

Rule No. 560-X-16-.05 Long Term Care Facilities.

(1) (a) The nursing facility must meet the State and Federal Standards and the Title XIX rules and regulations for pharmacy services.

(b) The payment limit for prescription drugs dispensed to patients confined in the Long Term Care facilities must not exceed the upper limits as contained in Rule 560-X-16-.06.

(2) Over-the-counter insulins, covered through the Medicaid pharmacy program may be submitted for payment by utilizing the NDC number. All other OTC medications/products should be included in the facility cost report. See Rule No. 560-X-16-.12.

(3) Payment for drugs dispensed with a unit dose system will be limited to those pharmacies that make application and are approved by the Medicaid Pharmacy Program.

(4) As an attachment to or included with such application, the pharmacy must include a detailed explanation of the delivery system employed to provide drugs to the nursing facility.

(5) The furnishing of solid oral dosage form of a covered drug item by an approved unit dose system is an acceptable method for providing drugs under the program.

(6) The basis of payment for the unit dose drug distribution system cannot exceed the upper limits of payment as set forth by the regulations.

(7) The Alabama Medicaid Agency requires that all prescriptions for Medicaid nursing home patients who are on long-term therapy or maintenance drugs be written for a 30 up to a 34-day supply. A 90-day supply is permitted for certain maintenance therapies. Payment for units greater than 34 days, unless otherwise permitted, may be recouped by Medicaid unless the pharmacist can provide documentation to support the units dispensed. EXCEPTION: This requirement does not apply to those pharmacies that are utilizing a unit dose system approved by the Alabama Medicaid Agency.

(8) Each pharmacy using an approved unit dose system must submit only one claim per drug per recipient each month and only the amount of the prescribed drug actually consumed by the patient may be included.

(9) All medication orders are filled and/or dispensed from a signed original or direct copy of the physician's prescription order as authorization for approved unit dose pharmacies. Exception: Telephoned prescriptions for non-controlled drugs are acceptable without the subsequent signature of the practitioner.

(10) Each dose is individually packaged in a sealed, tamper proof container and carries full disclosure labeling, including, but not limited to, product name and strength, manufacturer's or distributor's name, lot number and expiration date.

(11) When a resident leaves the facility and is expected to return, a facility shall hold all medications until the return of the resident. All continued or re-ordered medications will be placed in active medication cycles upon the return of the resident. If the resident does not return to the facility within 30 days, any medications held by the facility shall be placed with other medications for destruction or distribution as permitted by the State Board of Pharmacy regulations. If at the time of discharge it is known that the patient will not return, medications may be destroyed or donated as allowed by State law.

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Statutory Authority: State Plan, Attachment 3.1-A and 4.19-B; Title XIX, Social Security Act; 42 C.F.R. Section 447.331 & Section 401, et seq.; Omnibus Budget Reconciliation Act of 1990 (Public Law 101-508).

History: Rule effective October 1, 1982. Amended April 14, 1992; November 12, 1997; and February 10, 1998. **Amended:** Filed March 19, 1999; effective June 10, 1999.

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