TB/LTBI Prescription and Medication Request Guidelines

Background:

The State participates in the Federal 340B Drug Pricing Program which allows the TB-program to purchase tuberculosis medications at a substantial discount. Only facilities that are registered on the 340B database are eligible to receive medications purchased through the discount program. The medications can only be dispensed or administered to an 'eligible patient' as defined by Health Resources and Service Administration (HRSA). All medications provided by the State TB program must be documented regarding their utilization and the records must be readily retrievable for auditing purposes. The Drug Room staff will oversee 340B compliance issues and perform self-audits on the covered entities.

Medication Ordering Process:

- Complete the TB/LTBI Medication Request Form and submit to the EPI-TB Team for review **(907-563-7868)**. Once review is completed it will then be forwarded to the Drug Room for processing.
- All changes in therapy require that a new *TB/LTBI Prescription and Medication Request* be completed and submitted for processing. New orders will supersede all prior medication orders and older medication orders will be discontinued and will not be available for refilling.
    - Fill out return medication form and send back discontinued medications to Drug Room for proper processing.
- Prescribers that do not have an '**Entity-Prescriber Relationship**' with the covered entity (See Table 1 for definition) need to either use the updated medication request form OR sign the provider agreement form.
    - Provider agreement form can be requested from the Drug Room staff
- Expedited or overnight shipping (Goldstreak) must be authorized by the EPI Team.

Review for Drug Interactions:

- Pharmacist will review client's medication list with submitted TB-drug therapy to provide:
    - Consultation for drug interactions
    - Drug interaction report (recommended course of action/monitoring)

Medication Refill Process:

- Only therapies that have refills remaining are eligible to receive "refill reminders" from the Drug Room. Fax reminders are set to anticipate refills within two weeks prior to running out of medication based upon the last refill date. **Please review for accuracy as this helps prevent unnecessary work in filling and returning of medications**. Please add any comments to discontinue, hold, or therapy changes to inform Drug Room of possible therapy modifications.
- Refills can be requested early and for special circumstances. Contact the Drug Room to make arrangements or add onto the weekly refill reminder.
- Drug orders are only valid for one-year from the original order date.

Medication Storage and Handling:

- All medications should be stored **securely** under controlled room temperature conditions as defined by the USP guidelines unless otherwise specified by the manufacturer.
- Only authorized personal should have access to medications and kept under a secure storage area.
- Dose Packs are **NOT** child proof and are required to be stored in a secure area **(keep out of reach of children).**
- Expiration dates are only valid if products have been stored within the temperature limits set forth by the manufacturer.
- Do not discard medications unless instructed by the Drug Room. Fill out return medication form and send back to Drug Room for proper processing.

Miscellaneous:

- Compounding liquids take extra time and can be ordered as needed.
- State and Federal laws require that both Drug Monographs and or Medications Guides be given to the client with all new medication orders for their review. It is the responsibility of the facility to insure these documents are dispensed to their clients with their medications.
- Stock Medications request will be addressed in the policy and procedures manual.
- The Drug room is licensed through the Board of Pharmacy. Ordering and labeling of medications follow the Alaska Board of Pharmacy Statutes and Regulations.

Drug Room Contacts:

- C.J. Kim, Pharmacist cj.kim@alaska.gov 907-341-2209
- Robin Laird, Technician robin.laird@alaska.gov 907-341-2207
- Drug Room Phone number (Not monitored) 907-341-2215
- Drug Room Fax number 907-341-2249

Table 1 briefly explains the steps that each TB-drug order must be scrutinized for before dispensing or administering 340B purchased medications.

