medicaid Home and Community-Based Services Waivers 0394 and 4154, Appendix G-2. This provider bulletin applies to psychotropic medications administered by the agency provider.

The use of psychotropic medication is not a rights restriction, if there is documentation from the prescribing physician that shows the lowest therapeutic dose of medication is being prescribed and the documentation includes **all** of the following:

- Psychotropic medication name and dosage;
- Diagnosis for which the medication has been prescribed;
- Justification or reason for the medication; and
- Changes in the medication prescribed or dosage (if any).

Documentation meeting the described criteria must be obtained by the person/entity responsible for the participant's medical care, and must be made available to the Individual Support Planning team for review. The ISP team reviews the documentation to determine whether it meets the described criteria.

When restrictive interventions are utilized, the following components typically found in a behavior support plan (BSP) or safety plan are required and must be documented: functional behavioral assessment (FBA), meaningful data collection, positive training component, and comprehensive safety plan.

- If the prescribed psychotropic medication is treating a mental health diagnosis with no related behavioral concerns, a BSP and FBA may not be required, but may be completed at the discretion of the team. If at any time behavioral concerns are identified, an FBA and BSP would be required.

Agency Review Committee:

- The provider must establish a review committee to provide prior review and approval of all behavior support plans, including those that utilize restraints. Psychotropic medications determined to be restrictive must be reviewed by the review committee.
- *Prior to* the implementation, the restrictive psychotropic medication must be reviewed by the individual support plan team, agency's review committee, and participant/guardian. Informed consent must be given by the participant/guardian.

Ongoing Review:

Ongoing review of psychotropic medication is required at least *semi-annually*. The effectiveness of the intervention in conjunction with the behavior support plan must be monitored and reviewed.

PRN Psychotropic Medications:

- Psychotropic medications prescribed on an "as needed" (PRN) basis may be prescribed by a doctor as an approved intervention, after all other interventions, described in the participant's individual support plan, have not been successful.
- Provider staff must be trained in alternative ways of dealing with the behaviors for which the PRN medication was prescribed. Less restrictive methods must be utilized and proven ineffective as determined by the licensed clinical medical practitioner functioning within their scope of practice.
- *PRN medications cannot be utilized* in advance of an event or behavior, unless directed by the medical practitioner (e.g. seizure prevention), or routinely on admission to a service.
- Use of PRN psychotropic medications may be a rights restriction. Restrictiveness should be determined based on the criteria used for other psychotropic medication. Safeguards in the Medicaid HCBS DD waivers appendix G for use of PRN psychotropic medications must be followed regardless of whether use is restrictive or not restrictive.

If you have any questions about this provider bulletin, please contact Katie Weidner, Provider Relations Program Manager at Katie.weidner@nebraska.gov or 402-471-8716.