



COUNTY OF YOLO

HEALTH AND HUMAN SERVICES AGENCY

POLICIES AND PROCEDURES

SECTION 5, CHAPTER 11, POLICY 006

MEDICATION RENEWALS

A. PURPOSE: To provide prescribing providers of Yolo County Health and Human Services Agency (HHSA) with guidelines for renewing medication orders, and to outline a protocol for licensed nursing staff to process pharmacy requests for medication refills.

B. FORMS REQUIRED/ATTACHMENTS: N/A

C. DEFINITIONS:

Attending Prescriber: The prescriber who is seeing the client on an ongoing basis, or who provided the initial medication prescription at face-to-face or telepsychiatry visit.

D. POLICY: Upon request from pharmacies or clients or client representatives, HHSA will renew medication orders for clients receiving psychiatric medication, as approved by the prescriber ordering the medication per procedures below.

E. PROCEDURE

1. The prescribing provider who orders medication for an HHSA client at a face-to-face visit is responsible for medication renewals when the client is seen regularly for medication support visits. This prescriber is referred to as the attending prescriber.
2. Whenever possible, requests for medication refills will go to the attending prescriber. When the prescriber is not in the office and a medication refill request is received for an HHSA client, a covering psychiatrist, starting with the assigned Prescriber of the Day, will be asked to review the request for renewal and make a decision to approve or disapprove the request. If the Prescriber of the Day (on-call psychiatrist) is not available, another licensed prescriber will be approached.
3. The covering psychiatrist/prescriber will request that a nurse review the client's chart to determine the following:
 - a. Client's last medication support visit with the prescriber, and if that prescriber was the attending prescriber or another prescriber.
 - b. If client missed the last medication support appointment, or has a pattern of missing or re-scheduling appointments.
 - c. Next scheduled visit with prescriber.
 - d. Current medications and if refill request is consistent with orders.

4. If the individual is a current HHSA client with an open chart and keeps regular appointments with the prescribing provider, and has a follow-up appointment scheduled, the medication may be renewed at the discretion of the prescribing provider, or as authorized by nursing staff under the nursing refill protocol (see 11 below).
5. If the individual is a current HHSA client with an open chart and has missed only ONE medication support visit with the prescribing provider in the past 12 months, and has been seen within the past three (3) months, the medication may be renewed at the discretion of the prescribing provider, or as authorized by nursing staff under the nursing refill protocol (see 11 below). The client may be requested to come for a sooner appointment, if next scheduled appointment is not within one (1) month.
6. If the individual is a current HHSA client with an open chart and has missed two or more medication support visits with the prescribing provider in the past 12 months, the medication may or may not be renewed at the discretion of the prescriber. The client will be required to make an appointment within one (1) month with the attending prescriber for follow-up and medication re-evaluation.
7. If the individual is a Yolo County resident and NOT a current HHSA client and has no open chart, medication will not and cannot be renewed. The individual will be referred for an intake assessment and psychiatric appointment/medication support services, if indicated.
8. If the individual is from out-of-county and is not a current HHSA client, medication will not and cannot be renewed. The individual will be referred for an intake assessment and psychiatric appointment/medication support services, if indicated.
9. If the individual is a current HHSA client with an open chart and the situation is described by the pharmacist or individual as a crisis situation, the attending prescriber or covering psychiatrist will be notified for direct follow-up with the pharmacy.
10. Licensed nursing staff of HHSA are permitted to receive medication refill requests from the pharmacy and review the client's chart to present to the prescribing provider or on-call psychiatrist for obtaining orders to either authorize additional refills or deny the request, or to follow nursing medication refill protocol as outlined in 11 below. This information shall be documented in a progress note by nursing staff within 2 business days.

11. Nursing Medication Refill Protocol

Licensed nursing staff of HHSA are permitted to authorize refills, per the prescribing provider's orders, without presenting the case to the psychiatrist for these situations only:

- a. **Long-Acting Injectable (LAI) Medications:** for clients receiving LAI medication at HHSA injection clinics as part of their treatment, and a refill is needed, the nurse shall reference the last MD/NP/PA progress note.

If the last note is within three (3) months and indicates to continue the LAI, nursing staff is authorized to order the medication and provide it to the client.

- b. **Oral (PO) Medications:** for clients requesting refills, the nurse shall verify that a client has been seen within the last three (3) months and reference the last MD/NP/PA progress note.

If the MD/NP/PA progress note indicates the client is to continue the medication with no changes, nursing staff is authorized to order a one-month supply of medication and schedule the client for a follow-up appointment with the prescriber within one (1) month. In these cases, the nursing staff will document such in a note, and indicate that the attending was notified of such.

12. All documentation entries for medication renewals/refills shall include the following information:

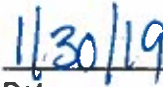
- a. Date and time of request
- b. Client name
- c. Mental health diagnosis
- d. Medication(s) requested
- e. Indication for medication
- f. Dosage
- g. Quantity requested
- h. Quantity approved, if any
- i. Reason for denial, if no quantity approved
- j. Name of prescribing provider
- k. Date of next psychiatric appointment
- l. Name and signature of person taking the medication order
- m. Signature of prescriber (electronically in Avatar/Order Connect)

F. REFERENCES: N/A

Approved by:



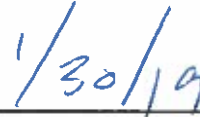
Karen Larsen, Director
Yolo County Health and Human Services Agency



Date



Leigh Harrington, Medical Director
Yolo County Health and Human Services Agency



Date