

## COMMON INSURANCE REQUIREMENTS

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Some insurances allow early refills. Patient should check with insurance company.

Epic will allow the greater of 30 days or 100 dose units.

Mail-order and commercial insurers will frequently allow prescriptions for a 90 day supply with refills – subject to quantity limitations on the first fill.

- Most pharmacists will automatically adjust the quantity per insurer's allowed amount on the first fill
- It is the patient's responsibility to mail Rx's to mail-order pharmacies.
- Certain drugs are not available through mail-order, depending on the plan

## COMMON CONVENTIONS

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Rxs expire after 1 year (Insurance & Pharmacy policies)

Antibiotic Rx's aged more than 30 days may generate a follow-up call to the prescriber to verify need.

Most Rx's are accepted across state lines.

A Pharmacy may dispense less than the prescribed quantity if the patient requests. This is usually done in cases where the patient is financially challenged; however, some insurers may require prescriber authorization. For some insurances, this will count as a complete fill. Other insurances will allow a partial fill.

Pharmacists can teach self-injection and inhaler use in addition to drug counseling.

Medical orders (used in hospitals and nursing homes) are not prescriptions. If received, some pharmacies may treat these as oral orders, or disregard them entirely and request new prescriptions.

Pharmacies keep medication profiles and histories on all patients dispensed. Prescriber's may request that a note be placed in that profile. This is supported by most pharmacy systems. Refill histories are also available!

Write legibly, include indications, and indicate the prescriber on Rx's

Insulin doses need to be specified so appropriate quantities can be dispensed.

## COMMON DRUGS AND SCHEDULES\*

### CII – Requires an ONYSRX

Percocet	Oxycontin
Duragesic	Codeine
Morphine	Methylphenidate
Anabolic Steroids	Methadone

### CIII – Regular Prescription Blank

Tylenol w/Codeine	Vicodin
Fiorinal	Lortab
Lortab Elixer	Tussionex
Hycodan Elixer	Vicodin Tuss

### CIV – Requires ONYSRX

Benzodiazepines

### CIV – Regular Prescription Blank

Ambien	Sonata
Phenobarbital	Meridia
Midrin	Provigil
Ionamin	Darvocet N100

### CV – Regular Prescription Blank

Tylenol with Codeine Oral Solution  
Phenergan with Codeine Oral Solution  
Lomotil

*\* Not a comprehensive list. The list in no way implies preferred or therapeutically appropriate agents*

### Courtesy of the JPPG

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# PRESCRIPTION WRITING

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## A Reference for New York State Prescribers



## Essential Regulations, Paraphrased, Governing:

- ☞ Verbal and Written Orders
- ☞ Non-Controlled Drugs
- ☞ Medicaid
- ☞ Controlled Substances
- ☞ Syringes and Needles

## LEGAL REQUIREMENTS FOR PRESCRIPTIONS

Absence of the following **invalidates** an Rx and cannot be added by a pharmacist:

- Patient Name**
- Medication Name**
- Stamped / Imprinted Prescriber's Name**
- Prescriber's Signature**
- Date the Rx is written**

☞ Also for Controlled Substances ☞

### Drug Quantity

Absence of the following may generate a **call-back** by a pharmacist for addition:

- Medication Strength and Quantity**
- Specific Directions** (*UD is not sufficient*)
- Number of Refills Authorized** (*PRN = 1*)
  - **Medicaid Rx is limited to 5 refills**
  - **CIII, CIV, CV limited to 5 refills**
  - **ONYSRX– No Refills allowed**
- Prescriber's Address\***
- Prescriber's Telephone Number\***
- Prescriber's Profession\***
- Patient's Address/Age/DOB\***
- 'DAW' written in prescriber's handwriting** (*If brand desired*)

*\*if not in pharmacy system*

☞ Also for Controlled Substances ☞

- Prescriber or Facility DEA #**
- Dosage Form**
- Therapy Code**
- Maximum Daily Dose (MDD)**

### Abbreviations used:

Rx: Prescription

NC-Rx: Non-controlled Prescription

ONYSRX: Official New York State Rx

(Though any Rx can be written on ONYSRX, usage here refers to CII and benzodiazepines.)

## MEDICAID AND CONTROLLED SUBSTANCES ORAL ORDERS\*

Oral Orders	Quantity Allowed	Refills Allowed	Cover Required	Comments
<b>Medicaid</b>	30 days**	Yes	No	**Not applicable to maintenance drugs.
<b>Controls: ONYSRX and Benzodiazepines</b>	5 days	None	72 hours	The pharmacist is <b>required</b> to notify the NYS DOH within 7 days of dispensing if no cover is received
<b>Controls: CIV</b>	30 days or 100 doses (whichever is less)	None§	72 hours	RPh is required to note lack of cover on oral order. §Cover may include refills
<b>Controls: CIII and CIV</b>	5 days	None§	72 hours	RPh is required to note lack of cover on oral order. §Cover may include refills
<b>Syringes &amp; Needles</b>	10 days	None	72 hours	RPh is required to note lack of cover on oral order. Refills on cover not addressed.

*\*Faxed orders for controlled substances follow the same requirements and limitations of oral orders*

## MEDICAID

Rx with prior authorization must be filled within 60 days of writing (Prior auth expires in 60 days)

Rx expires 180 days from date written

Rxs for Over-The-Counter (OTC) drugs follow the same rules as non-OTC drugs and do not require a cover

'Brand Medically Necessary' and prior authorization number must appear on the Rx if brand is desired for drugs with A-rated generics

A 90 day supply with 1 refill is allowed for chronic medications with exceptions for very expensive drugs.

## MISCELLANEOUS

The ESAP (Expanded Syringe Access Program) program in New York States allows patients to purchase – with their own money – up to 10 syringes and needles without a prescription at participating pharmacies. Must be 18 years or older to purchase

Faxed NC-Rxs follow the same rules as written Rxs

The Rx can be used to hold additional instructions to the pharmacist beyond those intended for the patient.

If multiple prescribers are printed on an Rx, the writer must indicate their printed name. A PA that writes must have the supervising physician's name on the Rx.

April 19, 2006 – All Rxs in New York State must use the ONYSRX (soon to be provided free-of-charge.) We are currently in an 18 month overlap period.

## CONTROLLED DRUGS

Oral orders must come directly from prescriber

Rx must be filled within 30 days of writing.

CII and Benzodiazepines require an ONYSRX.

CIII, CIV, and CV refills are honored up to 180 days.

No Rx can be written by a prescriber if the patient has >7 days of drug in home from a previous Rx (80.69C)

No post-dating allowed – Date reflects date signed

Prescriber may authorize early refill. Otherwise, no refill allowed if >7 days of drug in home from previous fill

The Code/Condition can be used on any schedule Rx

Limited to 30 day supply without Code/Condition

- Code/Condition allows >30 days but only 1 Refill is allowed (non-ONYSRX)
- Code/Condition allows up to 3 month supply
- Code/Condition for Anabolic Steroid or HCG allows up to 6 months supply

### Code/Condition for Controlled Drugs:

Code A – Panic Disorders

Code B – Minimal brain dysfunction or ADHD

Code C – Chronic, debilitating neurological condition

Code D – Chronic pain from incurable diseases

Code E – Narcolepsy

Code F – Hormone Deficiency