MEDICAL CARE AND PRESCRIPTIONS POLICY
FOR INDIVIDUALS REQUIRING ASSISTANCE WITH MEDICATIONS

1. Choice of providers of medical care for clients in Developmental Disability Services:

1.1 **Purpose:**
To provide clarification as to the rights of individuals receiving Developmental Disability Services in choosing a physician.

1.2 **Definitions:**
Physicians: Administrative Rules of Montana (ARM) 24.29.1504 Definitions...
(21) "Physician" means those persons identified by 33-22-111, MCA, practicing within the scope of the providers' license.

**33-22-111** MCA. Policies and certificates to provide for freedom of choice of practitioners - professional practice not enlarged. (1) All policies or certificates of disability insurance, including individual, group, and blanket policies or certificates, must provide that the insured has full freedom of choice in the selection of any licensed physician, physician assistant, dentist, osteopath, chiropractor, optometrist, podiatrist, psychologist, licensed social worker, licensed professional counselor, acupuncturist, naturopathic physician, physical therapist, or advanced practice registered nurse as specifically listed in 37-8-202 for treatment of any Illness or injury within the scope and limitations of the person's practice...

1.3 **Guidelines:**
1.3.1 All individuals receiving Developmental Disability Services have the right of access to the physician of their choice. They are required to have a physician to provide needed medical services per Developmental Disabilities Program Policy and Procedures Manual (01.03.401). Providers are responsible for ensuring that medical assessments are completed which includes a yearly physical by the individual's physician per PSP policy and 37.34.1103 Individual Plan: Components.

Subsection (3) of ARM 37.34.702 Adult Services: performance requirements states in part: "In the provision of adult services, the contractor must: ... (c) maintain and implement policies and procedures which ensure health monitoring occurs and necessary medical assistance is provided or sought for all individuals served... "

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1.3.2 If an individual requires assistance with medications, they must have a prescribing physician as all medications, including over the counter medications and supplements must be ordered by a physician per Health and Medication Administration Manual and Managing Medications Manual.

2. Medication prescriptions and supplements:

2.1 Purpose:
This section clarifies the requirements for individuals in Developmental Disabilities Services to receive assistance with medication.

2.2 Definitions:
2.2.1 Assistance means providing any degree of support or aid to an individual who independently performs at least on component of medication-taking behavior. (ARM 37.34.114)
2.2.2 Medication(s) refers to all drugs or agents used to treat illness or injury, including over-the-counter medication and supplements prescribed by a physician.

2.3 Guidelines:
2.3.1 Anyone providing assistance with medications must have medication certification. For information on criteria and procedures under which an employee or an agent of a contractor may assist and supervise an individual in taking medication see Administrative Rules of Montana (ARM) 37.34.114 Certifications of persons assisting in the administration of medication.

2.3.2 All medications, even over-the-counter medications and supplements, must have a written prescription from a physician (Health and Medication Administration Manual, Chapter III. Medication Use and Managing Medications Manual, Chapter IV.).

2.3.2.1 Prescribing physicians must be licensed to practice in the state where they practice.

2.3.2.2 Prescribing physicians must practice and prescribe within the scope of the state laws governing their practices.
• 37-3-303. MCA Practice authorized by physician's license. A physician's license authorizes the holder to perform one or more of the acts embraced in 37-3-102 (8) in a manner reasonably consistent with the holder's training, skill, and experience.

• 37-26-301. MCA. Practice of naturopathic health care-alternative health care formulary committee. (3) A five-member alternative health care formulary committee appointed by the board shall establish a natural substance formulary list.

• ARM 24.111.511 Naturopathic physician natural substance formulary list. (1) Naturopathic physicians may prescribe and administer for preventive and therapeutic purposes the drugs listed in this natural substance formulary list as provided for in 37-26-301 MCA.

• 37-20-404. MCA prescribing and dispensing authority—discretion of supervising physician on limitation of authority. (1) A physician assistant may prescribe, dispense, and administer drugs to the extent authorized by the supervising physician. (2) All dispensing activities allowed by this section must comply with 37-2-104 and with packaging and labeling guidelines developed by the board of pharmacy under Title 37, chapter 7.

2.3.3 For the safety of each client, all medications or supplements must meet the following criteria:

2.3.3.1 All medications, including medications obtained at a physician's office, must be labeled. (Health and Medication Administration Manual, Chapter IV and Managing Medications Manual, Chapter IV). These labels should include:
- Person's name
- Medication name
- Strength and dosage of the medication
- Route of administration
- Time of administration
- The quantity issued
- Expiration date
• Date the medication was dispensed
• Any special instructions (such as mix with 8 ounces of water)

2.3.3.2 All over-the-counter medications and supplements, if prescribed by a physician or the individual needs assistance with the medication, must have an identification label that includes:
• Person's name
• Medication name
• Strength and dosage
• Route and time of administration
• Special instructions

2.3.3.3 All medications and supplements must include basic information regarding the use of the medication or supplement (Health and Medication Administration Manual, Chapter III, Medication Use and Managing Medication Manual). This information should be available in the MAR folder:
• Purpose of the medication (which would include where appropriate)
  o Signs or symptoms the medication should affect
  o How long before changes should be seen
• Possible side effects of the medication
• How side effects should be handled such as "discontinue and call physician if rash occurs".

