



HEALTH AFFAIRS

THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, D. C. 20301-1200

8 DEC 1999

MEMORANDUM FOR SURGEON GENERAL OF THE ARMY  
SURGEON GENERAL OF THE NAVY  
SURGEON GENERAL OF THE AIR FORCE

SUBJECT: Policy for Dispensing Prescriptions in Outpatient Military Pharmacies

This policy memorandum supercedes Health Affairs Policy #9700042 dated April 4, 1997. Specifically, it addresses current operational policy regarding drug availability in Military Treatment Facilities (MTFs) and restates procedures for obtaining non-formulary medications for patients treated at MTFs.

The Basic Core Formulary (BCF) is the nucleus for all MTF formularies. BCF policy is established by Health Affairs Policy #98-034, April 27, 1998, which remains in effect. The BCF is managed and updated by the DoD Pharmacy and Therapeutics Committee. The BCF is not a "closed formulary." Rather, it is the list of core formulary agents that must be uniformly available as the primary formulary selection at all MTFs, to all eligible beneficiaries. Selection of agents for inclusion on the BCF is based on Pharmacoeconomic Center analyses identifying the most clinically appropriate and cost-effective medications that meet the primary care needs of the majority of eligible beneficiaries. Items on the BCF are first line formulary agents. MTFs may add additional, second line drugs based on the scope of care provided by the MTF to meet the needs of their beneficiaries. The long-term goal is the development of a DoD Uniform Formulary based on the BCF concept.

MTF pharmacies will fill all prescriptions for formulary drugs, independent of beneficiary category. Therefore, restrictions on BCF drugs are permitted only for valid clinical reasons or protocols published by the DoD Pharmacy and Therapeutics Committee. Restrictions on non-BCF drugs are permitted only for valid clinical reasons or protocols approved by the local Pharmacy and Therapeutics Committee. Restrictions may not be imposed on any formulary drug as a cost reduction strategy.

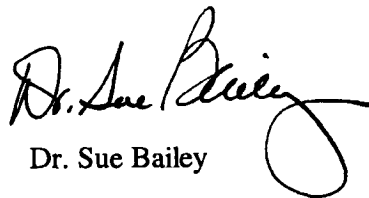
In those cases when an MTF provider believes a non-formulary drug is necessary and appropriate to treat a specific patient or follow a treatment protocol, the provider must submit a non-formulary request. If a medical necessity is validated for such a non-formulary request, the MTF must provide the medication through the MTF pharmacy. Patients who are being followed by an MTF provider will not be referred to commercial (mail or retail) pharmacies for prescriptions written by MTF providers. For example, Viagra, by policy, is a non-formulary drug. If an MTF physician follows the clinical guidelines published for Viagra and determines a

patient needs Viagra, the MTF must provide and dispense the drug from the MTF pharmacy. If an MTF chooses to offer a specialty clinic, it is expected the MTF will provide the associated drugs and services.

Beneficiaries may choose to use non-MTF pharmacies for convenience. The MTF is responsible to inform its beneficiaries of the most cost-effective points of pharmacy service outside the MTFs that are the least costly to beneficiaries and to the Government. The National Mail Order Pharmacy (NMOP) Program is the least costly (outside the MTF) for the beneficiary and the Government. The retail network pharmacies are the next most cost-effective and convenient for prescriptions needed to treat acute conditions. The most costly points of service, both to beneficiaries and the Government, are standard (non-network) pharmacies.

Responsibility for implementation of this policy lies with MTF Commanders. They must ensure adequate resources (funds and staff) are directed to pharmacy operations to support the BCF, local formulary decisions, MTF specialty clinics, and validated non-formulary medications for patients seen at the facility. In order to maintain integrity of the special-order review process, MTF Commanders are also responsible for ensuring evidence-based justifications support non-formulary requests and for monitoring non-formulary request trends. The MTF local Pharmacy and Therapeutics Committee is responsible for developing, implementing, monitoring, and enforcing formulary management decisions.

Request the Surgeons add this as a compliance item on their respective Inspector General Checklists.

  
Dr. Sue Bailey