## POLICY & PROCEDURE FOR STAFF Fee for Prescriptions Without a Visit

October 9, 2017

# Effective November 1<sup>st</sup>, 2017, a \$20 fee applies for prescriptions without a visit for Dr. Stewart's patients.

#### **Clarifications & Examples:**

- Multiple medications on a single Rx request count as only 1 request. For example, if a patient requests 5 meds at once, the fee is \$20 (not \$100).
- If a patient calls in for medication(s) one day, and then again the next day (or even a few hours later), that counts as 2 requests, \$20 each.
- If a patient requests a prescription renewal, even if he/she should still have repeats, I will renew a fresh Rx as requested by the patient and the fee applies since the patient will have been fully advised of the fee before they initiate the request.
- This applies to all of telephone, voicemail, or online requests.
- HST does not apply.

#### **How to Advise Patients:**

- Briefly advise patients that prescriptions without seeing the doctor are not covered by OHIP. Dr. Stewart has put off charging a fee for as long as he can, but it now forced to do so.
- For more information, patients can be directed to the EMR handout or to my website.
- Patients can be offered a visit to come in for the Rx renewal as an alternative to paying the fee (see below for more information on booking Rx Renewal Visits).
- Please be sure to confirm that patient agrees to the fee within 60 days and ensure the
  patient is aware that failure to pay any outstanding fee may be grounds for
  discharging a patient from my practice.

#### **Booking Rx Renewal Visits:**

- I will start a new type of visit for the EMR schedule: "Rx Renewal Visit". Please be sure to specify the medication(s) that the patient specifically needs in the booking.
- This appointment type should be classified as "5 minutes", but can be double-booked or squeezed in to the normal scheduled bookings
- For patients who need simple Rx Renewal Visits, my goal is to guarantee an Rx Renewal Appointment before the patient's meds are due, providing the patient has followed our policy of allowing 2 business days for any Rx request.
  - The EMR will usually tell you when the medication is due. If not, you can ask the patient.

- If we offer appointment times, but the patient declines the offered option(s), that is the patient's challenge, not our responsibility.
- I now have 3 types of "Squeeze-In" Visits:
  - Rx Renewals
  - Liquid Nitrogen Visits
  - UTI Protocols with red flags (see below for details)
- Please limit all "squeeze-in" visits to no more than 1 per hour.
- If it ends up that I have zero spots to offer before their Rx Renewal comes due, then please let me know and I will waive the fee for that patient. This may easily apply on vacation weeks or days that I am away.
- When a patient books an "Rx Renewal Visit", please be clear to the patient that this is
   <u>not</u> a standard visit. It is a squeeze-in, quick visit, where we will only be assessing the
   patient's medication and quickly renewing. There will be no time to discuss other issues.
   If the patient has additional concerns, they should book a standard visit within my
   standard booking guidelines.
- Prep for these visits will be applicable to the medication(s) being renewed.
  - i.e. if a BP med, pt will need BP with prep.
  - i.e. if a thyroid med, pt will need weight checked with prep.
  - Note: a BP may not apply to many Rx Renewal visits.

#### **Prescriptions Requests from Pharmacy:**

- We have always had a general policy that we do not respond to Rx requests from pharmacies, except for blister packs patients.
- Now that fees apply to the patient, it must be the patient who initiates the request and agrees to the fee, I will no longer accept Rx requests from pharmacies either, not even for blister packs.
- I will be sending pharmacies a notification of such. *Unless an exception has been made* for the patient, please simply shred any Rx request from pharmacy. Do not waste staff time scanning to chart.
- Please be sure to differentiate Rx Requests from faxes that ask questions or provide information.
- If a non-local pharmacy faxes us a request, please fax them back my policy for their knowledge so they can advise the patient to initiate the request.

#### **Exceptions When the Fee may be Waived or Pharmacy Requests Accepted:**

- I will make exceptions on a case by case basis and waive/reduce the fee in certain circumstances, such as:
  - o Frail, elderly, or demented patient who cannot easily come in for a visit.
  - Patients with severe financial strain (but even they have the option of coming in for a visit).

- Patients for whom I cannot offer an Rx Renewal Visit before their medication is due.
- If you wonder if a patient should be exempt, please check with me before even suggesting to the patient.
- Note: exemptions may simply be one-time only. For instance, I might waive for a patient one month, but three months later, I may wish to see that same patient in person for review so he/she should come in for a visit, not renew over phone.

#### **Invoicing the Patient:**

- There is no need to send an initial invoice at the time of the bill, since the patients will be aware when they initiate the request. However, if not paid within 30 days, then please send reminder invoice.
- Try to use email to whenever possible instead of mailing (saves postage costs), assuming the patient has consented to email.
- There are three main ways a patient will be requesting Rx's:
  - Over the phone during live phone call. (As above, please notify patients of fee when speaking to them).
  - Telephone Voicemail (Please ensure voicemail message is changed to advise Dr. Stewart patients of fee).
  - Online eRequest (I will update the online forms to clearly notify patients of of fee).
- Whenever the staff receive any request from patient via any of these methods, please remember to invoice at the same time.

#### **UTI Protocol Patients:**

- Revisions are coming to the UTI Protocol which will negate the need to even do a urine dip in most cases.
- The UTI protocol was made with the intention of saving needless visits. Accordingly, UTI Protocol Rx's will be <u>exempt</u> from requiring a fee for Rx without a visit.
- <u>However</u>, if there are any Red Flags on the Urine Dip Protocol, then the patient should be seen. Book the same way you would an "Rx Renewal Visit":
  - booked simply as a 5-minute squeeze-in visit
  - o not exceeding more than 1 of squeeze-in of any type per hour.

#### **After-Hour Clinics:**

- I foresee patients may try to come in to an AHC for a simple "Rx Renewal".
- This is ok for my patients attending my AHC.
- However, patients are <u>not</u> allowed to waste the AHC spots of the <u>other</u> doctors for this purpose. They should be declined before even registering. (Remember, my plan is to offer patients an Rx Renewal Visit before the medication is due, otherwise, I will waive the fee).

#### Warfarin Rx's:

- Warfarin Rx's will be exempt from the fee.
- The rationale here is that patients may frequently require dose changes, which is not within their control and repeated visits to reassess a simple dose change are not medically necessary.

### **Opioids, Benzos and other Controlled Medications:**

- We are not allowed to put refills on Rx's for controlled medications.
- With the opioid crisis, I want to maintain tighter control over these types of prescriptions anyway, so if a patient is running out of their medications, they generally should be coming in for a visit to see me, not renewing over phone.

Thank you all.

Adam