DEPARTMENT:	DOCUMENT NAME:	
Pharmacy Operations	Lost, Stolen, Spilled or Broken Medication	
<b>PAGE:</b> 1 of 4	REPLACES DOCUMENT:	
APPROVED DATE: 04/07	RETIRED:	
EFFECTIVE DATE: 04/07	<b>REVIEWED/REVISED:</b> 02/08, 02/09, 02/10,	
	02/11, 02/12, 02/13, 02/14, 05/14, 08/14, 08/15,	
	08/16, 11/16, 05/17, 04/18	
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: OH.PHAR.05	

#### **SCOPE:**

Centene Corporate Pharmacy Solutions, Health Plan Pharmacy Departments, Pharmacy Benefit Manager

#### **PURPOSE:**

The purpose is to define a policy and procedure related to lost, spilled, broken, damaged, or stolen medications reported by members as covered by a prescription benefit by Centene Corporation Health Plans.

#### **POLICY:**

It is the policy of Centene Corporate Health Plans to assure that members who have lost, spilled, broken, damaged, or had stolen medication will be able to receive an early refill. Lost medication may also include loss due to fire or bona fide natural disaster. This function will be delegated to the designated Pharmacy Benefit Manager (PBM).

#### **PROCEDURE:**

- A. Receiving a call for an early refill request (documentation).
  - 1. The PBM Customer Service Representative (CSR) will assess the request using the following checklist and document the response in the member's file:
    - a. Is the medication controlled or non-controlled?
    - b. Was the medication to be refilled lost, spilled, broken, damaged, or stolent?
    - c. If there is more than one request in a year, the member is referred to the Health Plan.
    - d. If the system indicates duplication of medication or a previous call with the same claim, the CSR checks with the PBM Account Manager for advice on next actions.
      - i. If the Account Manager is unavailable, the CSR contacts the department lead.
      - ii. 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.
- B. Lost, spilled, broken, or damaged non-controlled drug or controlled drug <u>NOTE: For</u> specialty medications see section D below
  - 1. Non-controlled substances:
    - a. The dispensing pharmacist filling the prescription will notify the PBM at 1-800-460-8988 for assistance in processing. The member will be authorized to receive the balance of the missing fill if determined appropriate. Members are limited to one occurrence per year.

DEPARTMENT:	DOCUMENT NAME:	
Pharmacy Operations	Lost, Stolen, Spilled or Broken Medication	
<b>PAGE:</b> 2 of 4	REPLACES DOCUMENT:	
APPROVED DATE: 04/07	RETIRED:	
EFFECTIVE DATE: 04/07	<b>REVIEWED/REVISED:</b> 02/08, 02/09, 02/10,	
	02/11, 02/12, 02/13, 02/14, 05/14, 08/14, 08/15,	
	08/16, 11/16, 05/17, 04/18	
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: OH.PHAR.05	

b. For example, if it has been 15 days since the last refill and the prescription was for a 30 day supply, the PBM would authorize a 15 day fill and the member would then be eligible for their regular refill subject to standard refill-too-soon logic.

# 2. Controlled substances

- a. <u>Adults:</u> The member must obtain a new prescription from a physician for replacement. Upon receipt of the new prescription, the pharmacy calls the PBM at 1-800-460-8988 for an override.
  - i. For C-III through C-V medications, the member will be authorized to receive the balance of the missing fill and such authorization will be limited to one occurrence per year.
  - ii. For C-II medications, the full quantity of the new prescription will be authorized due to regulations regarding partial fills under Federal DEA dispensing laws.
- b. <u>Children under the age of 18:</u> If the member is under age 18, the pharmacy should call the PBM. A PBM pharmacist will review the prescription and determine the appropriateness of an override.
  - i. 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 PBM pharmacist can provide a one-time per year per medication override.
  - ii. Subsequent overrides should only be provided upon review by the plan pharmacist.

