

Integral Care Policy: Use of Sedative, Hypnotics, Anxiolytics and Psychostimulants in Specific Integral Care Populations

- i. Integral Care prescribers shall avoid prescribing sedatives/hypnotics/anxiolytics (e.g., benzodiazepines or barbiturates) alongside opioids/opiates due to the potential risk of respiratory suppression as result of potentiation.
 - a. At a minimum, drug testing for Opioid (Narcotic) Pain Medications must be administered and results must be negative for all Opioid (Narcotic) Pain Medications at the time of initial prescription and subsequent refills of any Anxiolytic/Sedative/Hypnotic (with the exception of positive drug screens for any prescribed anxiolytic/sedative/hypnotic and its metabolites if the client is otherwise compliant with medications).
 - b. The prescription and use of Opioid (Narcotic) Pain Medications by Prescribers is limited to use of Suboxone and methadone for purposes of Opioid Agonist Therapy (OAT) in clients who meet the current Diagnostic & Statistical Manual (DSM) requirement(s) for opioid use disorder and/or withdrawal.
- ii. Prescribers may prescribe FDA-approved Central Nervous System Stimulants only for FDA-approved indications of ADHD and narcolepsy. Doses shall not exceed FDA-approved dosing levels.
 - a. Use of FDA-approved Central Nervous System Stimulants in individuals 18 years of age and older is limited to individuals with proof of an ADHD diagnosis in childhood that meets DSM requirements, however, Prescribers may prescribe modafinil (Provigil) for FDA-approved use in Narcolepsy, Obstructive Sleep Apnea (OSA), and shift work sleep disorder in persons age 18 and older.
 - b. At a minimum, drug testing must be administered and results must be negative for all tested substances at the time of initial prescription and subsequent refills of FDA-approved Central Nervous System Stimulants (with the exception of positive drug screens for prescribed medications and their metabolites if the client is otherwise compliant with the medications).
- iii. Integral Care’s drug formulary will remain consistent with the then-current Texas Health and Human Services Commission (“HHSC”) Drug Formulary with respect to medications that are medically appropriate and considered standard of care for treatment of psychiatric diagnoses as determined by the current DSM. The HHSC Drug Formulary (including updates) in effect at the time medication is prescribed shall be used for all medically appropriate medications and medication-related services that are funded by HHSC.

The Chief Medical Officer’s approval must be obtained prior to a Prescriber making an exception to the requirements of this procedure. An Integral Care **Request for Medication Exception Justification Form** must be completed and submitted to the Chief Medical Officer (or designee) either by the client or the Prescriber in order to request an exception to the requirements of this procedure. Integral Care personnel shall encourage clients to consult with their Prescribers prior to requesting an exception to the requirements of this Procedure. A decision regarding a requested exception to this procedure shall be made and entered into the client’s Integral Care electronic medical record no later than five (5) working days (which do not include weekends and Integral Care designated holidays) after receipt of a completed **Request for Medication Exception Justification Form**, except in emergency situations, when the decision shall be made/entered no later than three (3) working days after receipt. A client may appeal the decision in accordance with Integral Care Operating Procedure 09.14 “Notification and Appeal Procedure”.