


<b>Name of Policy:</b> Discharge Prescription Authorization <b>Policy Number:</b> 3364-131-09 <b>Approving Officer:</b> Chief Medical Information Officer <b>Responsible Agent:</b> Administrative Director, Outcome Management <b>Scope:</b> University of Toledo Medical Center		 <b>Effective date:</b> <b>Original effective date:</b> 10/30/2014	
Key words: Discharge Prescription Authorization, Prescription Coverage, Financial Hardship, Coordination of Care, Medications			
<input type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input checked="" type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

### (A) Policy Statement

The Outcome Management (OTM) prescription fund is a limited fund available to assist patients who do not have prescription coverage and are experiencing financial hardship. ~~Oral~~ medications needed to safely discharge from the hospital will be considered for purchase through this fund.

### (B) Purpose of Policy

The purpose of this policy is to provide a standardized approach for the coordination of discharging patients with prescriptions and ensuring continuity of care. The policy aims to ensure safe, appropriate, and timely coordination of the patient discharge. The policy applies to all healthcare professionals involved in the discharge planning of patients. Prescription purchase assistance will be available to facilitate the patient discharge and continuation of care when no other resources are available.

### (C) Procedure

1. The OTM fund is used for a one-time only discharge prescriptions purchase for patients in financial need.
2. The Discharge Planning Admission Assessment ~~form~~ will be completed in the electronic medical record (EMR) by the Outcome Management Staff to determine base line information for discharge planning purposes. ~~The OTM staff will conduct a thorough assessment of the patients insurance and financial situation to determine eligibility for product medication assistance programs and or discount retail prescriptions programs.~~ Collaboration will occur with the multidisciplinary team including the provider, the IMeds Pharmacist, the Social Worker (SW), Resource Utilization Coordinator, Lead RN, and other medical staff to identify the patient's post discharge medication needs.
- 2.3. Based on the assessment of the patient criteria, financial situation, and patient affordability, outcome management will consult outpatient pharmacy program I Meds to discuss any patient prescription needs. If there is still a barrier to the patient receiving the intended prescription and it is not affordable for the patient, the OTM Staff will request ~~When possible the feasibility of~~ economic prescription substitutes ~~will be discussed~~ with the physician.

4. Insurance Benefits will be reviewed to determine the financial coverage that is available and the in-network options within the patient plan coverage. Outcome Management staff will determine if a referral is needed for Medicaid Application and contact the financial counselor program to meet with the patient/representative to assist in completing and submitting the Medicaid Application if needed.

~~3.5. A monthly log of patients who receive assistance will be maintained in the "Common File" and checked prior to assistance approval. Collaboration with the~~ The outpatient pharmacy IMeds prescription program will occur to determine if prescription assistance is available. If this route is not an option, Outcome Management will provide prescription assistance through the OTM Fund. An authorization form will be completed and forwarded to the out-patient pharmacy.

~~4. Resources for on-going medication needs will be identified and documented by the OTM staff. The patient will be provided information available to pursue on-going medication needs if available.~~

~~5.6. The OTM Outcome Management~~ staff will document all pertinent information in the patients progress notes and final discharge order (After Visit Summary) in the electronic medical record. Documented information will include prescription assistance program offered and discussed with patient/representative in regard to the prescription assistance and whether the prescriptions will be supplied at the bedside, or if they are to pick them up at the outpatient pharmacy. Discharge Planning tab of the patient's medical record.

~~6.7.~~ The outpatient pharmacy will process the prescription authorizations and bill the Outcome Management cost center on a monthly basis. The pharmacy will credit the budget for any reimbursements related to Medicaid or patient assistance programs.

~~7.8.~~ This fund is not appropriate for injections, infusions, or pain medications of any type.

~~8.9.~~ Required approval by the Manager of Outcome Management if the Social Service cost of the drug is over \$200.00.

Approved by:	<b>Policies Superseded by This Policy:</b>
<hr/>	• <i>17-09 Discharge Prescription Assistance</i>
Ryan Sadeghian, MD	Initial effective date: 10/30/2014
Chief Medical Information Officer	
<hr/>	Review/Revision Date:
Date	8/99
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Angela Ackerman, RN, BSN, MBA	1/05
Administrative Director, Outcome	4/08
Management	4/11
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