Table 1

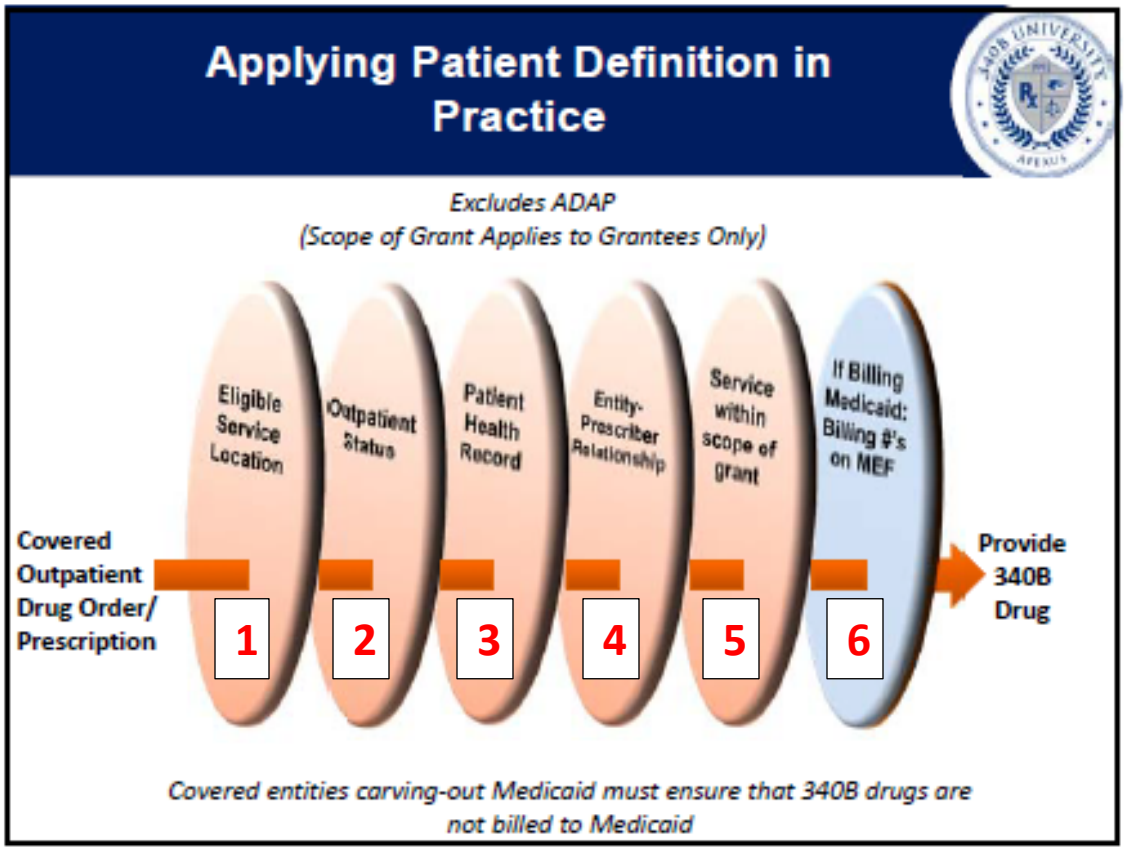

Table 1 explanation:

Filter number	Definition	Additional Comments
1- Eligible service location	Covered entity is registered on the 340B database	Ineligible service location either is not on the 340B database or does not qualify to be registered
2-Outpatient Status	Drug is intended for outpatient use	Violation and possible audit finding if used for inpatient supply
3-Patient Health Record	Covered entity is recording/documenting the care provided, medications administered/dispensed	Self-audits will be initiated to help assist in maintaining drug accountability
4-Entity Prescriber Relationship	3-Part Definition: · the covered entity has established a relationship with the individual, such that the covered entity maintains records of the individual's health care; ***and*** · the individual receives health care services from a health care professional who is either employed by the covered entity or provides health care under contractual or other arrangements (e.g. referral for consultation) such that responsibility for the care provided remains with the covered entity; ***and*** · the individual receives a health care service or range of services from the covered entity which is consistent with the service or range of services for which grant funding or Federally-qualified health center look-alike status has been provided to the entity. Disproportionate share hospitals are exempt from this requirement.	In satisfying this definition, the new TB-Medication Request form OR Provider Agreement form must be used. The Drug Room will keep these records on file.
5-Service within scope of grant	Grant Title: "TB Elimination and Laboratory Program Cooperative Agreement" · Services are outlined in the scope of the grant and also provides eligibility to participate in the Federal 340B Drug Pricing Program	Eligible service locations (Covered entities) have either direct funding OR 317 In-Kind funding
6-Billing Medicaid	Prevention of duplication discounts. All covered entities have been registered as they are NOT billing Medicaid for drug reimbursement.	Manufacturers are prohibited from providing a discounted 340B price and a Medicaid drug rebate for the same drug. Covered entities must accurately report how they bill Medicaid drugs on the Medicaid Exclusion File, as mandated by 42 USC 256b(a)(5)(A)(i). The Drug Room and any facility receiving 340B purchased medications should not be billing Medicaid for drug reimbursement.