



*Printed copies are for reference only.
Please refer to the electronic copy of this policy for the latest version.*

Purpose:

To describe best practice for navigating prescriptions when patients are unable to present to the office for prescription refills due to residential treatment.

Policy Applies: *(check all that apply)*

- All Staff
- Administrative Staff
- Clinical Staff
- Providers
- Board of Directors
- Only applies to this or these sites: Bridge Clinic

Policy:

- **What is considered residential treatment?**
 - For the purposes of this policy residential treatment is consider an on-site treatment facility that the patient resides at and receives formal counseling and recovery services from a licensed provider. This may or may not include medication assisted treatment
- **What is not considered residential treatment?**
 - For the purposes of this policy residential treatment is not considered to be a residential facility where there is no counseling or recovery services or these services are administered by a non-licensed provider. An example of this is a sober living facility
- **Work Flow?**
 - Once the responsible provider is aware the patient is going to be residing at a residential treatment facility they are to determine if the patient is still able to present to the Bridge Clinic for their routine office visits
 - If the patient *is* able present to Bridge Clinic for their routine office visits the patient and provider will proceed as normal with *weekly* office visits. The patient will be transitioned to a long term treatment program for longer prescriptions and ongoing care as is appropriate per Bridge Clinic policy
 - If the patient is *not* able to present to Bridge Clinic for their routine office visit, the responsible provider will have the patient sign a coordination of care form to communicate with the residential treatment facility. If the patient is unwilling to sign a coordination of care form they will be informed they are no longer eligible to receive medication assisted treatment through the Bridge Clinic

- Once a patient signs a coordination of care form it is the responsible provider's responsibility to speak with the residential treatment facility to notify them that Bridge Clinic is able to provide a 7 day prescription once it is confirmed the patient has arrived at the treatment facility
- It is the responsibility of the patient or treatment facility to locate a provider in their area to continue prescriptions for that patient while they are unable to be seen in office at the Bridge Clinic
- Under extreme circumstances, if the treatment facility is unable to locate a prescriber in the first week of the patient arriving and the responsible provider is able to confirm this with *staff*, Bridge Clinic may provide a second 7 day prescription
- The responsible provider will communicate to the treatment facility that upon release the patient may represent to the Bridge Clinic for resumption of care
 - The patient may call and coordinate this ahead of time with the Bridge Clinic Coordinator *or* they may present back through walk-in care
- Once the responsible provider has confirmed that the patient has arrived at the treatment facility a pop-up will be placed in the patient's chart indicating that if the patient represents to walk-in care upon return to the Bangor area they will be eligible to resume services with the Bridge Clinic
- **Are there exceptions to this work flow?**
 - If the responsible provider feels there should be an exception to this policy, they will review the patient case with the director of addiction services and/or clinical lead and provide a rationale