# 2024 Medication & Pharmacy User Guide

OFFICE OF THE MEDICAL DIRECTOR



MENTAL HEALTH & SUBSTANCE USE SERVICES

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### OFFICE OF THE MEDICAL DIRECTOR STAFF DIRECTORY

Baffo-Gyan, Anna	Administrative Assistant	
Chapman, Aaron, MD	Medical Director	
Coombs, Angela, MD	Associate Medical Director	
Dating, Peter	Administrative Specialist II	
Doral, Marianne, CPhT	Pharmacy Support Specialist	
Firl, Victoria, PharmD, BCPP	Senior Clinical Pharmacist	
Jarbouai, Cari	Program Specialist	
Lewis, Stephanie, LMFT	Division Director, Crisis Services	
North, Cassie, CPhT	Pharmacy Support Specialist	
Raynor, Charles, PharmD	Director of Pharmacy Services	
Richholt, Kinzi, MSN, APRN	Chief Nursing Officer	
Smith, Freddie, MPH	Division Director, Integrated Health Care Services	
Yuan, Betsy, PharmD, BCPP	Senior Clinical Pharmacist	
Yuan, Eric	Program Services Coordinator	

### Programs



### PROGRAMS ADDRESS PHONE & FAX #

1. Access for Asian/Pacific	310 8th Street, Suite 200A	Tel (510) 735-3939
Islander	Oakland, CA 94607	Fax (510) 474-1715
2. Access for Latino	1501 Fruitvale Avenue	Tel (510) 535-6200
2. 7100035 101 201110	Oakland, CA 94601	Fax (510) 535-4169
3. Adult Forensic Behavioral	5325 Broder Boulevard	Tel (925) 551-6740
Health	Dublin, CA 94568	Fax (925) 551-6727
4. Amber House	516 31st Street	Amber CSU:
	Oakland, CA 94609	Tel (510) 379-4179
	·	Fax (510) 423-0792
		Amber CRT:
		Tel (510) 379-4394
		Fax (510) 423-0833
<ol><li>Asian Health Services/</li></ol>	310 8 <sup>th</sup> Street, Suite 210	Tel (510) 735-3900
Mental Health	Oakland, CA 94607	Fax (510) 474-1715
6. Bonita House	1605 Jefferson St.	Tel (510) 923-0199
	Oakland, CA, 94612	Fax (510) 923-0894
7. Casa Ubuntu	7200 Bancroft Avenue, Suite 267	Tel (510) 735-0864
	Oakland, CA 94605	Fax (510) 746-1196
8. CHANGES	7200 Bancroft Avenue, Suite 133	Tel (510) 553-8500
	Oakland, CA 94605	Fax (510) 553-8550
9. CONREP	15750 Foothill Boulevard	Tel (510) 667-3950
10 0 11: 11: 1 6 1 1	San Leandro, CA 94578	Fax (510) 667-3903
10. Dublin High School	8151 Village Parkway	Tel (925) 833-3300
11. Eden Children's Services	Dublin, CA 94568 2045 Fairmont Drive	Fax (925) 833-3322 Tel (510) 667-7540
11. Eden Children's Services	San Leandro, CA 94578	Fax (510) 618-3434
12. Eden CSC	2045 Fairmont Drive	Tel (510) 667-7500
12. Luen CSC	San Leandro, CA 94578	Fax (510) 667-7711
13. Felton Institute (re)MIND	1005 Atlantic Avenue	Tel (510) 318-6100
& BEAM Alameda	Alameda, CA 94501	Fax (510) 728-8605
14. Geriatric Assessment	409 Jackson St.	Tel (510) 891-5600
Response Team (GART)	Hayward, CA 94544	Fax (510) 891-5625
15. Greater HOPE/	1065 A Street	Tel (510) 962-9114
Wellness Connections	Hayward, CA 94545	Fax (510) 538-5215
16. Guidance Clinic	2500 Fairmont Drive	Tel (510) 667-3000
	San Leandro, CA 94578	Fax (510) 667-3005
17. HEAT (Homeless	559 16th Street	Tel (510) 238-5091
Engagement Action Team)	Oakland, CA 94612	Fax (510) 238-5165
18. Hedco Wellness	590 B Street	Tel (510) 247-8235
Center/LIFT/PAIGE	Hayward, CA 94541	Fax (510) 238-5165
19. JAMHR/STRIDES	280 17 <sup>th</sup> Street	Tel (510) 238-5020
- -	Oakland, CA 94612	Fax (510) 352-9981/
		Fax (510) 261-3584
20. Jay Mahler Recovery	15430 Foothill Blvd	Tel (510) 357-3562
Center	San Leandro, CA 94578	Fax (510) 394-6354

### Alameda County Behavioral Health Care Services – Programs

### PROGRAMS ADDRESS PHONE & FAX #

21. La Clinica de la Raza -	1501 Fruitvale Avenue	Tel (510) 535-6200
Casa del Sol	Oakland, CA 94601	Fax (510) 535-4167
22. La Familia Counseling	26081 Mocine Avenue	Tel (510) 881-5921
Services	Hayward, CA 94544	Fax (510) 881-5925
23. Mobile Integ. Assessment	3300 Capitol Avenue, Building B	Tel (510) 574-2062
& Treatment for Seniors	Fremont, CA 94537	Fax (510) 574-2054
24. Oakland Children's Services	7200 Bancroft Ave., Suite 125D	Tel (510) 777-3870
	Oakland, CA 94605	Fax (510) 777-3880
25. Oakland CSC	7200 Bancroft Avenue, Suite 125A	Tel (510) 777-3800
	Oakland, CA 94605	Fax (510) 777-3806
26. Older Adult Service Team	1005 Atlantic Avenue	Tel (510) 924-7667
	Alameda, CA 94501	Fax (510) 878-7345
27. Schreiber Center	7200 Bancroft Avenue, Suite 125A	Tel (510) 383-5020
	Oakland, CA 94605	Fax (510) 383-5022
28. South County Wellness	40963 Grimmer Boulevard	Tel (510) 657-7425
Center	Fremont, CA 94538	Fax (510) 569-4589
29. STARS TAY (Transitional	545 Estudillo Avenue	Tel (510) 746-7480
Age Youth) – Level I	San Leandro, CA 94577	Fax (510) 483-1707
30. STAY/WRAP	3800 Coolidge Avenue	Tel (510) 482-2244
	Oakland, CA 94602	Fax (510) 530-2047
31. Towne House Wellness	629 Oakland Avenue	Tel (510) 658-9480
Center/Circa 60	Oakland, CA 94611	Fax (510) 569-4589
32. Tri-City CSC	39155 Liberty Street, Suite G710	Tel (510) 795-2434
	Fremont, CA 94538	Fax (877) 320-1396
33. TRUST Clinic	384 & 386 14 <sup>th</sup> Street	Tel (510) 268-2294
	Oakland, CA 94612	Fax (510) 273-3842
34. Valley CSC	3730 Hopyard Road, Suite 103	Tel (925) 560-5880
25 V II W II 4 .	Pleasanton, CA 94588	Fax (925) 417-0947
35. Valley Wellness Center	3900 Valley Avenue, Suite B	Tel (925) 484-8457
26 West Oalland March	Pleasanton, CA 94566	Fax (925) 484-1075
36. West Oakland Mental	700 Adeline Street	Tel (510) 465-1800
Health	Oakland, CA 94607	Fax (510) 465-1508
37. Willow Rock Outpatient	2050 Fairmont Drive	Tel (510) 483-3030
Center	San Leandro, CA 94578	Fax (510) 483-2329
38. Woodroe Place	22505 Woodroe Avenue	Tel (510) 537-1688
	Hayward, CA 94541	Fax (510) 537-9222

### Alameda County Behavioral Health Care Services – Programs

### **Community Support Centers**

Office of the Medical Director 2000 Embarcadero Cove, Suite 400 Oakland, CA 94606 Tel (510) 567-8110 Fax (510) 567-6850

Aaron Chapman, *M.D., Medical Director* Angela Coombs, *M.D., Associate Medical Director* 

Charles Raynor, *PharmD, Pharmacy Director*Betsy Yuan, *PharmD, BCPP, Sr. Clinical Pharmacist* 

Victoria Firl, *PharmD, BCPP, Sr. Clinical Pharmacist* 

Marianne Doral, *CPhT, Pharmacy Technician* Cassie North, *CPhT, Pharmacy Technician* 

Access for Asian/Pacific Islander
310 8<sup>th</sup> Street, Suite 200A
Oakland, CA 94607
Tel (510) 735-3939 Fax (510) 474-1715

Chau Le, N.P.
Grace Lee, M.D.
Yuhuan Xie, M.D.
Karen Yun, M.D.
Naomi Chan, N.P.
Cindy-Heung Lau, N.P.
\*Thanh Truong, M.D.
Christine Nguyen, N.P.

