

**LOUISIANA STATE UNIVERSITY  
HEALTH CARE SERVICES DIVISION  
BATON ROUGE, LA**

POLICY NUMBER: 9003-08

CATEGORY: Medical

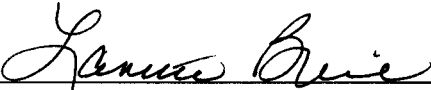
CONTENT: Disease Management Prescription Assistance Processing Fee

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Acting Chief Executive Officer  
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10/17/08  
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Date

  
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Acting Deputy Chief Executive Officer  
LSU Health Care Services Division

10/17/08  
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Date

  
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Acting Chief Medical Officer  
LSU Health Care Services Division

10/17/08  
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# OUTPATIENT PRESCRIPTION PROCESSING FEES

## PURPOSE:

In December 1997 the HCSD initiated the Disease Management Program. There are five components of the Disease Management Program:

- (1) Evidence-Based Guidelines,
- (2) Actionable Patient Goals,
- (3) Knowledgeable Providers,
- (4) Engaged Patients, and
- (5) Medication Assistance.

The purpose of this policy is to provide a mechanism to standardize fees charged for processing prescriptions across the LSU Health System. Fees are collected to expand the medication assistance initiative and to provide an opportunity for eligible indigent patients to invest in and take responsibility for their own healthcare.

## POLICY:

In an effort to fully execute the disease management initiatives, the Louisiana State University Health Care Services Division (LSU HCSD) recognizes improving access to and patient participation/compliance with medications is essential in the pursuit of improving one's health. LSU-HCSD medical centers shall identify patients eligible for the manufacturers' prescription assistance programs, and access these programs on the patient's behalf.

Eligibility for access to the LSU/HCD Medication Assess Program consists of:

1. Patient of LSU/HCSD who has a household income of less than 200% of the Federal Poverty level.
2. Patient defined as having a medical record with a visit within one year and whose care is followed by a LSU/HCSD physician or nurse practitioner.
3. No third party insurance for medication.
4. Eligibility shall be assessed every six months.

It is the policy of the LSU/HCSD to collect a prescription assistance processing fee from **each** patient for each prescription dispensed from the HCSD Medication Assistance Program **inclusive of all refills**. The amounts are:

1. A flat fee of \$6.00 per prescription will be collected regardless of days supply up to 90 days.  
This fee will be collected at the time that the patient picks up the prescription from the pharmacy.

2. The fee is not to exceed a maximum fee of \$36.00 per patient per visit. (Fee does not apply to diabetic supplies and to non-pap (non-patient assistance program) medications.)

If a patient's family income is below 200% of the federal poverty level and the patient states he or she is without the means to pay the prescription assistance processing fee and meets the facilities criteria of "Free Care", the patient will be referred to Social Services to be screened to determine if the patient meets criteria to have the processing fee waived based on facility criteria.

All transactions will be recorded in order to create an audit trail linking the payment with the prescription and the person receiving the processing fee. At a minimum, the following data will be recorded: (1) identification number, (2) amount of processing fee received and (3) hospital staff receiving processing fee. Each facility will develop a mechanism to allow funds collected to be reinvested into patient services.

### **Non – Medication Assistance Program Prescriptions:**

#### **Eligibility:**

1. Legitimate patient of a LSU-HCSD facility – defined as having a medical record with a visit within one year. Healthcare followed up and managed by a LSU-HCSD provider.
2. Prescription written by a LSU-HCSD provider with prescriptive authority.

Patients that do not qualify for the LSU Medication Assistance Program due to income, may get their prescriptions filled by one of the LSU facilities for the cost of the medication plus the same dispensing fee that is charged to Medicaid (currently \$8.10) per prescription.

### **SCOPE:**

This policy applies to all hospitals, medical staff and employees of the HCSD. This policy and subsequent revisions to this policy shall become effective upon approval of the CEO of LSU HCSD.

### **IMPLEMENTATION:**

Each LSU HCSD hospital shall develop, and implement procedures which ensure compliance with the clinical, procurement and fee processing procedures outlined in the prescription assistance processing fee policy.

### **EXCEPTIONS:**

Exceptions to this policy require the prior approval of the LSU HCSD Chief Medical Officer or his designee.