

Guidelines for DCFS Reviews of FFAs Related to Psychotropic Medication Authorizations

I. Revised DCFS Finding Regarding PMAs

“A dependent child taking psychotropic medication did not have a current court authorization for the administration of medication and the FFA did not have proper documentation in the file documenting its reasonable efforts to obtain the PMA.”

II. Agreed Upon Compliance Guidelines

If the FFA meets the reasonable expectations outlined below (see different missing PMA scenarios described with accompanying expectations), the agency should not be cited by DCFS with a finding:

- 1) *A dependent child who is newly placed with the FFA has a current prescription or other documentation to confirm the child is taking psychotropic medication but is not placed with a current PMA.*
 - a) The FFA should make at least one documented attempt to contact the child’s CSW by telephone, fax, or email in order to obtain the PMA. If the FFA does not receive the PMA from the CSW within one business day of placement, the FFA should follow Step 2 in the Missing PMA Follow Up Process outlined below.
 - b) If the FFA determines the PMA process has not yet been initiated or has lapsed for the child, the FFA should schedule an appointment for the child with a physician as soon as possible, but with the child to be seen no later than 10 business days after placement if possible, in order to initiate the PMA process.
 - c) In order to avoid sudden discontinuation of medication, current psychotropic medication treatment should continue pending approval of submitted PMA forms under the current prescription until the child is seen by the new physician, at which time the physician determines that such medication is medically necessary on an emergency basis. The physician requesting authorization must document the basis for the emergency on the JV-220(A). The FFA must also ensure and document that the child is to be evaluated by the prescribing physician on a monthly basis while the PMA request is pending.
 - d) After the child is seen by the physician, the FFA should contact the physician within one business day in order to check on the status of the JV-220(A) being forwarded to the DCFS D-Rate Unit.
 - e) If the FFA does not receive the PMA within two weeks from the date the physician submits the JV-220(A) to the DCFS D-Rate Unit, the FFA should follow the Missing PMA Follow Up Process outlined below.

- 2) *A physician determines, de novo, that a dependent child who is currently placed with the FFA needs psychotropic medication.*
 - a) Upon the physician's determination that the child needs psychotropic medication, the FFA should contact the physician within one business day in order to check on the status of the JV-220(A) being forwarded to the DCFS D-Rate Unit.
 - b) If the FFA does not receive the PMA within two weeks from the date the physician submits the JV-220(A), the FFA should follow the Missing PMA Follow Up Process outlined below.
 - c) Psychotropic medication treatment can begin pending approval of submitted PMA forms if a physician determines such medication is medically necessary on an emergency basis. The physician requesting authorization must document the basis for the emergency on the JV-220(A).
 - d) The FFA must ensure and document that the child is to be evaluated by the prescribing physician on a monthly basis while the PMA request is pending.

- 3) *A dependent child who is currently placed with the FFA and authorized to take psychotropic medication by a current PMA needs a re-authorized PMA because the child's current PMA will expire.*
 - a) The FFA should request that the prescribing physician submit the JV-220(A) to DCFS at least four weeks prior to the expiration of the current PMA.
 - b) Upon making this request, the FFA should contact the physician in order to check on the status of the JV-220(A) being forwarded to the DCFS D-Rate Unit prior to the expiration of the current PMA.
 - c) If the FFA does not receive the PMA within two weeks from the date the physician submits the JV-220(A), the FFA should follow the Missing PMA Follow Up Process outlined below.
 - d) The FFA must ensure and document that the child continues to be evaluated by the prescribing physician on a monthly basis while the PMA request is pending.

- 4) *A dependent child who is currently placed with the FFA and authorized to take psychotropic medication by a current PMA needs a re-authorized PMA because the child's physician has determined that the child requires a dosage of medication outside of the range of the current psychotropic medication.*
 - a) Upon the physician's determination that the child needs a dosage outside of the range of the current psychotropic medication, the FFA should contact the physician within one business day in order to check on the status of the JV-220(A) being forwarded to the DCFS D-Rate Unit.
 - b) If the FFA does not receive the PMA within two weeks from the date the physician submits the JV-220(A), the FFA should follow the Missing PMA Follow Up Process outlined below.
 - c) Psychotropic medication treatment can begin pending approval of submitted PMA forms if a physician determines such medication is medically necessary on an emergency basis. The physician requesting the authorization must document the basis for the emergency on the JV-220(A).

- d) The FFA must ensure and document that the child continues to be evaluated by the prescribing physician on a monthly basis while the PMA request is pending.

Missing PMA Follow Up Process¹

1. Make at least one documented attempt to contact the child's CSW by telephone, fax, or email. If faxing or emailing the CSW, the FFA should include the following information:
 - a. Child's Name and Date of Birth
 - b. Date JV-220(A) was submitted to DCFS D-Rate Unit
2. Call the D-Rate Psychotropic Medication Desk Clerks at (562) 903-5335, (562) 903-5394, or (562) 903-5326 during regular business hours (Monday to Friday, 8:00 a.m. – 5:00 p.m.).

¹ All contacts, including telephone, email, and/or fax, would have to be documented in the child's case file in order to be fully acknowledged by DCFS.