Access for Latino
1501 Fruitvale Avenue
Oakland, CA 94601
Tel (510) 535-6200 Fax (510) 535-4169

Haydee Aurora Ortiz, N.P.

- \*Fuensanta (Tita) Botello, M.D.
- \*John Brim, M.D.
- \*Megan Tan, M.D.

Adult Forensic Behavioral Health
5325 Broder Boulevard
Dublin, CA 94568
Tel (925) 551-6740 Fax (925) 551-6727

Jennifer Chaffin, M.D.

Neal Edwards, M.D.

Khenu Singh, M.D.

Rinata Wagle, M.D.

Karen Yun, M.D.

- \*Kawal Singh, N.P.
- \*Naureen Khan, M.D.
- \*Mohammad Jahangiri, M.D.
- \*Paula Lee, M.D.
- \*Lillian Lustman, M.D.
- \*Nicolas Salazar, M.D.
- \*April Clark, N.P.
- \*Sumeet Chagger, N.P.
- \*Wade Exum, M.D.
- \*Sanmukan Surulinathan, M.D.
- \*Lynn Winther, M.D.
- \*Manon Mashburn, M.D.
- \*Gail Ingram, M.D.
- \*Farnaz Khodadadi, N.P.

Amber House 516 31st Street Oakland, CA 94609 CSU: Tel (510) 379-4179 Fax (510) 423-0792 CRT: Tel (510) 379-4394 Fax: (510) 423-0833

\*Ruth Mondolfi, D.O. Edward Lim, M.D. Gilbert Simas, M.D.

### Alameda County Behavioral Health Care Services – Programs Community Support Centers

Asian Health Services/Mental Health 310 8th Street, Suite 210 Oakland, CA 94607 Tel (510) 735-3900 Fax (510) 474-1715

Chau Le, N.P.
Grace Lee, M.D.
Yuhuan Xie, M.D.
Karen Yun, M.D.
Naomi Chan, N.P.
Cindy-Heung Lau, N.P.
\*Thanh Truong, M.D.
Christine Nguyen, N.P.

Condition Release Program (CONREP) 15750 Foothill Boulevard San Leandro, CA 94578 Tel (510) 667-3950 Fax (510) 667-3903

Jennifer Chaffin, M.D.

Bonita House 1605 Jefferson St. Oakland, CA 94612 Tel (510) 923-0199 Fax (510) 923-0894

\*Robert Gutterman, M.D. Lisa Haupert, N.P. \*Kawal Singh, N.P. Jessica Frihart, N.P. \*Farooque Azam N.P. Eden Children's Services 2045 Fairmont Drive San Leandro, CA 94578 Tel (510) 667-7540 Fax (510) 618-3434

\*Rim Ibrahim, M.D. Aurelio Sadang, N.P. \*Shelley Sutton, M.D. \*Lorna Bland, M.D. \*Simret Nanda, M.D.

### **Casa Ubuntu**

7200 Bancroft Avenue, Suite 267 Oakland, CA 94605 Tel (510) 735-0864 Fax (510) 746-1196

### **CHANGES**

7200 Bancroft Avenue, Suite 133 Oakland, CA 94605 Tel (510) 553-8500 Fax (510) 553-8550

William Mains, M.D. Ethan Huffman, N.P.

Eden Community Support Center
2045 Fairmont Drive
San Leandro, CA 94578
Tel (510) 667-7500 Fax (510) 667-7711

Giridhar Reddy, M.D. Luisito Roxas, M.D. \*Alan Cohen, M.D.

### Alameda County Behavioral Health Care Services – Programs Community Support Centers

Felton Institute (re)MIND & BEAM
Alameda
1005 Atlantic Avenue
Alameda, CA 94501
Tel (510) 318-6100 Fax (510) 728-8605

\*Yelice Corea, N.P. \*Robert Kurtz, M.D. Vanessa Simmons, N.P. HEAT (Homeless Engagement Action Team) 559 16<sup>th</sup> Street Oakland, CA 94612 Tel (510) 238-5091 Fax (510) 238-5165

Geriatric Assessment Response Team (GART)
409 Jackson Street
Hayward, CA 94544
Tel (510) 891-5600 Fax (510) 891-5625

Greater HOPE/Wellness Connections
1065 A Street
Hayward, CA 94545
Tel (510) 962-9114 Fax (510) 538-5215

Lori Glassie, P.A. \*Amal Chakraburtty, M.D.

<u>Guidance Clinic</u> 2500 Fairmont Drive San Leandro, CA 94578 Tel (510) 667-3000 Fax (510) 667-3005

Sandyha Dubey, M.D. Mohammad Sheikh, M.D. Hedco Wellness Center/LIFT/PAIGE
590 B Street
Hayward, CA 94541
Tel (510) 247-8235 Fax (510) 238-5165

Richard Cicinelli, M.D. \*Christopher Berger, M.D. Andrea Masters, N.P.

JAMHR/STRIDES 280 17th Street Oakland, CA 94612 Tel (510) 238-5020

Fax (510) 352-9981/Fax (510) 261-3584

Edward Maxwell, M.D. Aaron Miller, N.P. \*Ifeatu Enemmuo, N.P. Cristina Aamot, N.P. Nicole DuPree, N.P. \*Talia Baruch, N.P.

### Alameda County Behavioral Health Care Services – Programs

### **Community Support Centers**

Jay Mahler Recovery Center 15430 Foothill Blvd San Leandro, CA 94578 Tel (510) 357-3562 Fax (510) 394-6354

Edward Maxwell, M.D. \*Michelle Ahn, M.D. \*Shayne Mason, N.P.

La Clinica de la Raza Casa Del Sol 1501 Fruitvale Avenue Oakland, CA 94601 Tel (510) 535-6200 Fax (510) 535-4167

Haydee Aurora Ortiz, N.P.

\*Fuensanta (Tita) Botello, M.D.

Megan Tan, M.D.

Ricardo Lozano, M.D.

- \*Samuel Saenz, M.D.
- \*Rebecca Nkrumah, M.D.
- \*Laura Pulido, M.D.
- \*Swapnil Mehta, M.D.
- \*Jonathan Sole, M.D.
- \*Tene Redman, M.D.
- \*Adin Vaewsorn, N.P.
- \*Luis Fernandez, M.D.
- \*Ivan Mayor, M.D.

La Familia Counseling Service 26081 Mocine Avenue Hayward, CA 94544 Tel (510) 881-5921 Fax (510) 881-5925

Roger Lauer, M.D. \*Dara Fernandez, M.D. Ana Ewart, N.P. Mobile Integrated Assessment & Treatment for Seniors
3300 Capitol Avenue, Building B
Fremont, CA 94537
Tel (510) 574-2062 Fax (510) 574-2054

Sudha Manjunath, M.D. \*Britta Nelson, P.A.

Oakland Children's Services
7200 Bancroft Avenue, Suite 125D
Oakland, CA 94605
Tel (510) 777-3870 Fax (510) 777-3880

\*Emily Harris, M.D.

\*Michael Levin, M.D.

Oakland Community Support Center 7200 Bancroft Avenue, Suite 125A Oakland, CA 94605 Tel (510) 777-3800 Fax (510) 777-3806

Luisito Roxas, M.D.

- \*Timothy Jack, M.D
- \*Vicente Gonzaga, M.D.

Angela Coombs, M.D.

- \*David Schatz, M.D.
- \*William Ottowitz, M.D.

Victoria Firl, PharmD

- \*Aimee McArthur, D.O.
- \*Vanessa Parker, N.P.

