

POLICY AND PROCEDURE

DEPARTMENT: Pharmacy	DOCUMENT NAME: Lost, Stolen, Spilled or Broken Medications
PAGE: 1 of 4	REPLACES DOCUMENT:
APPROVED DATE: 4/07	RETIRED:
EFFECTIVE DATE: 4/07	REVIEWED/REVISED: 1/2018, 3/2018
PRODUCT TYPE: ALL	REFERENCE NUMBER: GA.PHAR.10

SCOPE:

Peach State Health Plan (Peach State) Pharmacy Department and Pharmacy Benefit Manager.

PURPOSE:

The purpose is to define the policy and procedure related to lost, stolen, spilled, or broken medications reported by members and covered as a prescription benefit by Peach State Health Plan's members.

POLICY:

It is the policy of Peach State Health Plan to assure that members who have lost, stolen, spilled or broken medication are able to receive an early refill. This function is delegated to Pharmacy Benefit Manager (PBM).

PROCEDURE:

A. Receiving a call for an early refill request (documentation).

1. The Pharmacy Benefit Manager Customer Service Representative (CSR) assesses the request using the following checklist:
 - a. Is the medication controlled or non-controlled? The response is documented.
 - b. Was the medication to be refilled lost, stolen, spilled or broken? The response is documented.
 - c. If more than one request in a year, the member is referred to Peach State Health Plan.
 - d. Does the system indicate duplication of medication or a previous call with the same claim?
 1. If a repeat call, the CSR checks with the Pharmacy Benefit Manager Account Manager for advice on next actions.
 2. If the Account Manager is unavailable the CSR contacts the department lead.
 3. If the department lead is unavailable a 3 day emergency override is entered.
2. All calls are documented in the member's file for future reference.

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B. Filling request for a lost, spilled, broken or damaged non-controlled substance or controlled substance. NOTE: For specialty medications see section D below.

1. **Non-controlled Substance** -- the dispensing pharmacist filling the prescription can call the Pharmacy Benefit Manager Customer Service line at 1-800-460-8988 for assistance in processing. The member is given the entire prescription fill, limited to one occurrence per year.
2. **Controlled Substance** --
 - a. Adults - member must obtain a new written prescription from a physician for replacement. Upon receipt of the new prescription, the pharmacy calls into Pharmacy Benefit Manager for an override at 1-800-460-8988. For C-III through C-V, the member is authorized to receive the balance of the missing fill (e.g. if it has been 15 days since the last refill and the prescription was for a 30 day supply, Pharmacy Benefit Manager would authorize a 15 day fill and the member would be eligible for their regular refill subject to standard refill-too-soon logic), limited to one occurrence per year. For C-II medications, the entire prescription will be authorized due to regulations regarding partial fills under Federal DEA dispensing laws.
 - b. Children under the age of 18- If the member is under age 18, the pharmacy should call Pharmacy Benefit Manager. A pharmacist will review the prescription and determine the appropriateness of an override. In the event that a requesting pharmacist is filling an "emergency supply" of narcotics and the fill complies with all applicable federal and state laws, the Envolve pharmacist can provide a one-time per year per medication override. Subsequent overrides should only be provided upon review by the plan pharmacist.

C. Filling request for a stolen non-controlled substance or controlled substance.

1. Member must make a police report and obtain a copy.
2. Member must bring the police report along with the prescription to the pharmacy.
3. The dispensing pharmacist faxes the police report to Pharmacy Benefit Manager Customer Service at 1-559-244-3793.

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4. If the request is from a non-controlled substance, the member is given the balance of the prescription fill (e.g. if it has been 15 days since the last refill and the prescription was for a 30 day supply, Pharmacy Benefit Manager would authorize a 15 day fill and the member would be eligible for their regular refill subject to standard refill-too-soon logic), limited to one occurrence per year.

5. **Controlled Substance --**

- a. Adults- After submitting the police report, the member must follow the same steps as outlined in 2.a. above.
- b. Children- After submitting the police report, the member must follow the same steps as outlined in 2.b. above.

D. The dispensing pharmacist follows up with a phone call to Pharmacy Benefit Manager Customer Service Line at 1-800-460-8988 for assistance to adjudicate the claim.

ADDITIONAL NOTES:

1. Lost medications and police reports go to the Pharmacy Benefit Manager Account Managers or Customer Service Representatives. If the dispensing pharmacist has a copy or has seen the police report, they can call the customer service department to speak with a lead or supervisor for an override.
2. The Customer Service Representative or Account Manager document a call in to the Help Desk with the name of the pharmacy and pharmacist who has a copy of the police report if they do not fax the report.

REFERENCES: N/A

ATTACHMENTS: N/A

DEFINITIONS: N/A

REVISION LOG

REVISION	DATE
Annual Review. No changes.	07/2011
Clerical changes eliminating duplicative language.	03/2012

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Annual Review. No changes made.	03/2013
Annual Review. No changes made.	03/2014
Revisions to policy made to clarify fire and natural disaster and accommodate children in controlled substance policy.	03/2015
Annual Review. No changes made.	03/2016
Changed US Script to Envolve Pharmacy Solutions	01/2017
Removed Envolve Pharmacy Solutions name and replaced with Pharmacy Benefit Manager,	01/2018
Annual review. No changes made.	03/2018

POLICY AND PROCEDURE APPROVAL

Pharmacy & Therapeutics Committee:	Approval on file
Sr. Director, Pharmacy Operations:	Approval on file
Sr. Medical Director:	Approval on file

NOTE: The electronic approval is retained in Compliance 360.