NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES POLICY AND PROCEDURE

SUBJECT: CHANGES TO THE FORMULARY

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ORIGINAL DATE: 08/09/89

REVIEW/REVISE DATE: 08/08/90, 08/11/93, 06/06/96, 11/06/01, 10/07/04, 01/03/08,

10/21/10

APPROVAL: Rosalyne Reynolds {s}, Agency Director

I. PURPOSE

The purpose of this policy is to establish local procedures for the approval of any change to the approved formulary of Northern Nevada Adult Mental Health Services (NNAMHS).

II. POLICY

All medications utilized at NNAMHS will be listed in an approved formulary of medication hereafter referred to as the Formulary. This policy sets criteria for adding a medication to the Formulary. All additions or changes must be presented to Medical Staff Executive Committee and Pharmacy and Therapeutics (P & T) Committee for approval. These approvals shall appear in the minutes of the P & T Committee meetings and shall be forwarded to the Pharmacy Oversight Committee for review and approval.

III. REFERENCES

- 1. Pharmacy Policy and Procedure Manual
- NNAMHS Policy and Procedure Directive #NN-MM-11 entitled, "Non-Formulary Medications."
- 3. DMHDS Drug Formulary Guidelines

IV. PROCEDURE:

- Nothing herein shall be construed to prevent emergency medical care or treatment to a consumer if within a reasonable degree of medical certainty a delay would endanger the consumer's health. Refer to the procedures in policy #NN-MM-11.
- 2. Additions and or changes to the Formulary may be initiated in several ways.
 - Any item that has been repeatedly obtained through the non-formulary process will be reviewed by the P&T Committee for inclusion in the Formulary.
 - b. Changes in procurement due to circumstances beyond agency control (i.e., changes of formulation, changes of manufacturer) will be referred to the P&T Committee for alteration to the Formulary.
 - c. Any physician, nurse or pharmacist employed or utilized by an agency served by the pharmacy shall be eligible to request additions, deletions or other changes to the Formulary. These requests will be made to the pharmacy on a Formulary Addition Form if appropriate or in writing if other than a request for addition. The request will be forwarded to the P & T Committee for review. Any denied request may be reconsidered after a period of six months.
 - d. A record of all requests will be maintained in the pharmacy for 12 months along with the status of that request. This record will be available for inspection by any clinical staff.

3. After a medication is approved by the pharmacy oversight committee, the electronic formulary will be updated within 10 days of changes by the statewide pharmacy director. The electronic formulary is available on the MHDS website. The site is called Pharmacy OneSource. The agency Pharmacy Director is responsible for notifying appropriate agency staff of the change to the Formulary.