2.3.4 Guidelines for the proper storage of medications, destroying medication and monitoring medications should be followed as outlined in the Health and Medication Administration Manual and Managing Medication Manual.

2.3.5 For the safety of individuals receiving Developmental Disability Services regarding drug interactions, all medications and supplements prescribed to an individual must be communicated to all other prescribing authorities (health care Providers) of that individual immediately or at least on the next business day.

2.3.6 Per standard nursing practices, verbal orders for medications can only be taken by an RN or LPN. Verbal orders should be written down immediately and signed by the prescribing physician within a reasonable period of time.
• ARM 24.159.1625 General nursing functions and tasks that may not be delegated.... (3) A nurse may not delegate to an unlicensed assistive person (UAP) the authority to receive verbal orders from providers (physicians)...

• Direct care personnel attending physician's appointment can record physician instructions/orders regarding medications but must have the physician sign off on those instructions and orders at the end of the appointment.

• Direct care personnel may take verbal advice from a physician, pharmacist or nurse which would include such information as how to handle a medication error, when to take a client to the emergency room, and when and how to monitor a client for symptoms that may be related to a medication error or illness.

• EXCEPTION: In an emergency situation, such as a drug reaction, direct care personnel may take a verbal order from a physician but this order must be followed by a written order.

3. Coverage of services and outpatient drugs and supplements:

3.1 Purpose:
This section clarifies the usage of supplements and prescription drug coverage.

3.2 Guidelines:
3.2.1 CMS guidelines apply to all individuals receiving waiver funded services. The following rules under general Medicaid Services and Medicaid Primary Care Services apply:

• ARM 37.86.1102 Outpatient drugs, requirements. (selected sections)
  (1) These requirements are in addition to those contained in ARM 37.85.401 through 37.85.415.
  (2) Drugs may not be filled or refilled without the authorization of the physician or other licensed practitioner who is authorized by law to prescribe drugs and is recognized by the Medicaid program.
  (3) The department will only participate in the payment of legend and over the counter drugs listed on the department drug formulary, as determined by the Medicaid Drug Formulary Committee established by the department. The formulary committee is the Drug Use Review Board, established and
operating in accordance with 42 USC 1396r-8 (2008), which
governs Medicaid drug programs. The drug formulary includes
a preferred drug list (POL) of selected drugs that have a
significant clinical benefit over other agents in the same
therapeutic class and also represents good value to the
department based on total cost. Prescribers must prescribe from
the preferred drug list if medically appropriate ...
(*Not all sections of this rule apply to this policy.*)

(6) ... The department will not participate in the payment of a
prescription drug:
(a) which the Secretary of Health and Human Services (HHS)
has determined is less than effective for all conditions of
use prescribed, recommended or suggested in the drug's
labeling;
(b) that is not subject to a rebate agreement between the
manufacturer and the secretary of HHS as required by 42
USC 1396r-8 (2008); and
(c) that does not meet prior authorization criteria as
determined by the Medicaid Drug Formulary Committee,
established and operating in accordance with 42 USC
1396r-8 (2008), without the existence of a prior
authorization request approved by the department or its
designated representative. A list of drugs subject to prior
authorization, known as the prior authorization drug list,
will be provided to interested Medicaid providers...

- **ARM 37.85.207** Services not provided by Medicaid program.
  (1) Items or medical services not specifically included within these
rules as covered benefits of the Montana Medicaid program are
not reimbursable.

(2) The following medical and nonmedical services are explicitly
excluded from the Montana Medicaid program, except for
those services specifically available, as listed in **ARM_ 37.40.1406, 37.90.402**, and Tile 37, chapter 34, subchapter 9 to
persons eligible for home and community-based services; and
except for those Medicare covered services, as listed in **ARM_ 37.83.812** to qualified Medicare beneficiaries for whom the
Montana Medicaid program pays the Medicare premiums,
deductible, and coinsurance:
(a) chiropractic services;
(b) acupuncture services;
(c) naturopathic services;
(d) dietician services;
(e) physical therapy aide services, except as provided in ARM 37.86.601, 37.86.605, 37.86.606, and 37.86.610;
(f) surgical technicians who are not physicians or mid-level practitioners;
(g) nutritional service;
(h) masseur or masseuse services;
(i) dietary supplements...

3.2.2 Some items not covered under State Plan Medicaid may in limited cases be purchased through Individual Goods and Services in the 0208 Waiver if the appropriate criteria is met and it is not prohibited by Federal or State Statutes.

3.2.3 It is the responsibility of the consumer to cover any and all costs of services and medications that are not covered under Medicaid.

4. Procuring prescribed medications:

4.1 Purpose:
This section clarifies the protocols for obtaining prescribed drugs for consumer use.

4.2 Guidelines:
4.2.1 Prescribed medications shall be obtained directly from a pharmacy.

4.2.1.1 Medications prescribed by a naturopath can be obtained from that naturopath as long as the guidelines for labeling and information are followed.