### Alameda County Behavioral Health Care Services – Programs

### **Community Support Centers**

Older Adult Service Team
1005 Atlantic Avenue
Alameda, CA 94501
Tel (510) 924-7667 Fax (510) 878-7345

- \*Ralph Fenn, M.D.
- \*Ruth Rayikanti, M.D.
- \*Meghan Ryan, N.P.
- \*Esther Kim, P.A.
- \*Annie Palmer, N.P.

STAY/WRAP 3800 Coolidge Avenue Oakland, CA 94602 Tel (510) 482-2244 Fax (510) 530-2047

- \*Funmilola Umoren, N.P.
- \*Megan O'Brien, N.P. Colette Warden, N.P.

Schreiber Center 7200 Bancroft Avenue, Suite 125A Oakland, CA 94605 Tel (510) 383-5020 Fax (510) 383-5022

\*Gloria Ramos, M.D.

Towne House Wellness Center/Circa 60 629 Oakland Avenue Oakland, CA 94611 Tel (510) 658-9480 Fax (510) 569-4589

Andrea Masters, N.P. Gilbert Simas, M.D.

South County Wellness Center 40963 Grimmer Boulevard Fremont, CA 94538 Tel (510) 657-7425 Fax (510) 569-4589

Janetta Geringson, M.D.

STARS TAY
545 Estudillo Avenue
San Leandro, CA 94577
Tel (510) 746-7480 Fax (510) 483-1707

Yasin Mansoor, M.D. Ebele Mbeledogu, N.P. \*Farhad Numan, M.D. Tri-City Community Support Center
39155 Liberty Street, Suite G710
Fremont, CA 94538
Tel (510) 795-2434 Fax (877) 320-1396

Mohammad Sheikh, M.D. (Child)

- \*Yasin Mansoor, M.D.
- \*Matilda Bockarie, N.P.
- \*Dana McGaffee, M.D.
- \*Eugene Mortison, M.D.
- \*Makan Talayeh, M.D.

### Alameda County Behavioral Health Care Services – Programs Community Support Centers

TRUST Clinic
384 & 386 14th Street
Oakland, CA 94612
Tel (510) 268-2294 Fax (510) 273-3842

Aislinn Bird, M.D. Adebowale Adeniji, N.P. West Oakland Mental Health
700 Adeline Street
Oakland, CA 94607
Tel (510) 465-1800 Fax (510) 465-1508

Neal Edwards, M.D. \*Kimberly Loda, M.D.

Valley Community Support Center 3730 Hopyard Road, Suite 103 Pleasanton, CA 94588 Tel (925) 560-5880 Fax (925) 417-0947

Catherine Felisky, M.D. (Child) \*Ayesha Siddiqua, M.D.

Willow Rock Center - Outpatient
2050 Fairmont Drive
San Leandro, CA 94578
Tel (510) 483-3030 Fax (510) 483-2329

Michelle Spencer, N.P.

Valley Wellness Center
3900 Valley Avenue, Suite B
Pleasanton, CA 94566
Tel (925) 484-8457 Fax (925) 484-1075

Janetta Geringson, M.D.

Woodroe Place 22505 Woodroe Avenue Hayward, CA 94541 Tel (510) 537-1688 Fax (510) 537-9222

\*Janetta Geringson, M.D. \*Kevin Zhang, M.D.

## Psychiatrists and Other Prescribers



### Alameda County Behavioral Health Care Services Psychiatrists and Other Prescribers

Psychiatrists & Other	Service Site	Phone #/
Prescribers		Voicemail
Aamot, Cristina, N.P.	- JAMHR/STRIDES	(510) 238-5020
Adeniji, Adebowale, N.P.	- TRUST Clinic	(510) 268-2294
*Ahn, Michelle, M.D.	- Jay Mahler	(510) 357-3562
*Azam, Farooque, N.P.	- Bonita House	(510) 923-0199
*Baruch, Talia, N.P.	- JAMHR/STRIDES	(510) 238-5020
*Berger, Christopher, M.D.	- Hedco Wellness Center/ LIFT/PAIGE	(510) 247-8235
Bird, Aislinn, M.D.	- TRUST Clinic	(510) 268-2294
*Bland, Lorna, M.D.	- Eden Childrens	(510) 667-7540
*Bockarie, Matilda, N.P.	- Tri-City Adult	(510) 795-2434
*Botello, Fuensanta (Tita), M.D.	- La Clinica	(510) 535-6200
Chaffin, Jennifer, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
	- CONREP	(510) 667-3950
*Chagger, Sumeet, N.P.	- Adult Forensic Behavioral Health	(925) 551-6740
*Chakraburtty, Amal, M.D.	- Greater HOPE	(510) 962-9114
Chan, Naomi, N.P.	- Asian Health Services/MH	(510) 735-3900
Cicinelli, Richard, M.D.	- Hedco Wellness Center/	(510) 247-8235
Cicarett, Meridia, 11.5.	LIFT/PAIGE	(310) 217 0233
*Clark, April, N.P.	- Adult Forensic Behavioral Health	(925) 551-6740
*Cohen, Alan, M.D.	- Eden Adult	(510) 667-7500
Coombs, Angela, M.D.	- Oakland CSC	(510) 777-3800
*Corea, Yelice, N.P.	- Felton Institute (re)MIND & BEAM	(510) 318-6100
Dubey, Sandyha, M.D.	- Guidance Clinic	(510) 667-3000
DuPree, Nicole, N.P.	- JAMHR/STRIDES	(510) 238-5020
Edwards, Neal, M.D.	- West Oakland	(510) 465-1800
	- Adult Forensic Behavioral Health	(925) 551-6740
*Enemmuo, Ifeatu, N.P.	- JAMHR/STRIDES	(510) 238-5020
*Exum, Wade, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
Ewart, Ana, N.P.	- La Familia	(510) 881-5921
Felisky, Catherine, M.D.	- Valley Childrens	(925) 560-5880
*Fenn, Ralph, M.D.	- Older Adult Service Team	(510) 924-7667
*Fernandez, Dara, M.D.	- La Familia	(510) 881-5921
*Fernandez, Luis, M.D.	- La Clinica	(510) 535-6200
Firl, Victoria, PharmD	- Oakland CSC	(510) 777-3800
Frihart, Jessica, N.P.	- Bonita House	(510) 923-0199
*Geringson, Janetta, M.D.	- South County Wellness Center	(510) 657-7425
	- Valley Wellness Center	(925) 484-8457
	- Woodroe	(510) 537-1688
Glassie, Lori, P.A.	- Greater HOPE	(510) 962-9114
*Gonzaga, Vicente, M.D.	- Oakland CSC	(510) 777-3800
*Gutterman, Robert, M.D.	- Bonita House	(510) 923-0199
*Harris, Emily, M.D.	- Oakland Childrens	(510) 777-3870

