

Interstate Variation in Trends of Psychotropic Medication Use Among Medicaid-enrolled Children in Foster Care

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BACKGROUND: High rates of treating children in foster care with second-generation antipsychotics, both singly and in combination with other psychotropics, have focused public interest on the use of these medications, and motivated some states to implement programs to curtail usage.

OBJECTIVE: To estimate any antipsychotic use and psychotropic polypharmacy among children in foster care during the last decade and to characterize interstate variation in these trends.

DESIGN/METHODS: Centers for Medicare and Medicaid Services Medicaid Analytic Extract data files for 47 states and the District of Columbia for years 2002–2007. The study sample included an average of 686,080 children annually aged 3–18 years of age with foster care Medicaid eligibility. Repeated cross-sectional design conducted with multilevel logistic regression, clustered at the state level and controlling for patient demographics. Main outcome measures were rates of filled prescriptions for any antipsychotic medication and for psychotropic polypharmacy (defined as concurrent use of 3 or more psychotropic medication classes for at least 30 days during the year). State-level rate trajectories over time were classified as increased (≥ 5% relative increase over interval), decreased (≥ 5% relative decrease over the interval), or stable.

RESULTS: The rate of any antipsychotic use increased from 8.9% in 2002 to 11.8% in 2007 (P < .001 for temporal trend). In contrast, the rate of psychotropic polypharmacy was 5.2% in 2002, peaked in 2004 at 5.9%, and fell to 5.3% in 2007 (P < .001 for trend). State-specific rates of any antipsychotic use were significantly increased in 45 states over the period, while rates of psychotropic polypharmacy increased in only 18 states and declined in 19.

CONCLUSIONS: Although absolute rates of any antipsychotic use and psychotropic polypharmacy among children in foster care remained high, psychotropic polypharmacy began to abate during the last decade, as rates of antipsychotic use continued to rise.

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