



COUNTY OF YOLO

HEALTH AND HUMAN SERVICES AGENCY

POLICIES AND PROCEDURES

SECTION 5, CHAPTER 11, POLICY 008

CONTROLLED MEDICATION PRESCRIPTIONS

- A. PURPOSE:** To provide prescribing providers of Yolo County Health and Human Services Agency (HHS) with guidelines in the treatment of adults prescribed controlled medication that are susceptible to abuse and addiction.
- B. FORMS REQUIRED/ATTACHMENTS:** N/A
- C. DEFINITIONS:** N/A
- D. POLICY:** Prescribers of HHS may prescribe controlled medications to clients on a case-by-case basis, only after first consulting the Controlled Substance Utilization Review and Evaluation System (CURES) 2.0 (see HHS PP 5-11-009) and only when the client consents to the provider's conditions of treatment with that medication.
- E. PROCEDURE**
1. All Diagnoses
 - a. Before prescribing any controlled medication, prescribing providers will first consult CURES and provide client with conditions for treatment, to which the client must agree.
 - b. Any prescribed controlled or stimulant medications shall be paid for by the client, the client's insurance, or Patient Assistance Program (PAP). No controlled and/or stimulant medications shall be paid for by HHS.
 2. Adult Attention Deficit Disorder
 - a. As a rule, HHS clinics and HHS prescribers do not prescribe stimulants to adults or manage Adult Attention Deficit Disorder. Any exception being made requires consultation with the HHS Medical Director prior to prescribing.
 - b. Non-stimulant medication shall be the first consideration for treatment.
 - c. If a psychiatrist or nurse practitioner (furnishing) questions the advisability of prescribing stimulant or other scheduled medications for a particular client, they will discuss the case with the Medical Director.
 - d. The psychiatrist or nurse practitioner (furnishing) will evaluate the client on a monthly basis before prescribing stimulant or other scheduled medications, or will provide the client with a referral to primary care or other psychiatric care provider, if it is an appropriate level of care.

- e. Only the prescribing provider will give the prescription to the client.
- f. If stimulant or controlled medication remains part of the treatment, the prescriber must consult CURES at least once every four (4) months (see HHSA PP 5-11-009).
- g. Discontinuing stimulant or controlled medication, or switching to non-stimulant medication, should be attempted as soon as possible to avoid long-term effects and to decrease risk of potential for abuse or addiction.
- h. If a client has consistent blood pressure readings of 140/90 or above, a pulse rate of 90 or more beats per minute, irregular heart rate, or other abnormalities, then the medication may need to be discontinued.

3. Nursing/Psychiatric Technician/Medical Assistant Duties for Stimulant Medications

- a. Vital signs, including blood pressure and heart rate, shall be taken and recorded before initial prescription is written by the prescriber, and thereafter, before each psychiatrist or nurse practitioner (furnishing) visit.
- b. Assist prescriber with obtaining reports from CURES on his/her behalf as a delegate (see HHSA PP 5-11-009).

4. Conditions for Controlled/Stimulant Medications

- a. Client should understand that controlled medications have abuse potential and can become addictive.
- b. Client must give informed consent for treatment after discussing all medication consent required elements with provider (see HHSA PP 5-11-003).
- c. Client shall agree to the following conditions:
 - Provider or Medical Director may request, at any time, that the client submit to a drug test
 - Provider or Medical Director may request, at any time, that the client bring medication bottles to every appointment, and submit to a pill count of prescribed controlled medication
 - Use only one pharmacy, identified by client, for filling prescription of controlled medication
 - Only obtain controlled psychotropic medication from this provider
 - Not use walk-in clinics or emergency rooms to obtain duplicate medication refills
 - Not use illicit drugs or excess alcohol
 - Follow the instructions for taking the medication, and not use any more than directed
 - Keep scheduled appointments or prescription may be denied

- Not request extra or early refills, or continually report missing or lost medication in an attempt to obtain additional refills
- Be responsible for the security of prescription
- Not share medication with anyone else

5. Screening Questions Prior to Prescribing Controlled Medication

a. Client should be asked the following questions; any "Yes" responses require follow-up, and may lead to a decision to NOT prescribe a controlled medication:

- Have you ever suddenly fainted?
- Have you ever fainted during or after exercise?
- Have you ever had chest pain during exercise?
- Do you have a history of high blood pressure?
- Do you have a personal or family history of abnormal EKG or heart disease?
- Do you have a history of seizures?
- Have you ever had any family member die suddenly under age 30?
- Do you have a history of drug or alcohol abuse?

F. REFERENCES: N/A

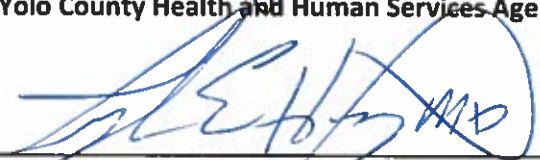
Approved by:



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1/30/19

 Date



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 Yolo County Health and Human Services Agency

1/31/19

 Date