

## Medication Policy for Lexington Counseling and Psychiatry Patients ver. 9/23

This policy covers all medications that may be prescribed by our staff. The purpose of this policy is to make sure your treatment at our organization improves your mental health and does not cause any harm. Following this policy is critical for managing our ability to help you and for the medications you may be prescribed to work as they are intended. Our policy is also designed to prevent the abuse, misuse, misallocation, and illegal transfer of medications to anyone other than prescribed. **No exceptions to this policy can be made by our admin staff or providers.**

1. You may not be prescribed medication on your first visit. You may not be prescribed a medication at all. Our providers perform a psychiatric evaluation, and they reserve the clinical right to make medication and clinical decisions accordingly. Our practitioners take their time in completing assessments, and may need to collect information, refer you to another provider for an evaluation, review labs, order labs, and a variety of other appropriate clinical procedures prior to writing any psychotropic medications. They will not bypass good clinical judgement to satisfy a quick demand or request for medication. Our staff is under no obligation to prescribe a medication based on your expectation. Please plan accordingly.
2. If you have complicated medical issues, you will likely be referred to a medical doctor. This may be required prior to being prescribed certain medications.
3. You agree if you are pregnant or intend to become pregnant to notify your APRN at LCP, OBGYN, and your PCP provider immediately to discuss tapering off medication that could potentially harm the unborn child. You agree not to hold your prescribers responsible for any harm that may occur to you or your unborn child by taking any medication prescribed to you.
4. Refills of medication will not be made by telephone. **Please don't call the office and ask to speak with a prescriber about a refill. We prescribe medications after in person evaluations and follow up visits only.** You must schedule your appointments accordingly, keeping in mind our practitioners are busy and have relatively full schedules. If you need to reschedule an appointment, please call the office 30 days prior to your medication(s) needing refilled. We cannot refill medications without an appointment and proper notice. Early refills WILL NOT be authorized.
5. NO medication refills or service requests, including appointments, letters, etc. will be granted when you have an unpaid balance with ANY PROVIDER. All outstanding balances must be paid prior to services being rendered.
6. A KASPER-Kentucky All Schedule Prescription Electronic Reporting report will be completed prior to your first appointment and throughout your treatment. If it is clear that you are misusing or not using your controlled/scheduled medications, letters will be sent to the prescribing physicians, pharmacies and other medical professionals involved and you will be

denied an appointment without a full substance abuse assessment by one of our Licensed Clinical Alcohol and Drug Counselors to determine if a substance abuse condition exists. If a substance abuse issue exists, you will not be prescribed a controlled/scheduled medication at our facility for any reason. This includes past treatment episodes where you may have obtained a diagnosis for a substance abuse issue. We reserve the right to collect records, make collateral contacts with family, spouses, etc. to determine if prescribing this medication will be a safe endeavor for you.

7. You will be required to fill any controlled substances at one pharmacy for the duration of your treatment with us. If you change your pharmacy for any reason, our providers need 2 weeks advanced notice in writing and the reason for the change. Our providers may talk with your pharmacist about your medication on an as needed basis.
8. If any of our providers note that you may be using drugs or alcohol in a way that may interact with, be counterproductive to, or enhance or detract from a psychiatric medication, we may refuse to prescribe a medication unless you have ceased all drug and alcohol use. These chemicals may be legal or illegal and still be counterproductive.
9. All patients taking controlled or scheduled medications will be regularly sent to a lab for drug screen. **You are responsible for the costs of the drug screen.** Failure to attend a screen upon an order within 24 hours will result in no prescriptions being written. Positive drug screens for illegal or unprescribed medications will result in a referral to a substance abuse professional. Using multiple doctors, pharmacies or out of state sources for additional controlled/scheduled medications will cause us to discontinue our psychiatric services to you without notice.
10. You may not have scheduled/controlled medications prescribed by another facility or provider while utilizing our practice for that purpose. Any benzodiazepine or stimulant medication must come from the provider that signs this form or a replacement unless a written exception is given. If you are coming from another facility that was prescribing you controlled or scheduled medications, you must provide your medical records prior to or at the appointment time. No medicines will be prescribed without these records.
11. You agree to not abuse or misuse alcohol, use marijuana in any form, abuse or misuse any legal or illegal substances, or abuse or misuse prescription medications of any kind while in our care. Violation of this will result in the termination of our office providing medication for you or your child without notice.
12. Lost, misplaced, damaged, stolen, or unaccounted for medications will not be replaced without proper notice and an appointment. We reserve the right to not replace controlled and or scheduled medication under any circumstances. Stolen medications will require a police report filed and a copy brought to the office at the time of the appointment. Our

practitioners may still deny a request to refill any medications if they suspect illegal, criminal, or suspicious activity on the part of the patient or anyone else.

13. Bring your scheduled and controlled medications to your appointment. You may be audited for a medication count. If the medication left in your bottle does not match your prescription history with us, your medication may be discontinued.
14. Early refills WILL NOT be authorized.
15. We do not prescribe pain medications, gabapentin, or muscle relaxing drugs. In many cases we consider these drugs to be counterproductive to psychiatric medications and may ask they be discontinued prior to further prescriptions from our office. WE WILL NOT PRESCRIBE CONTROLLED OR SCHEDULED MEDICATIONS TO YOU IF YOU ARE ON THESE MEDICATIONS.
16. We sometimes take up to 48 hours to return phone calls. Most issues with medications need to be addressed by in-person appointments. Please be patient and realize our administrative staff can only deliver messages. They cannot interpret your requests, psychiatric issues, medication interactions or other clinical issues. If you treat our staff in an unprofessional manner, we will discontinue services with you immediately.
17. If you violate one of these policies, we may refuse services to you or your child permanently. We may require assessments, information, collaboration, or referrals by/to other providers to continue to provide care if you violate this policy.
18. If you become sick, depressed, go into withdrawal, or have a medical emergency you need to seek relief from a provider that we referred you to, your primary care doctor, an emergency room, or 911.
19. **WE DO NOT OFFER AFTER HOURS, WEEKEND, OR EMERGENCY SERVICES. WE ARE AN OUTPATIENT MENTAL HEALTH CLINIC ONLY. WE ARE OPEN FROM 8:30AM TO 4:30PM, Mon-Thursday for psychiatry. Our APRN'S DO NOT WORK ON FRIDAYS IN ANY CAPACITY.**
20. A \$90.00 PRESCRIPTION FEE WILL BE APPLIED AND CHARGED TO YOUR ACCOUNT IF YOU ARE PRESCRIBED MEDICATION WITHOUT AN APPOINTMENT TAKING PLACE.
21. ALL PREAUTHORIZATIONS FOR MEDICATION REQUIRE A \$50.00 FEE.
22. If you do not agree with these policies, please do not sign this form. Your insurance, Google, your primary care physician or your OBGYN may give you a referral for a psychiatric provider.

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Patient or Guardian

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Date

\_\_\_\_\_  
Provider

\_\_\_\_\_  
Date