



Prescription Medication Policy

1. If a patient has questions, concerns, or adverse effects from a medication, it is the patient's responsibility to notify our office. If you reach our voicemail, a message should be left including the patient's name, date of birth, and the question or concern that the patient is having. Our staff will then return your call as soon as possible. If a patient is having an emergency, the patient is advised to call 911 or visit the nearest emergency room.
2. Kramer Psychiatric Services is under no obligation to continue prescription medications if the patient does not follow the recommended treatment plan and/or adjusts medications on their own at any time without consulting with Kramer Psychiatric Services. Prescription medications should not be shared with anyone. Patients should not take the prescription medication of anyone else.
3. While we will make every effort to work with a patient's insurance formulary/preferred medication list, patients with insurance are solely responsible for knowing which medications may or may not be covered by their insurance plan.
4. The patient acknowledges that the availability of appointments is limited and the patient is solely responsible for scheduling follow-up appointments in a timely manner to ensure he/she will have enough medication to last until their next scheduled appointment ("timely manner" is defined as no longer than 24 business hours after being seen by their provider for an appointment). It is preferred to schedule the follow-up at the conclusion of the current appointment.
5. The patient should use the patient portal for refill or prior authorization (PA) requests. Patients are responsible for knowing the medication name, dose, and directions of their medication.
6. The patient is not to rely on the pharmacy to submit refill requests or PA requests. Pharmacy refill requests will be denied unless we first hear from the patient that a refill is being requested. After an official request is made, please allow 3 business days for staff to authorize the refill or initiate a PA.
7. A refill request by a patient does not guarantee that the medication will be approved for a refill.
8. Patient refill requests will be denied unless a patient already has an appointment scheduled with Dr. Kramer.
9. ***Kramer Psychiatric Services prefers not to prescribe controlled substances.*** If obtaining a prescription for a controlled substance is your main reason for seeking mental health services with us or a controlled substance "is the only thing that works" for you, we advise that you seek services from another provider.

***** By signing below, you acknowledge that you have read, understood, and agreed with the above policies and information. *****

Patient Name: _____ Date of Birth: _____

Signature: _____ Date: _____