<sup>\*</sup>Substitutes during absences/locum tenens

### **Psychiatrists and Other Prescribers**

Psychiatrists & Other	Service Site	Phone #/
<b>Prescribers</b> Haupert, Lisa, N.P.	- Bonita House	<b>Voicemail</b> (510) 923-0199
	- CHANGES	, ,
Huffman, Ethan, N.P.	- Eden Childrens	(510) 553-8500 (510) 667-7540
*Ibrahim, Rim, M.D.		, ,
*Ingram, Gail, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Jack, Timothy, M.D.	- Oakland CSC	(510) 777-3800
*Jahangiri, Mohammad, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Khan, Naureen, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Khodadadi, Farnaz, N.P.	- Adult Forensic Behavioral Health	(925) 551-6740
*Kurtz, Robert, M.D.	- Felton Institute (re)MIND & BEAM	(510) 318-6100
Lau, Cindy-Heung, N.P.	- Asian Health Services/MH	(510) 735-3900
Lauer, Roger, M.D.	- La Familia	(510) 881-5921
Le, Chau, N.P.	- Asian Health Services/MH	(510) 735-3900
Lee, Grace, M.D.	- Asian Health Services/MH	(510) 735-3900
*Lee, Paula, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Levin, Michael, M.D.	- Oakland Childrens	(510) 777-3870
Lim, Edward, M.D.	- Amber House	(510) 379-4179
*Loda, Kimberly, M.D.	- West Oakland	(510) 465-1800
*Lozano, Ricardo, M.D.	- La Clinica	(510) 535-6200
*Lustman, Lillian, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
Mains, William, M.D.	- CHANGES	(510) 553-8500
Manjunath, Sudha, M.D.	- Mobile Integrated Assessment & Tx for Seniors	(510) 574-2062
*Mansoor, Yasin, M.D.	- STARS TAY	(510) 746-7480
Transcor, rasar, ras.	- Tri-City Adult CSC	(510) 795-2434
*Mashburn, Manon, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Mason, Shayne, N.P.	- Jay Mahler	(510) 357-3562
Masters, Andrea, N.P.	- Hedco Wellness Center/LIFT/PAIGE - Town House Wellness Center/	(510) 247-8235
	Circa 60	(510) 658-9480
Maxwell, Edward, M.D.	- Jay Mahler	(510) 357-3562
	- JAMHR/STRIDES	(510) 238-5020
*Mayor, Ivan, M.D.	- La Clinica	(510) 535-6200
Mbeledogu, Ebele, N.P.	- STARS TAY	(510) 746-7480
*McArthur, Aimee, D.O.	- Oakland CSC	(510) 777-3800
*McGaffee, Dana, M.D.	- Tri-City Adult CSC	(510) 795-2434
*Mehta, Swapnil, M.D.	- La Clinica	(510) 535-6200
Miller, Aaron, N.P.	- JAMHR/STRIDES	(510) 238-5020
*Mondolfi, Ruth, D.O.	- Amber House	(510) 379-4179
*Mortison, Eugene, M.D.	- Tri-City Adult CSC	(510) 795-2434
*Nanda, Simret, M.D.	- Eden Childrens	(510) 667-7540
*Nelson, Britta, P.A.	- Mobile Integrated Assessment & Tx for Seniors	(510) 574-2062
Nguyen, Christine, N.P.	- Asian Health Services/MH	(510) 735-3900

<sup>\*</sup>Substitutes during absences/locum tenens

### **Psychiatrists and Other Prescribers**

Psychiatrists & Other	Service Site	Phone #/
Prescribers	Service State	Voicemail
*Nkrumah, Rebecca, M.D.	- La Clinica	(510) 535-6200
*Numan, Farhad, M.D.	- STARS TAY	(510) 746-7480
*O'Brien, Megan, N.P.	- STAY	(510) 482-2244
Ortiz, Haydee Aurora, N.P.	- La Clinica	(510) 535-6200
*Ottowitz, William, M.D.	- Oakland CSC	(510) 777-3800
*Palmer, Annie, N.P.	- Older Adult Service Team	(510) 924-7667
*Parker, Vanessa, N.P.	- Oakland CSC	(510) 777-3800
*Pulido, Laura, M.D.	- La Clinica	(510) 535-6200
*Ramos, Gloria, M.D.	- Schreiber Center	(510) 383-5020
*Rayikanti, Ruth, M.D.	- Older Adult Service Team	(510) 924-7667
Reddy, Giridhar, M.D.	- Eden Adult CSC	(510) 667-7500
*Redman, Tene, M.D.	- La Clinica	(510) 535-6200
Roxas, Luisito, M.D.	- Eden Adult CSC	(510) 667-7500
	- Oakland CSC	(510) 777-3800
Sadang, Aurelio, N.P.	- Eden Childrens	(510) 667-7540
*Saenz, Samuel, M.D.	- La Clinica	(510) 535-6200
*Salazar, Nicolas, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Schatz, David, M.D.	- Oakland CSC	(510) 777-3800
Sheikh, Mohammad, M.D.	- Tri-City Childrens	(510) 795-2434
	- Guidance Clinic	(510) 667-3000
*Siddiqua, Ayesha, M.D.	- Valley Adult CSC	(925) 560-5880
Simas, Gilbert, M.D.	- Amber House	(510) 379-4179
	- Towne House Wellness Center	(510) 658-9480
Simmons, Vanessa, N.P.	- Felton Institute re(MIND) & BEAM	(510) 318-6100
*Singh, Kawal, N.P.	- Adult Forensic Behavioral Health	(925) 551-6740
	- Bonita House	(510) 923-0199
Singh, Khenu, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Sole, Jonathan, M.D.	- La Clinica	(510) 535-6200
Spencer, Michelle, N.P.	- Willow Rock Outpatient	(510) 483-3030
*Surulinathan, Sanmukan, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Sutton, Shelley, M.D.	- Eden Children	(510) 667-7540
*Talayeh, Makan, M.D.	- Tri_City Adult CSC	(510) 795-2434
Tan, Megan, M.D.	- La Clinica	(510) 535-6200
*Truong, Thanh, M.D.	- Asian Health Services/MH	(510) 735-3900
*Umoren, Funmilola, N.P.	- STAY/WRAP	(510) 482-2244
Vaewsorn, Adin, N.P.	- La Clinica	(510) 535-6200
Wagle, Rinata, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
*Warden, Colette, N.P.	- STAY/WRAP	(510) 482-2244
*Winther, Lynn, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
Yun, Karen, M.D.	- Adult Forensic Behavioral Health	(925) 551-6740
	- Asian Health Services/MH	(510) 735-3900
Xie, Yuhuan, M.D.	- Asian Health Services/MH	(510) 735-3900
*Zhang, Kevin, M.D.	- Woodroe	(510) 537-1688

<sup>\*</sup>Substitutes during absences/locum tenens

## MIA Program - Financial Rewards



### MIA (Medically Indigent Adult) Program - Financial Rewards

### **Description:**

The MIA Program is a financial reward incentive program. Clinics that participate in the program help save on medication costs for the county. By reducing the county's medication costs, a portion of each clinic's relative savings is distributed back to the clinic for client care use.

### Who's involved:

The provider, client, Patient Assistance Program, Office of the Medical Director Staff, and MIA Program Network Pharmacy\*.

### How it works:



### How financial rewards are determined:

Each year, the ACBH Executive team determines a total reward amount to be returned to participating clinics and may fluctuate year to year. The amount given back to an individual clinic is also dependent on their total participation in the MIA Program and medication cost savings in comparison to other participating clinics.

Please contact Marianne Doral (510-567-8106) if you have questions regarding the MIA program or the application process.

MIA (Patient Assistance Programs) & Application Information^:		
Cymbalta:	http://www.lillycares.com/aboutlillycares.aspx	
Zyprexa tabs/Zyprexa Zydis:	http://www.lillycares.com/aboutlillycares.aspx	
Long-Acting Injectables:		
Abilify Maintena & Abilify Asimtufii:	https://www.otsukapatientassistance.com/apply-online	
Aristada:	http://aristadacaresupport.com/access-services/financial-assistance	
Invega Sustenna, Hafyera,	https://www.jipaf.org/	
& Trinza:	iittps://www.jjpai.org/	
Risperdal Consta:	https://www.jjpaf.org/	
Tardive Dyskinesia:		
Ingrezza:	CP-VBZ-US-0017 ING PAP-Form DIGI L5.pdf	
	(inbracesupportprogram.com)	

<sup>\*</sup> MIA Program Network Pharmacies are listed in **bold** on page 18 of User Guide.

<sup>^</sup> Patient Assistance Programs are subject to change and/or may be terminated by the Drug Manufacturer at any given time.

### Clozapine Monitoring



### **Clozapine Monitoring**

### I. Background

### 1. General Information

Clozapine is the only antipsychotic that is FDA approved for treatment-refractory schizophrenia and reduction of recurrent suicidal behavior in schizophrenia or schizoaffective disorder.

Numerous studies have demonstrated the effectiveness of this medication for treatment-resistant patients unresponsive to standard antipsychotics with fewer incidences of troubling extrapyramidal reactions, neuroleptic malignant syndrome, and tardive dyskinesia.

### 2. Clozapine REMS Program

The requirements to prescribe, dispense, and receive clozapine have changed and are now incorporated into a single, shared program called the Clozapine Risk Evaluation and Mitigation Strategy (REMS). Clozapine REMS is used to manage the potential risk of fatal agranulocytosis that occurs in 1% to 2% of patients prescribed clozapine. As a precautionary measure, the Office of the Medical Director will need to be notified of every patient prescribed clozapine.

