

Medication Returns

Policy:

Pharmacy Alternatives™ has identified a system for safe and efficient medication returns following a set of common best practices criteria for safety and quality standards in pharmacy.

Practice:

1. **RETURNS DUE TO PHARMACY ERROR:** Any medication can be returned to the Pharmacy if the medication was sent in error to the consumer and the error was the fault of the Pharmacy. This is the **ONLY** instance in which a Controlled Medication can legally be returned to the Pharmacy.
 - a. **If due to Pharmacy error, a delivered medication must be returned to Pharmacy Alternatives within 7 days of receipt by the client/facility.**
 - b. Pharmacy error would include situations such as:
 - i. medication delivered to the consumer that had been previously discontinued and the pharmacy had been faxed an order stating this prior to the dispensing date
 - ii. medication delivered to the consumer that the consumer was never on
 - iii. medication that was not labeled correctly
 - iv. medication that was not in the correct form (full tabs sent instead of ½ tabs, pills sent instead of sprinkles, pills sent instead of liquid form, etc.)
 - v. duplicate medication was sent
2. The **Consumer Change of Status Notification** form should be faxed to the pharmacy EVERY TIME a consumer is transferred, discharged, passes away, or has a status change in their day programming or any other instance which would affect their medication administration, packaging, or delivery. Faxing this completed form before or immediately upon a status change will assist the pharmacy in providing more efficient and accurate medication delivery.
3. Medications **CAN NOT BE RETURNED** to the Pharmacy if any of the following conditions exist:
 - a. Medication has been used or opened
 - b. Medications with partial contents that are not in pill form such as drops, creams, lotions, or inhalers
 - c. Medications that come as a part of a multiple pack in which a part has been used or is missing such as Diastat rectal gel twin pack syringes for seizures
 - d. Medications that require refrigeration (we cannot verify the integrity of the medication once it is dispensed and delivered)
 - e. Medications that have been crushed, adulterated, disintegrated, or tampered with in any way
 - f. Medication labeling and/or packaging has been altered or defaced and the identity of the drug, its potency, lot number, or expiration date are not legible
 - g. The medication is expired or has an expiration date within 120 days
 - h. The medication is a compounded drug

4. Controlled Medications can not be returned to Pharmacy except as listed in #1 above. These must be disposed of according to federal and state laws in your area.
5. If a facility nurse/staff has a question about whether a medication can be returned to the pharmacy, he/she should call the Pharmacy prior to returning any medication to get clarification.
6. The pharmacy must receive written verification with all medications being returned including the reason for their return. Other additional information that is required includes: consumer name, Rx#, medication name, dosage, amount being returned, and the signature and contact number of the person returning the medication. A [Medication Return Log](#) has been provided with this policy. All medications being sent back to the pharmacy must be accompanied by a copy of this signed form. A copy should also be retained in the facility for documentation of all medication returns.
7. Once returned to the Pharmacy, the medication will be verified by a pharmacist for all identifying information and the determination of whether credit is due to the client will be decided.
8. If credit is due, the client will be credited any copay or other amount due.
9. Additionally, the payer source will be reimbursed the cost of the medication returned to the Pharmacy.
10. In accordance with HIPAA regulations, the medication label with the client's name will be removed and destroyed separately from any medication.
11. All medications that are not returned to the Pharmacy and are not being utilized by the client they are prescribed for should be destroyed according to federal, state, and local laws. See our policy on Medication Disposal for further information.
12. If a facility is disposing of excessive amounts of medication, it is the facility's responsibility to evaluate reasons for their increased pharmaceutical waste and to implement systems for decreasing their waste. The pharmacy can assist in providing suggestions for decreasing pharmaceutical waste through evaluation of ordering and usage procedures.
13. Each state is governed by federal, state, and local laws pertaining to pharmacy regulations and each facility should follow all laws and regulations pursuant to their specific state.