BILL ANALYSIS

C.S.H.B. 2163 By: Turner, Sylvester Public Health Committee Report (Substituted)

BACKGROUND AND PURPOSE

Currently, Texas allows the state's Medicaid vendor drug program to pay reimbursement for psychotropic medications provided to children younger than 11 years of age. Most of the psychotropic medications provided to children in Texas are "off label," which means the drug has not been approved for such use by the United States Food and Drug Administration (FDA). Recently, the United States Department of Justice settled with several drug companies relating to allegations that those companies illegally marketed such medications to populations, such as children and the elderly, outside FDA approval. Given that many of these medications have serious life-threatening side effects, it is especially important to ensure a careful review before they are prescribed to children.

C.S.H.B. 2163 requires the Health and Human Services Commission (HHSC) to conduct a study to determine the appropriateness and safety of providing antipsychotic or neuroleptic medication through the Medicaid vendor drug program to children younger than 16 years of age and that considers a child's diagnosis, approval by the FDA for use by a person of a child's age.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 2163 amends the Government Code to require the Health and Human Services Commission (HHSC) to conduct a study to determine the appropriateness and safety of providing antipsychotic or neuroleptic medication through the Medicaid vendor drug program to children younger than 16 years of age. The bill requires the study to consider the physical and psychological medical diagnosis of a child's condition, whether the United States Food and Drug Administration has approved a medication for use by a child of a certain age, whether a child has successfully taken a medication previously, and any other factor HHSC considers relevant.

C.S.H.B. 2163 requires the executive commissioner to submit a report containing the results of the study to the governor, lieutenant governor, speaker of the house of representatives, and the chairs of the Senate Committee on Health and Human Services and the House Committee on Public Health not later than November 10, 2010.

EFFECTIVE DATE

September 1, 2009.

COMPARISON OF ORIGINAL AND SUBSTITUTE

C.S.H.B. 2163 differs from the original by omitting a prohibition against the Health and Human Services Commission (HHSC) providing antipsychotic or neuroleptic medication to a child who is younger than 11 years of age through the Medicaid vendor drug program unless HHSC authorizes the provision of that medication in advance, and instead requiring HHSC to conduct a study to determine the appropriateness and safety of providing such medication to children younger than 16 years of age. The substitute requires the study to consider the same factors in making the determination as those the original requires to be considered before authorizing a medication.

C.S.H.B. 2163 adds a provision not included in the original requiring the executive commissioner to submit a report to the governor, lieutenant governor, speaker of the house of representatives, and the chairs of the Senate Committee on Health and Human Services and the House Committee on Public Health.

C.S.H.B. 2163 differs from the original by omitting provisions relating to a state agency request for a federal waiver or authorization and requiring HHSC to adopt protocols to implement the changes in law made by the bill's provisions while ameliorating the effects those changes may have on children receiving medication as a covered benefit through Medicaid.