

## Report in Brief

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Report No. A-05-21-00030

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  
**OFFICE OF INSPECTOR GENERAL**



### Why OIG Did This Audit

The United States Food and Drug Administration issued a safety announcement stating that a review found the combined use of opioid and some psychotropic medications can result in serious side effects, including slowed or difficult breathing and death. In addition, ineffective oversight of psychotropic and opioid medications may increase the risk of inappropriate dosing or medication combinations. To receive Federal funding for child welfare services, States are required to have a plan for the oversight of prescription medications, including psychotropic and opioid medications prescribed for children in foster care. In recent audits, we found that psychotropic and opioid medications prescribed for children in foster care were not accurately documented in the States' child welfare information systems.

Our objective was to determine whether Michigan complied with State requirements related to the psychotropic and opioid medications prescribed for children in foster care who were eligible for assistance under Title IV-E of the Social Security Act (the Act).

### How OIG Did This Audit

We randomly selected a sample of 115 children who were prescribed psychotropic or opioid medications. We reviewed the electronic case records in the Michigan Statewide Automated Child Welfare Information System (MiSACWIS) and the Medicaid claim data for the children in our sample.

## Michigan Did Not Comply With Requirements for Documenting Psychotropic and Opioid Medications Prescribed for Children in Foster Care

### What OIG Found

Michigan did not always comply with State requirements related to the psychotropic and opioid medications prescribed for children in foster care who were eligible for assistance under the Act. Specifically, we found: (1) the electronic case records for 18 of the 115 children in the sample who were prescribed psychotropic or opioid medications did not contain the required medical information; (2) the electronic case records for 14 of the 85 children in the sample who were prescribed psychotropic medications did not include consent forms for psychotropic medications; and (3) opioid medications prescribed for 60 children in the sample were not recorded in MiSACWIS.

### What OIG Recommends and Michigan Comments

We made multiple recommendations, including that Michigan ensure that electronic case records for children in foster care are maintained in accordance with requirements by: (1) modifying procedures for the monitoring of caseworkers to ensure the required medical information is maintained in MiSACWIS; (2) implementing policies to document when consent forms are not required in non-emergency situations, monitoring Medicaid claim data to ensure consent forms are obtained and documented, and implementing procedures to monitor other medications prescribed for children, including opioids, for potential medication interaction and adverse side effects for children who are prescribed psychotropic medications; and (3) implementing procedures to monitor Medicaid claim data for opioid medications prescribed for children and providing training for documenting the opioid medications prescribed for children due to medical procedures or emergency treatment. The detailed recommendations are in the report.

Michigan generally agreed with our recommendations and described actions it has taken or plans to take to address our recommendations. Specifically, Michigan stated that it: (1) has provided several trainings and will develop corrective action plans to address medical passport deficiencies, (2) will review existing policy for documenting psychotropic medications and is working to develop correction action to ensure workers monitor medications prescribed for children, and (3) now obtains Medicaid claim data and will develop training materials on documentation requirements for children prescribed opioid medications.

We commend Michigan for the actions it has taken and plans to take to address our recommendations.