### 3. Clozapine Notification Form for the Office of the Medical Director

Please complete a clozapine notification form for any patient who is already receiving clozapine admitted to any Alameda County outpatient clinic or anyone newly started on clozapine and fax to the Office of the Medical Director (see page 33).

### II. Clozapine Patient Criteria

Historically, psychiatric guidelines recommended two failed antipsychotic trials prior to initiation of clozapine. A more recent guideline allows for an earlier trial of clozapine in patients with a history of recurrent suicidality, violence, or comorbid substance abuse<sup>1</sup>. The following are recommended monitoring parameters prior to initiation of clozapine:

- A. Documented history of one of the following treatment-resistant diagnoses:
  - 1. Schizophrenia
  - 2. Schizoaffective disorder
  - 3. Bipolar disorder
- B. Be over the age of 16
- C. A documented history of at least one failed antipsychotic trial of adequate dose and duration. For example, a patient previously on olanzapine 20mg for 6 weeks exhibiting either partial or nonresponse.
- D. Please ensure that none of the following complications or contraindications are present:
  - 1. History of clozapine-induced neutropenia or agranulocytosis
  - 2. Medical condition or drug associated with myeloproliferative disease or immunosuppression
  - 3. Severe medical condition, or other illnesses causing central nervous system depression or concurrent organic state
  - 4. Poor medical compliance and/or poor compliance with lab testing
  - 5. Initial ANC < 1500/mm<sup>3</sup>
  - 6. History of hypersensitivity to a clozapine related drug (amoxapine, loxapine)
  - 7. History of significant physical illness in the prior month
  - 8. History of blood disorder

### Alameda County Behavioral Health Care Services Clozapine Monitoring

- E. The following potential concerns and complications have been addressed, if applicable:
  - 1. History of seizure disorder, or neurological illness, not currently on an anticonvulsant.
  - 2. Finnish or Jewish background, especially Ashkenazi Jew (may be more susceptible to agranulocytosis).
  - 3. Laboratory or clinical evidence of significant hepatic, renal, or cardiopulmonary disease that may increase the concentration of clozapine metabolite to a toxic level.
  - 4. Prostatic enlargement or narrow angle glaucoma that may worsen due to clozapine's anticholinergic properties.
  - 5. The use of concomitant medications that have potentially additive adverse outcomes including those with the following effects:
    - a. Bone marrow suppression
    - b. CNS Depression
    - c. Seizure provoking or threshold lowering
    - d. Blood pressure lowering agents (anti-hypertensives)
    - e. Substrates/inhibitors/inducers of CYP1A2, 2D6, and 3A4
    - f. Highly protein bound drugs

### **III.** Initiation of Clozapine Treatment

The following must be completed per FDA regulations for prescribing and administering clozapine to clients:

- A. Physician must enroll and become certified in the Clozapine Risk Evaluation and Mitigation Strategy (REMS) Program.
- B. Physician (or designee) must enroll clients into the REMS program and review the risk and benefits of clozapine with the client and any caregivers.
- C. Baseline ANC must be reported prior to initiation of clozapine.

### IV. Clozapine REMS contact information

Website:	www.clozapinerems.com	
Phone number:	888-586-0758	
Fax number:	800-878-5927	

### **Clozapine Monitoring**

### V. Additional Clozapine Resources:

- A. Clozapine REMS website: <u>www.clozapinerems.com</u>
  - 1. Guide for Healthcare Providers
  - 2. Guide for Patients and Caregivers
  - 3. Providers' Knowledge Assessment Forms
- B. Clozapine Information:

http://www.acbhcs.org/MedDir/UserGuide/ClozapineInfoSheets.pdf

- 1. Blood Monitoring Requirements
- 2. Clozapine Blood Concentrations
- 3. ANC Reporting Requirements
- 4. Black Box Warnings and Serious Adverse Drug Reactions
- 5. Common Side Effects
- 6. Drug Interactions
- 7. Myocarditis Monitoring Algorithm
- 8. Clozapine Side Effect Severity Scale (GASS-C)
- 9. REMS Enrollment Forms

### **Clozapine Monitoring**

### **VI. Frequency of ANC Monitoring and Treatment Recommendations**

Recommended Monitoring Frequency and Clinical Decisions by ANC Level

ANC Level	Treatment Recommendation	ANC Monitoring
Normal Range for a New Patient • General Population (ANC ≥ 1500/μL)  BEN POPULATION	<ul> <li>Initiate treatment</li> <li>If treatment interrupted:</li> <li>&lt; 30 days, continue monitoring as before</li> <li>≥ 30 days, monitor as if new patient</li> </ul>	Weekly from initiation to 6 months     Every 2 weeks from 6 to 12 months     Monthly after 12 months
<ul> <li>BEN Population (ANC ≥ 1,000/µL)</li> <li>Obtain at least two baseline ANC levels before initiating treatment</li> </ul>	Discontinuation for reasons other than neutropenia	See Section 2.4 of the full Prescribing Information
Mild Neutropenia (1000 to 1499/μL)*	GENERAL POPULATION - Continue treatment	GENERAL POPULATION  • Three times weekly until ANC ≥ 1500/µL  • Once ANC ≥ 1500/µL, return to patient's last "Normal Range" ANC monitoring interval**
	BEN POPULATION  Mild Neutropenia is normal range for BEN population, continue treatment  Obtain at least two baseline ANC levels before initiating treatment  If treatment interrupted  < 30 days, continue monitoring as before  ≥ 30 days, monitor as if new patient	BEN POPULATION  • Weekly from initiation to 6 months  • Every 2 weeks from 6 to 12 months  • Monthly after 12 months
	Discontinuation for reasons other than neutropenia	See Section 2.4 of the full Prescribing Information
Moderate Neutropenia (500 to 999/µL)*	GENERAL POPULATION  Recommend hematology consultation  Interrupt treatment for suspected clozapine induced neutropenia  Resume treatment once ANC normalizes to ≥ 1000/µL	GENERAL POPULATION  Daily until ANC ≥ 1000/μL, then Three times weekly until ANC ≥ 1500/μL  Once ANC ≥ 1500/μL, check ANC weekly for 4 weeks, then return to patient's last "Normal Range" ANC monitoring interval*
	BEN POPULATION  Recommend hematology consultation  Continue treatment	BEN POPULATION  • Three times weekly until ANC ≥ 1000/μL or ≥ patient's known baseline.  • Once ANC ≥ 1000/μL or patient's known baseline, then check ANC weekly for 4 weeks, then return to patient's last "Normal BEN Range" ANC monitoring interval**
Severe Neutropenia (less than 500/µL)*	GENERAL POPULATION     Recommend hematology consultation     Interrupt treatment for suspected clozapine induced neutropenia     Do not rechallenge unless prescriber determines benefits outweigh risks	GENERAL POPULATION  Daily until ANC ≥ 1000/μL  Three times weekly until ANC ≥ 1500/μL  If patient rechallenged, resume treatment as a new patient under "Normal Range" monitoring once ANC ≥ 1500/μL
	BEN POPULATION Recommend hematology consultation Interrupt treatment for suspected clozapine induced neutropenia Do not rechallenge unless prescriber determines benefits outweigh risks	BEN POPULATION  Daily until ANC ≥ 500/μL  Three times weekly until ANC ≥ patients established baseline  If patient rechallenged, resume treatment as a new patient under "Normal Range" monitoring once ANC ≥1000/μL or at patient's baseline

<sup>\*</sup> Confirm all initial reports of ANC less than 1500/µL (ANC < 1000/µL for BEN patients) with a repeat ANC measurement within 24 hours

<sup>\*\*</sup> If clinically appropriate

# Antipsychotic Monitoring & Long-acting IM Antipsychotics & Tx of Adult ADHD Requirements



### **Antipsychotic Monitoring Requirements**

- 1. Baseline assessment of movement disorders documented
- 2. If possible symptoms of T.D., AIMS examination done at least every 6 months
- 3. Weight: Measured at baseline, at every visit for 9 months, then every 3 months thereafter
- 4. Glucose/A1c: Measured at baseline, at 3 months, at 6 months, then annually
- 5. **Cholesterol/triglycerides:** Measured at baseline, at 3 months, at 6 months, then annually
- 6. **Prolactin** (for clients on <u>risperidone</u>, <u>paliperidone</u> or any <u>conventional agent</u>): Measured annually & symptom assessment

### **Psychotropic Guidelines**

Aripiprazole (Abilify) should be dosed only as once daily.

