



Florida Center

for Headache & Neurology

Prescription Policy

Due to a marked increase in requests for prior authorization for prescriptions, requests for duplicate and unnecessary paperwork from mail-order pharmacies (PBM's)/other pharmacy plans and requests for prescription overrides. This office has instituted the following policy:

1. If **your** insurance plan requires a 90 day supply you must inform the doctor during your visit prior to him writing the prescription. If you need the prescription re-written you will be required to come in for a follow-up visit and will be responsible for all co-pays etc.
2. If **your** insurance denies a prescription that the doctor has written you have 2 options. Pay for the prescription yourself or come back in for follow-up to discuss alternative treatment options. At this follow-up you should have already contacted your insurance company and obtained a list of medications **they** would be willing to pay for.
3. **Under no circumstances** will the doctor call your insurance company to obtain overrides/prior authorization. First and foremost it is unethical as the purpose of these so called rules is to deny patient care. **The physician's prescription is his prior, present and future authorization.** If he or she wanted you to have an alternative medication they would have written it for you. This process is quite time consuming and is set up with the hope that the physicians office will give up. Furthermore, the person on the other line is at best a pharmacist, who never took a history, performed an exam and does not have the qualifications nor the training to make medical decisions that effect your treatment and your life. These conversations only lead to extreme frustration and confrontation.
4. **Medication samples are provided as a courtesy** as we realize that many of you have very high co-pays and would like to make sure the medication is going to work prior to using it. Whenever possible we will try to help you however we cannot provide you with medications on a regular basis and samples should not be expected.
5. As it has always been our policy if you wish to remain on a medication you must come in for regular follow up, otherwise no refills will be given. This is for you own safety as you may have been placed on a new medication or have developed

a new medical problem that may prohibit the use of the medication. In addition, our malpractice insurance carrier has mandated that we not write refills without a face to face visit and gives us a credit on our insurance for doing so.

6. **Pharmacy Benefits Managers (PBM's) or (Mail order Pharmacies):** These include Medco, Caremark etc. Dr. Conidi has ethical issues with the nature of their business and the way these organizations do business (see above). Therefore, this practice will not deal with them whatsoever. This includes responding to phone calls, faxes, etc. We are not the only practice that has adopted this policy and are hopeful that if all physicians stop playing their ridiculous game, the game will end.

Please understand that our present health care system is broken and in fact is an overall mess. Care is now being influence and sometimes dictated by bureaucrats. It is that your doctor who has your best interest in mind. YOUR INSURANCE COMPANY HAS PROFITS IN MIND. Their goal is to deny care whenever possible. The physician does not make any more money if you obtain or do not obtain the medication, THEY DO. Furthermore, you're health-insurance policy involves contract between yourself, and/or your employer and the insurance company. The doctor's job is to select the proper medication and treatment for your medical problem. Anything that happens with respect to paying for that medication and/or treatment after you leave this office is between yourself and the insurance company. Interestingly, the insurance company will always try to shift the blame to the physician when they deny care. Remember it is you or your employer who is paying for the insurance and have more leverage than you think and both parties are going to be required to take more responsibility with respect to patient care.