

Commonwealth of Massachusetts Executive Office of Health and Human Services Division of Medical Assistance 600 Washington Street Boston, MA 02111 www.state.ma.us/dma

MassHealth Nursing Facility Bulletin 120 July 2001

- TO: Nursing Facilities Participating in MassHealth
- **FROM:** Wendy E. Warring, Commissioner
 - RE: Handling Schedule VI Medications in Nursing Facilities

Background	Medication waste is a significant problem for nursing facilities. The Division of Medical Assistance is collaborating with the Department of Public Health to help nursing facilities reduce medication waste.
Reference Chart	The accompanying chart reviews relevant Division of Medical Assistance and Department of Public Health policies and procedures nursing facilities should follow to ensure the appropriate handling of residents' Schedule VI medications.
Questions	If you have any questions about the information on this chart, contact the MassHealth Provider Relations Department at (617) 628-4141 or 1-800-325-5231or the DPH Division of Health Care Quality at (617) 753-8106. You may also access the DPH Web site at www.state.ma.us/dph.

Nursing Facility Responsibilities in Handling Schedule VI Medications

Resident admissions	The Massachusetts Department of Public Health (DPH) allows nursing facilities to administer medications that residents bring either from home or from another nursing facility with prescriber orders.
Amount of Medication to Be Ordered	Order only the amount of medication prescribed: for example, a quantity sufficient for 10 days or less for medications new to the resident, for medications that require monitoring (for example, psychotropic or cardiac medications), or for medications that require frequent dosage adjustments (for example, anticoagulants or antibiotics). Order prescribed maintenance medications in 30-to-60 day quantities.
Medical and Non- Medical Leaves of Absence	Hold medications for the duration of a resident's medical leave of absence (MLOA) up to 20 days. Hold medications for the duration of a resident's non-medical leave of absence (NMLOA) up to 15 days. When the resident returns from MLOA or NMLOA, follow the current Department of Public Health procedures for handling the medication.
Changes in Medication Labeling	Affix an auxiliary label to the medication to signify a change in the prescriber's order. The label must state, in effect, that the directions have changed; refer to the resident's medication record for proper dose. Request that the pharmacy provider affix a new label when there is a dosage change.
Resident Discharges	See DPH regulations at 105 CMR 150.008 (B)(4), (B)(13), and (G)(1). When the doctor's orders state the member is to be discharged with his or her medications, send the medications with the resident to another nursing facility or community setting.
Disposal of Schedule VI Medications	Dispose of Schedule VI medications when the resident expires, the prescriber discontinues the drug, or the medication reaches its expiration date.
Change of Pharmacy	The Division will not pay for new prescriptions solely because of a change in the pharmacy provider. Re-order medication only when the current supply is about to be exhausted.

Ē