Antipsychotic medications should not be used **solely** for sleep or anxiety disorders.

### **Long-Acting Injectable Antipsychotics**

Zyprexa Relprevv (olanzapine pamoate)

The above long acting antipsychotic is **NOT covered by either ACBH or Medi-Cal Rx**. Medi-Cal Rx will require a PA. Only patients with an approved Medi-Cal Rx PA or approved through a respective Patient Asst. Program, if available, will be eligible to receive these medications. To inquire about the availability or acquire an application for a Patient Assistant Program, contact the Office of the Medical Director (510-567-8106).

### **Adult-Attention Deficit Hyperactivity Disorder (ADHD)**

ACBH does not treat patients with a primary diagnosis of Adult ADHD. However, clients with a *co-morbid diagnosis* of Adult ADHD may be treated along with their primary psychiatric disorder(s). Please refer to the *ACBH Adult ADHD Assessment & Rating Guidelines*, which can assist in both diagnosis and treatment.

# Medication Monitoring Criteria



Alameda Behavioral Health Care Services perform randomly selected chart reviews every 1-2 quarters to ensure adherence to prescribing standards and expectations and provide recommendations to improve quality of documentation. At minimum, the charts should include the following:

### I. General psychotropic prescribing

- A. Document dose, frequency, and indications of all psychotropic medications.
- B. Must document rationale in progress notes if dose exceeds FDA approved ranges.
- C. Indicate specific target symptoms for off-label use.

### II. Antipsychotic prescribing

- A. Prescribing antipsychotics as anxiolytics and sedative/hypnotic is highly discouraged
- B. Monitoring
  - i. Weight: measured at baseline, then every visit for 9 months, then quarterly
  - ii. Blood pressure: measured at baseline, 3 months, then annually
  - iii. Fasting glucose: measured at baseline, at 3 months, at 6 months, then annually
  - iv. Fasting lipid: measured at baseline, at 3 months, at 6 months, then annually
  - v. Prolactin: measured annually for typical antipsychotics, risperidone, and paliperidone and when clinically indicated
  - vi. Extrapyramidal Side Effects (EPS)-document assessments for EPS with each encounter

### C. Abnormal labs

- Metabolic (weight, glucose, lipid)-document discussion with the client or caregiver AND one of the following
  - 1. Document a change of medication or dose
  - 2. Document education on physical life style improvements
  - 3. Document referral or discussion with clients PCP
- ii. Prolactin- documentation of a symptom assessment should always accompany an abnormal level

### D. Antipsychotic polypharmacy

- i. Rationale shall be provided in every case of polypharmacy
- ii. Cross titrations and temporary oral overlap for a long acting injectable are not considered polypharmacy but clear documentation on the intended use is expected

### E. Tardive Dyskinesia (TD)

- i. Document the presence or absence of involuntary movements for each encounter
- ii. With current or history of involuntary movements, an AIMS shall be performed at least every six months

### III. Antiparkinsonian agent prescribing

- A. Routine prophylaxis for EPS is discouraged
- B. Document dose, frequency, specify target symptoms and outcomes

### IV. Mood stabilizer prescribing

- A. Lithium
  - i. Documentation of serum levels assessments when starting or after dosage adjustment, every six months and when clinically indicated
  - ii. History of lithium toxicity should be documented
  - iii. Baseline thyroid function test, CBC w/ diff, BUN/Cr, urinalysis, and pregnancy status for child bearing aged females
  - iv. Documentation of ongoing labs, pregnancy status and side effect assessments when applicable
  - v. If serum level is found outside the therapeutic range, chart documentation indicates symptoms assessment, and/or an appropriate intervention
- B. Carbamazepine and Valproic acid derivatives
  - i. Baseline liver function test, CBC with differential, and pregnancy status for child bearing aged females
  - ii. Documentation of ongoing labs, pregnancy status and side effect assessments when applicable
  - iii. If serum level is found outside the therapeutic range, chart documentation indicates symptoms assessment, and/or an appropriate intervention

### V. Stimulants

- A. Monitoring
  - i. Height and weight every six months (children & adolescents)
  - ii. Pulse every 3 months, and blood pressure every 6 months (clients >12 years old)

# ACBH Clinic and Medication Room Policy & Procedures



2000 Embarcadero Cove, Suite 400 Oakland, CA 94606 Tel (510) 567-8100 Fax (510) 567-6850

### POLICY/ PROCEDURE REGARDING: ACBH Clinic Medication Rooms

Issued By: Aaron Chapman, M.D.

**ACBH Medical Director** 

Date: January 26, 2016

### **PURPOSE:**

This policy and procedures is intended to serve as a guideline for compliance with state and federal laws and regulations as well as for general safe practice medication standards to ensure medication safety in the clinic setting.

### SCOPE:

This policy applies to ACBH affiliated clinics and to staff working in ACBH-affiliated clinics.

### **POLICY:**

All ACBH affiliated clinics shall be in compliance with state and federal laws and regulations in the access, ordering and receiving, storage, prescribing and dispensing, and disposal of medications.

### 1. ACCESS

a. All prescription medications, medication injection equipment (syringes, needles) and non-prescription medication will be stored in a locked medication room or closet with access and administration limited to legally authorized, medical staff only (Clinic Director shall have access for storage purposes only). Designated medical staff will be identified in writing by the clinic.

LICENSED STAFF	NAME	AUTHORIZED (Access, dispensing, administration, ordering)
PHYSICIANS		
PHARMACISTS, PHARMACY TECHNICIAN		
NURSES		
CLINIC DIRECTOR		(Access for storage only)
OTHER:		

- b. Keys that open medication cabinets are issued to the above authorized medically licensed personnel who are assigned to work at these sites only; these staff members are expected to maintain possession of the keys and to return the keys when no longer assigned to the clinic.
- c. The medication room shall not be accessible via the facility's master key.
- d. Total number of keys available at this location:\_\_\_\_\_

### 2. **STOCK MEDICATIONS** (ex. Urgent Supply of medications)

a. The urgent supply of medications that may be available at the clinic includes:

DRUG NAME	DOSE	FORM
Diphenhydramine	50mg/ 1mL	inj
Epinephrine	1:1000	inj

b. Every clinic that maintains urgent supply of medications must keep records of their acquisition, administration, and disposition (B&P Code 4081, 4105, 4180). The designated staff member will be responsible for keeping inventory. Expired urgent supply of medications shall be logged prior to proper disposal. (Use "Urgent Medication Log", Attachment Log #1.)

### 3. RECEIVING AND STORING MEDICATIONS

- a. The clinic shall only receive medication deliveries when medical/authorized staff is present.
- Medications delivered to the clinic should be received by authorized personnel, and then promptly and appropriately cataloged and stored in the medication room. (Use "Medication Receipt Log", Attachment Log #2.)
- c. Non-medical staff, such as a front desk clerk, may receive medication deliveries but shall immediately notify authorized staff to promptly record and store medications securely in the medication room. Packages shall never be left unattended.
- d. Every clinic that receives and stores medications must keep records of their acquisition and disposition (B&P Code 4081, 4105, 4180). A chain of custody chronologically documenting the receipt, dispense, administration, and/or disposal of all medications shall be maintained.
- e. Clinics must log the receipt of all client medications (CCR, Title 22 73361). Copies of the pharmacy's delivery log <u>may</u> serve as the medication receipt log provided it meets all of the requirements of a medication receipt log below. All records of received medications shall be retained for at least 3 years (CCR, Title 22 73361). All medication receipt logs must contain all of the following information:
  - i. Medication name,
  - ii. Strength and quantity,
  - iii. Name of the client,
  - iv. Date ordered (date medication request made to the pharmacy),
  - v. Date received, and
  - vi. Name of dispensing pharmacy.