#### C. Stolen non-controlled drug or controlled drug

- 1. Member must make a police report and obtain a copy.
- 2. Member must provide a copy of the police report to the pharmacy.
- 3. The dispensing pharmacist will fax a copy of the police report to the PBM at 1-559-244-3793.
- 4. If the request is for a non-controlled drug, the member is given the balance of the prescription fill. Members are limited to one occurrence per year.

#### 5. Controlled drug--

- a. Adults: After submitting the police report, the member must follow the same steps as outlined in **B.2.a.** above.
- b. <u>Children:</u> After submitting the police report, the member must follow the same steps as outlined in **B.2.b.** above.
- **D.** <u>Specialty Medications</u> For lost, spilled, broken, damaged, or stolen specialty medications, the dispensing pharmacist will call the PBM at 1-800-460-8988 for assistance to adjudicate the claim, on a case-by-case basis.

DEPARTMENT:	DOCUMENT NAME:	
Pharmacy Operations	Lost, Stolen, Spilled or Broken Medication	
<b>PAGE:</b> 3 of 4	REPLACES DOCUMENT:	
APPROVED DATE: 04/07	RETIRED:	
EFFECTIVE DATE: 04/07	<b>REVIEWED/REVISED:</b> 02/08, 02/09, 02/10,	
	02/11, 02/12, 02/13, 02/14, 05/14, 08/14, 08/15,	
	08/16, 11/16, 05/17, 04/18	
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: OH.PHAR.05	

## E. Additional Notes

- 1. Lost medication police reports go to the PBM Account Managers or Customer Service Representatives. If the dispensing pharmacist has a copy or has seen the police report, they may call the PBM customer service department to speak with a lead or supervisor for an override.
- 2. The Customer Service Representative or Account Manager will document the call into the PBM 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:

ATTACHMENTS: N/A

**DEFINITIONS:** N/A

# **REVISION LOG**

REVISION	DATE
Remove "Members" from "SCOPE" as members are external parties and are	05/07
not to be included per template definition of "SCOPE".	
Update US Script Customer Service Dept. under part "E" of the	02/08
"PROCEDURE".	
Revised the SCOPE to include Corporate Centene Pharmacy Department and	02/09
US Script, Inc.	
Enhanced the PROCEDURE to clarify responsible parties, work flow, include	02/09
contact information, and documentation requirements.	
Revisions completed at this time were made to address clerical errors.	02/10
No changes were deemed necessary.	02/11
Clerical changes eliminating duplicative language.	02/12
No changes were deemed necessary.	02/13
Revisions to policy made to clarify fire and natural disaster and accommodate	02/14
children in controlled substance policy.	
Clarified Procedure item B to more clearly define the intent of the revision	05/14
made in February of 2014.	
No changes necessary at this time.	08/14
No changes.	08/15

DEPARTMENT:	DOCUMENT NAME:	
Pharmacy Operations	Lost, Stolen, Spilled or Broken Medication	
<b>PAGE:</b> 4 of 4	REPLACES DOCUMENT:	
APPROVED DATE: 04/07	RETIRED:	
EFFECTIVE DATE: 04/07	<b>REVIEWED/REVISED:</b> 02/08, 02/09, 02/10,	
	02/11, 02/12, 02/13, 02/14, 05/14, 08/14, 08/15,	
	08/16, 11/16, 05/17, 04/18	
PRODUCT TYPE: Medicaid	REFERENCE NUMBER: OH.PHAR.05	

Annual Review	08/16
Changed US Script to Envolve Pharmacy Solutions	11/16
EPS Compliance updates: Removed Envolve Pharmacy Solutions name and	05/17
replaced with Pharmacy Benefit Manager, Revised policy for organizational	
structure.	
Annual review – no changes	04/18

# POLICY AND PROCEDURE APPROVAL

Pharmacy & Therapeutics Committee: Approval on file

V.P., Pharmacy Operations: Approval on file

SR. V.P. Medical Affairs or Chief Medical Officer: Approval on file

NOTE: The electronic approval is retained in Compliance 360.