

TITLE: Pharmacy Voucher Protocol		POLICY No. N/A
ADOPTED: 01/27/2015	REVISED: 09/04/2020, 03/10/2021	
DISTRIBUTION: Salina Family Healthcare Pharmacy Quality Department Faculty Physicians		
REVIEWED BY: Executive Team, Executive Director of Pharmacy Services		
APPROVED BY: Executive Team		

In support of the organization's stated mission to provide excellent healthcare, Salina Health Education Foundation (SHEF) offers a pharmacy voucher to eligible patients which is redeemable at the Salina Healthcare Center Pharmacy.

Pharmacy vouchers will be provided to patients based on their health condition and financial need. Pharmacy vouchers are not intended as a long-term solution for medication assistance. A patient may receive a voucher up to twice per calendar year. Voucher assistance may not be used to pay the copay for patients who have any prescription insurance coverage. An eligible patient's financial need is defined by the financial requirements set forth in the SHEF Discount Program. Regardless of whether or not a patient has health insurance, if a review of the patient's income meets any of the SHEF Discount Program's Levels B-E, they are eligible for the pharmacy voucher.

Patients interested in a pharmacy voucher must complete the Emergency Assistance Application and explore all other options for prescription financial assistance (e.g. MAP, Catholic Charities, etc.) prior to receiving a pharmacy voucher. *See* Emergency Assistance Policy.

When a patient requests a voucher for any other medication, the medication must be medically necessary and staff must receive prior approval from the Chief Medical Officer, the Chief Executive Officer, the Chief Operations Officer, the Chief Financial Officer, Chief Compliance Officer, the Program Director, or the Executive Director of Pharmacy Services. Unless a patient has cancer, vouchers are not given for narcotic medications. Emergency authorization may be given to discount program patients who seek to reestablish care if they have completed the financial screening process.

Vouchers may be issued to fill up to 30 days of the patient's prescription. However, patients who receive a voucher will be asked to pay a portion of the cost of the prescription, if possible. The cost of the prescription will be based on the amount the patient would be charged without the voucher. When the cost of the medication is more than \$30.00, pharmacy staff will conduct a medication review for alternative medications and document the outcome. Other than waiving or discounting prescription coverage co-pays, exceptions may be allowed on a case by case basis with prior approval from the Chief Medical Officer, the Chief Executive Officer, the Chief Operations Officer, the Chief Financial Officer, Chief Compliance Officer, or the Program Director. Prescriptions filled under this protocol will be written off as a charitable contribution.

When any of the above listed people are not immediately available, employees should attempt to contact the on-call Admin person at extension 441 or email. If the on-call Admin is unavailable, the pharmacist and the faculty supervisor/Saturday provider may approve the voucher.

SHEF has identified six types of medication that receive priority consideration for the pharmacy voucher, insulin therapy medications, inhaled beta-agonist, low molecular weight heparin, epinephrine auto-injector prefilled syringes, naloxone opioid overdose rescue medications, and antiviral medication for employee post-exposure prophylaxis (PEP). So long as all eligibility requirements are met, Salina Family Healthcare Pharmacy pharmacists may approve vouchers for the following medications:

1. Insulin therapy medications
2. Inhaled beta-agonist
3. Low molecular weight heparin
4. Epinephrine auto-injector prefilled syringes
5. Naloxone opioid overdose rescue medications
6. Antiviral medication for employee PEP

Salina Area United Way Vouchers

Salina Area United Way funds may be used for medication vouchers following the above criteria with the following exceptions:

1. Extend eligibility to allow for up to 3 vouchers in a calendar year
2. Allow vouchers to be used for insured patients 0-300% of federal poverty level.
3. Allow vouchers for uninsured/discount program patients who are 200-300% of federal poverty level.