- f. Client medication shall be stored separate from clinic stock and urgent supply.
- g. Client's own medications shall not be "shared" or utilized as floor stock medications under any circumstances. Client medications shall only be distributed to the specific client for whom it was prescribed and labeled.
- h. Drug room/storage area is secure, clean, and orderly. Drugs are stored in a manner that prevents crowding and/or confusion.
- i. Drugs will not be retained after the expiration date indicated on the label. No contaminated or deteriorated drugs are to be available for use.
- j. Drugs for external use will be stored separately from oral or injectable medications.
- k. Containers which are cracked, soiled, or without secure closure shall not be used.
- All multiple dose injectable medications should be marked with date of first puncture.
   The decanoate (haloperidol and fluphenazine) vials should expire 28 days after date of
   first puncture as per manufacturer's information, U.S. Pharmacopeia, and Association
   for Professionals in Infection Control and Epidemiology (APIC).
- m. Expired and clients' returned medications, are properly disposed of according to written policy.
- n. Test reagents, germicides, disinfectants, and other non-ingestible substances shall be stored separately from drugs.
- o. Drugs requiring refrigeration shall be stored in a refrigerator maintained between 2-8 degrees C (36-46 degrees F). (Temperature documentation (on each working day) using "Temperature Log for Refrigerator", Attachment Log #3.)
- p. No food shall be stored in the same refrigerator as medications.
- q. Drugs requiring room temperature shall be stored in a place maintained between 15-30 degrees C (59-86 degrees F). (Temperature documentation (on each working day) using "Temperature Log for Room", Attachment Log #4.)
- r. Controlled drugs will not be stocked at clinic sites.

### 4. DRUGS AND SHARPS DISPOSAL

a. General requirements: Every clinic that maintains a stock of drugs including urgent supply of meds must keep records of their acquisition and disposition (B&P Code 4081, 4105, 4180). All medications shall be disposed in accordance to applicable federal,

state, and local regulations for disposal of chemicals and potentially dangerous or hazardous substances.

- b. Medications for disposal may include:
  - i. Medications which are not taken with the client upon termination of services.
  - ii. Discontinued medications.
  - iii. Expired, contaminated, or deteriorated medications.
- c. Clients' medications may be disposed of at the clinic through pick up services by ACBH pharmacy staff.
  - i. No controlled medications will be accepted from clients for disposal.
  - ii. Non-controlled medications must be cataloged on the "Medication Disposal Log", Attachment Log #5 by appropriate staff prior to contacting ACBH pharmacy staff for disposal.
  - iii. Drugs will be destroyed in the presence of a pharmacist or registered nurse.
- d. Disposal of urgent supply of medications will be documented on the "Urgent Medication Log", Attachment Log #1 found in the ACBH Medication and Pharmacy User Guide.

### 5. DRUG SAMPLES

a. Medication samples are not allowed in clinics.

### 6. MEDICATION ADMINISTRATION

- a. Medications may only be administered by authorized personnel upon an order by a prescriber lawfully authorized to prescribe. ACBH personnel who are authorized to administer medications under their scope of practice are: physicians, pharmacists, physician assistants, nurse practitioners, registered nurses, licensed vocational nurses, and licensed psychiatric technicians.
- b. Authorized personnel administering a medication are responsible:
  - i. For knowing a drug's usual dosage range, indications, side effects, toxicity, stability, expiration date and the client's hypersensitivity or allergies.
  - ii. For ensuring that the fundamentals of med administration are followed: right client, right drug, right dose, right route, and right time.
- c. Prior to drug administration, establish the client's identity by using two distinct client identifiers (ex. asking the client to state their name and date of birth).
- d. For injectable medication administration:
  - i. Use universal and blood borne pathogen precautions.
  - ii. Use safety needles.
- e. Documentation by the person administering the medication shall be documented on the "Medication Administration Log", Attachment Log #6.

clinic medication rooms.
Signature:
Print Name and Title:
Print Name and Title:
Date:

I acknowledge that I have received, read and understand the policies and procedures regarding ACBH



**Urgent Medication Log** – To be retained for at least 3 years **Expiration Date Inspection/Administration Log #1** 

-08 " <del>-</del>		
<b>Clinic Name:</b>		

Medication Name & Strength	Manufacturer & Lot #	Expiration Date	Disposal Date	Restock Date	Date, Name, & DOB of Client Receiving Medication	Amount Client Received	Initials

ac bh

<b>Medication Receipt Log</b> – To be retained for at least 3 ye	ears
Log #2	

Clinic Name: \_\_\_\_\_

Client Name & DOB	Medication Name & Strength	Quantity	Date Ordered	<u>Date</u> <u>Received</u>	Issuing Pharmacy



**Temperature Log for Refrigerator** – To be retained for at least 3 years **Log #3** 

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**Room Temperature Log** – To be retained for at least 3 years **Log #4** 

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Staff Initials																															
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Danger!	Temr	eratı	ıres a	bove	86°F	are to	oo wa	rm! V	Write	any u	nacce	eptab	le ten	npera	ture	in the	boxe	s belo	ow an	d call	BHC	5 (51)	0-567	-810	5) imı	nedia	tely!				
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Write any																											<i>y</i> -				
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Medication Disposal Log – To be retained for at least 3 years

Log #5

Clinic Name:

Client Name & DOB	Medication Name & Strength	Rx#	Amount Destroyed	Date of Destruction
Name of Rph/RN:	N	ame of Witness:		
Signature of Rph/RN:			:	



Medication Administration Log – To be retained for at least 3 years Log #6
Clinic Name:

Date of Admin.	Client Name & DOB	MD Name/ Administered by	Med Name & Strength	Route & Location of Admin.	Frequency	Quantity	Indications & Usage	Exp. Date



### **Medication Storage Compliance Checklist**

Clinic	:			Date:								
RPh/	CPhT	<u> </u>		Clinic Superv	isor:							
Pleas	e che	eck if clinic meet	s all criteria. Please no	ote all except	tions un	der "NOTES".						
<u>Gene</u>	<u>ral</u>											
Yes	<u>No</u>											
		Area where me	dications are stored is cl	ean and orgar	nized.							
			d medication is limited to	•	ersonne	l, is identified in						
			osted or readily accessil									
		ivo sampies are	available for use in the	ciinic.								
<u>URG</u>	ENT	SUPPLY OF MI	EDICATIONS									
Yes	<u>No</u>											
		An Urgent Supp	ly of medication is availa	able at the clir	nic.							
		This Urgent Sup	ply only includes:									
			Drug Name	Dose	Form	<b>Expiration Date</b>						
			Diphenhydramine	50 mg/1 ml	inj							
			Epinephrine	1:1000	inj							
		The Clinic Direc	tor, a nurse or a physicia	n is responsib	le for th	is Urgent Supply.	•					
		The Urgent sup	ply is stored in a secure,	locked area.								
		•	to date with complete d		of all m	edication						
		acquisition, adn	ninistration, and disposi	tion.								
LADI	ZI INI	C AND CTODA	CE OF DRUCC									
		G AND STORA	GE OF DRUGS									
<u>Yes</u>	<u>No</u> □	All drugs are ker	ot in a secured area: lock	ed medication	n room l	ocked cabinet or dr	awer					
			d in an orderly manner a				, CI .					
	П	_	ce package is opened to	_			ended					
Ш		_										
			(e.g. single dose parenteral container, pill bottles, or blister packages).  Drugs for external use will be stored separately from oral or injectable medications.									

### LABELING AND STORAGE OF DRUGS cont. Yes No Test reagents, germicides, disinfectants, and other non-ingestible substances are stored П П separately and away from drugs. No expired, contaminated, deteriorated or recalled drugs are available for use. Containers which are cracked, soiled, or without secure closure are not available for use. Medication logs including acquisition, administration and disposition are up to date and completed appropriately. No controlled substances are stored in the clinic and available for use. Drugs are properly labeled according to federal and state laws and are legible: labels altered only by persons legally authorized to do so. <u>Yes</u> No N/A IM multi-dose parenteral vials are initialed and dated when first punctured П П П and with an expiration date that does not exceed 28 days post initial puncture or manufacturer's expiration, whichever comes first. Drugs requiring refrigeration shall be stored between 2-8°C (36-46°F). Daily temperature log completed. Drugs stored in a refrigerator shall not be stored with food. Drugs requiring room temperature shall be stored between 15-30°C (59-86°F). Daily temperature log completed. **DISPOSAL OF DRUGS** <u>Yes</u> No Pharmaceutical or Hazardous waste bins are accessible. П П The medication disposal log for expired, contaminated, deteriorated, discontinued, П П or clients' returned medication supply is completed appropriately. **NOTES:**

### Medi-Cal Rx Information & Other Helpful Links

Medi-Cal Rx is now live as of January 1, 2022. All administrative services related to Medi-Cal pharmacy benefits billed on pharmacy claims from the existing Medi-Cal Fee-for-Service (FFS) or Managed Care Plan (MCP) intermediaries (Alameda Alliance or Blue Cross Medi-Cal) have transitioned to Medi-Cal Rx.

