

## **BILL ANALYSIS**

H.B. 838  
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Human Services  
Committee Report (Unamended)

### **BACKGROUND AND PURPOSE**

Major strides have been made in improving appropriate management of psychotropic medications for young Texans in foster care. Current policies relating to children in Department of Family and Protective Services conservatorship strive to ensure that a prescribing physician evaluates the appropriateness of continuing a child's medications at least quarterly, but these policies do not specify that such an evaluation occur in person. Severe consequences can occur when necessary information regarding a child's condition, including side effects of medications, is not properly communicated. Interested parties contend that, if physicians were required to regularly see the children to whom they prescribe medications, side effects would be less likely to go unnoticed.

H.B. 838 seeks to encourage the appropriate monitoring of medication side effects and treatment goals for youth in the custody of the Department of Family and Protective Services by establishing requirements for in-person visits with prescribing physicians.

### **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**

H.B. 838 amends the Family Code to require the person authorized to consent to medical treatment for a foster child prescribed a psychotropic drug to ensure that the child has an office visit with the prescribing physician at least once every 90 days to allow the physician to appropriately monitor the side effects of the drug and determine whether the drug is helping the child achieve the physician's treatment goals and whether continued use of the drug is appropriate.

H.B. 838 repeals the heading to Subchapter A, Chapter 266, Family Code.

### **EFFECTIVE DATE**

September 1, 2013.