



**DEPARTMENT OF MENTAL HEALTH
POLICY/PROCEDURE**

SUBJECT INDIGENT MEDICATIONS PROGRAM	POLICY NO. 200.06	EFFECTIVE DATE 05/14/2013	PAGE 1 of 3
APPROVED BY:  Director	SUPERSEDES 103.06 05/14/2013	ORIGINAL ISSUE DATE 08/15/2004	DISTRIBUTION LEVEL(S) 1

PURPOSE

- 1.1 To establish a Los Angeles County – Department of Mental Health (LAC-DMH) policy that governs the DMH Pharmacy Services’ Indigent Medications Program (IMP) to establish procedures to obtain prescribed medications for eligible indigent and low income clients who receive services at directly operated LAC-DMH programs at no cost from pharmaceutical company foundations.

DEFINITIONS

- 2.1 **Patient Assistance Program (PAP):** A pharmaceutical company foundation program which provides prescribed medications at no cost according to that specific foundation’s eligibility criteria.
- 2.2 **Eligible Clients:** Indigent and low income clients receiving services from DMH directly operated programs who qualify for a PAP.
- 2.3 **Replacement Medications:** Medications provided to LAC-DMH by PAPs for eligible clients.
- 2.4 **Excess Replacement Medications:** Prescribed medications received from PAPs for clients who no longer need them (e.g. due to a medication or dosage change, establishment of benefits, and/or termination from treatment).
- 2.5 **IMP Coordinators:** LAC-DMH Pharmacy Services employees who identify clients who may meet eligibility criteria for free medication and assist them with the PAPs’ application and renewal processes.
- 2.6 **DMH Program Staff:** LAC-DMH employees assigned to work at directly operated programs.

POLICY

- 3.1 Indigent and low income clients shall, to the extent possible based on various eligibility criteria, be provided with access to PAPs for psychotropic medications prescribed/furnished by LAC-DMH psychiatrists and psychiatric mental health nurse



**DEPARTMENT OF MENTAL HEALTH
POLICY/PROCEDURE**

SUBJECT	POLICY NO.	EFFECTIVE DATE	PAGE
INDIGENT MEDICATIONS PROGRAM	200.06	05/14/2013	2 of 3

practitioners (NP).

PROCEDURE

Application Process

- 4.1 IMP Coordinators review client financial information to identify potentially eligible clients who could meet PAP's eligibility criteria.
- 4.2 LAC-DMH program staff assists clients with the PAP application process.
- 4.3 Psychiatrists/NPs review PAP applications and sign if clinically appropriate.
- 4.4 IMP Coordinators submit completed applications to PAPs for consideration.
- 4.5 IMP Coordinators review client financial status each month to determine continued eligibility.
- 4.6 When clients meet criteria for continued eligibility, IMP Coordinators renew the applications in accordance with the PAP's requirements.

Handling of Replacement Medications

- 4.7 If the applications are approved, the foundations ship replacement medications to LAC-DMH Pharmacy Services.
- 4.8 To ensure the proper receipt and storage of replacement medication inventory, medications are stored and administered by LAC-DMH Pharmacy Services in accordance with LAC-DMH Policy 306.03 "Storing, Administering, and Accountability of Medications." (Reference 1)
- 4.9 Pharmacy Services will ship replacement medications to dispensing network pharmacies in lieu of payment.
- 4.10 LAC-DMH will utilize excess replacement medications for those eligible clients whose applications have been submitted to PAPs and are pending approval.

Client Consent for PAP Enrollment and the Disclosure of Protected Health Information (PHI)

- 4.11 Clients provide informed consent by signing PAP applications certifying that the information provided is accurate.



**DEPARTMENT OF MENTAL HEALTH
POLICY/PROCEDURE**

SUBJECT	POLICY NO.	EFFECTIVE DATE	PAGE
INDIGENT MEDICATIONS PROGRAM	200.06	05/14/2013	3 of 3

4.12 LAC-DMH program staff ensures that clients authorize the disclosure of their Protected Health Information (PHI) in accordance with LAC-DMH Policy 500.01, Use and Disclosure of Protected Health Information Requiring Authorization. (Reference 2)

4.12.1 The IMP Coordinator or DMH program staff utilizes the DMH Fax Cover for Transmitting PHI when faxing PAP applications and reports in accordance with LAC-DMH Policy No. 508.01, Safeguards for Protected Health Information. (Reference 3)

Record Keeping

4.13 The IMP Coordinator or LAC-DMH program staff will complete the LAC-DMH Account Tracking Sheet (Attachment III) which shall be placed in the client’s medical record in accordance with LAC-DMH Policy No. 501.03, Accounting of Disclosures of Protected Health Information. (Reference 4)

4.14 Each program shall keep copies of PAP applications accessible upon audit in a central location.

4.15 LAC-DMH Pharmacy Services shall maintain copies of PAP applications for a minimum of six (6) months.

AUTHORITY

1. DMH Policy No. 306.03, Storing, Administering, and Accountability of Medications
2. DMH Policy No. 500.01 Use and Disclosure of Protected Health Information Requiring Authorization
3. DMH Policy No. 508.01 Safeguards for Protected Health Information
4. DMH Policy No. 501.03, Accounting of Disclosures of Protected Health Information

RESPONSIBLE PARTY

LAC-DMH Office of the Medical Director