Training, background, overview, the Medi-Cal Rx Pharmacy Transition Policy, and other information can be found on the <a href="Education & Outreach Page">Education & Outreach Page</a> (<a href="https://medi-calrx.dhcs.ca.gov/home/education/">https://medi-calrx.dhcs.ca.gov/home/education/</a>). Key <a href="alerts and bulletins">alerts and bulletins</a> (<a href="https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news/">https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news/</a>) are also available on the Medi-Cal Rx Web Portal. Sign up for the <a href="Medi-Cal Rx Subscription Service">Medi-Cal Rx Subscription Service</a> (<a href="https://mcrxsspages.dhcs.ca.gov/Medi-CalRxDHCScagov-Subscription-Sign-Up">https://mcrxsspages.dhcs.ca.gov/Medi-CalRxDHCScagov-Subscription-Sign-Up</a>) so you will be notified when something new is posted.

If you are a pharmacy provider or prescriber who has not registered, register now on the <a href="Medi-Cal Rx">Medi-Cal Rx</a> <a href="Provider Portal">Provider Portal</a> (<a href="https://medi-calrx.dhcs.ca.gov/provider/">https://medi-calrx.dhcs.ca.gov/provider/</a>). For assistance in registering, review the <a href="User Administration Console">User Administration Console</a> (UAC) Quick Start Guide (<a href="https://medi-calrx.dhcs.ca.gov/cms/medicalrx/static-assets/documents/education-and-outreach/2020.10">Medi-Cal Rx New Registration Quick Start Job Aid v1.1 10.21.2020.pdf</a>).

For pharmacy assistance, call the Medi-Cal Rx Customer Service Center at 1-800-977-2273, 24 hours a day, 7 days a week, 365 days per year.

### Other helpful links:

Medi-Cal Rx: Transitioning Medi-Cal Pharmacy Services from Managed Care to FFS FAQs: https://medi-calrx.dhcs.ca.gov/cms/medicalrx/static-assets/documents/faq/Medi-Cal Rx Transitioning Medi-Cal Pharmacy Services from Managed Care to FFS FAQs.pdf

Medi-Cal Rx: Provider Registration and Training FAQs: <a href="https://medi-calrx.dhcs.ca.gov/cms/medicalrx/static-assets/documents/provider/bulletins/2021.02">https://medi-calrx.dhcs.ca.gov/cms/medicalrx/static-assets/documents/provider/bulletins/2021.02</a> B Medi-Cal Rx Provider Registration and Training FAQs.pdf

### **Medi-Cal Rx Formulary:**

Medi-Cal Rx Online Search Formulary	https://medi-calrx.dhcs.ca.gov/provider/drug-lookup
Medi-Cal Rx CDL (Contract Drug List)	https://medi-calrx.dhcs.ca.gov/home/cdl

### Other Health Coverage (OHC) Reporting and Correction Procedures

Other Health Coverage (OHC) refers to private health insurance. Services may include medical, dental, vision, pharmacy, and/or Medicare supplemental plans (Part C & D).

DHCS currently receives OHC data from over 20 health insurance carriers, the Department of Child Support Services, the Social Security Administration, California Children's Services, and other automated systems. The data exchanges provide DHCS more complete, accurate, and timely OHC information, in a cost effective manner. Despite these data matches, counties are still responsible for gathering and reporting OHC additions, terminations, and changes (California Code of Regulations, Title 22, Section 50765).

	Adding or Removing OHC (Other Health Coverage) Code from MEDS:
Who can modify/make these changes?	The member, eligibility worker, health care provider, etc. can submit OHC modifications.
What is the website and phone number to make changes?	OHC Processing Center Website:  (http://www.dhcs.ca.gov/services/Pages/TPLRD OCU cont.aspx  Telephone Services Center: (800) 541-5555 If outside of California: (916) 636-1980
What information needs to be provided?	<ul> <li>To add or remove OHC information, a county must provide the beneficiary's client index number, name, and date of birth. In addition, DHCS requires the eligibility worker's name, telephone number, and email address in case there are questions regarding the request.</li> <li>For OHC additions, the OHC Processing Center needs the health insurance carrier name, the policy holder's name, and the policy number. If the beneficiary knows when coverage began, include the OHC policy start date. If no start date is entered, HIS (Health Insurance System) in MEDS automatically assumes coverage began on the day policy information is submitted.</li> <li>For OHC removals, the OHC Processing Center needs the health insurance carrier name, health insurance carrier code (if known), and a policy stop date. If no policy stop date is provided, DHCS will terminate a HIS record effective the last day of the previous month.</li> <li>To ensure Medi-Cal is the payer of last resort, counties must confirm that a Medi-Cal beneficiary's OHC has terminated prior to removing the OHC code by verifying: <ol> <li>A payroll or pension check stub showing deductions for private health insurance have ceased.</li> <li>An Explanation of Benefits from the insurance carrier showing the date the policy terminated.</li> <li>A termination letter from the insurance carrier and/or employer showing the date the policy terminated.</li> <li>A signed affidavit stating that the Medi-Cal beneficiary no longer has, or never had OHC. The affidavit should also include the date the policy terminated if known.</li> </ol> </li> <li>Please review OHC Processing Center forms for additional information.</li> </ul>
How quickly do modifications take change?	Once the request is submitted using the OHC Processing Center forms, please allow up to 72 business hours for your request to be processed.  In an event of an emergency, please see reference ACWDL No: 16-22 for instructions regarding Immediate Needs Transactions (Please note this process is handled by Medi-Cal Eligibility).

Please note: OHC Processing Center <u>cannot</u> modify a Managed Care plan. For county assistance regarding a Managed Care plan, please contact Health Care Options at (800) 430-4263. For Medicare assistance, please contact Social Security Administration at (800) 772-1213.

### Federal and State Rules for Ordering, Referring or Prescribing (ORP) Practitioners

The Center for Medicare and Medicaid (CMS) and the California Department of Health Care Services have initiated new enrollment guidelines for all ORP practitioners.

### Clients with Medicare benefits only:

ORP practitioners who treat Medicare clients must enroll in the Medicare program through Noridian in order for their orders (lab) or prescriptions to be filled. Per CMS "Any physician or other eligible professional who prescribes Part D drugs must either enroll in the Medicare program or opt out in order to prescribe drugs to their patients with Part D prescription drug benefit plans". Please use the Medicare CMS 8550 form for enrollment with Medicare.

### Clients with Medi-Cal benefits only:

Per the DHCS Information notice 17-027 dated June 19, 2017, practitioners who prescribe medication and/or order lab tests for Medi-Cal clients must be enrolled in the DHCS Provider Enrollment Division or already be enrolled with Medicare. Medi-Cal enrollment can be performed via the PAVE Portal at (<a href="https://pave.dhcs.ca.gov/sso/login.do">https://pave.dhcs.ca.gov/sso/login.do</a>) or by submitting DHCS form 6219 to:

Department of Health Care Services Provider Enrollment Division MS 4704 PO Box 997412 Sacramento, CA 95899-7412

### Clients with Medicare and Medi-Cal (Medi/Medi) benefits:

ORP practitioners who treat clients with both Medicare and Medi-Cal benefits must be enrolled in Medicare (when enrolled with Medicare you do not have to also enroll in Medi-Cal). Please use the Medicare CMS 8550 form for enrollment with Medicare.

As a courtesy to our medical vendors we are assisting our practitioners with this enrollment process.

County practitioners should contact the Provider Relations Management Analyst for assistance with their enrollment forms (1-800-878-1313).

CBO practitioners should work with their HR or Certification Representatives to ensure Medicare enrollment.

### **ACBH** websites:

http://www.acbhcs.org/

<u>Pharmacy Services – Alameda County Behavioral Health (acbhcs.org)</u>