

# Substance Use Navigator (SUN) and Prescriptions



## SUNS AND PRESCRIPTIONS

### *Can a SUN call in a new prescription?*

**No.**<sup>1</sup> A SUN, after proper training, can be considered a medical assistant. The **California Board of Pharmacy laws state**<sup>2</sup> that “pursuant to an authorization of the prescriber, any agent of the prescriber on behalf of the prescriber may orally or electronically transmit a prescription for a controlled substance classified in Schedule III, IV, or V...”; however, according to the Medical Board of California, medical assistants may NOT call in new prescriptions or any prescription that has changed. If a change is made to a prescription, the prescription is considered a new prescription. This includes changes to dosage form, dose, route, frequency, and number of days’ supply. However, **a SUN may fax any written prescription**<sup>1</sup> signed by a provider into a pharmacy for a provider. It is **the responsibility of the provider**<sup>2</sup> to ensure proper prescribing of controlled substances occurs, which includes who is permitted by law to transmit prescriptions to a pharmacy as the provider’s agent.

### *Can a SUN call in a maintenance script (i.e. a refill)?*

**Yes,**<sup>3</sup> as long as **the refill**<sup>1</sup> does not exceed 5 refills of the original prescription nor extend beyond six months from the date of the original prescription. **The refill must be documented in the patient’s chart**<sup>3</sup> as a standing order and is patient specific. In most cases, refills should be prescribed by outpatient clinics.

### *What is the pathway to calling in a maintenance script?*

A SUN can **qualify**<sup>4</sup> to be someone that can call in a maintenance script if they are **trained by the physician and acts as their assistant.**<sup>5</sup> A medical assistant that does NOT train other medical assistants does NOT require a license.<sup>5</sup> Medical assistants are not licensed, registered or certified by the State of California.<sup>3</sup>

### *Can medical assistants call in refills to a pharmacy?*

Prescriptions are only called in within the restrictions of a clear procedure. Under the direct supervision of the physician, **a medical assistant may call in routine refills that are exact and have no changes in the dosage levels, form, route, frequency, and number of days supply.**<sup>3</sup> However, the medical assistant or staff person **can NOT call in new prescriptions or change prescriptions.**<sup>4</sup>

A SUN can call in a maintenance script (i.e. refill) as long as the refill does not exceed 5 refills of the original prescription nor extend beyond six months from the date of the original prescription. The refill must be documented in the patient’s chart as a standing order and is patient specific.

## EXAMPLE SCENARIO

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### Scenarios

**Example case:** Dr. B has been directly training a SUN for several months and has a DEA-X number. She sees a patient in the emergency department and provides a buprenorphine/naloxone script for 3 days until the patient is scheduled for a follow up appointment. The patient calls the SUN the day of the follow up appointment and states that he cannot attend the appointment because his young daughter is sick and he has no childcare alternative, but that next week he will be able to attend in person. He requests an additional 4 day prescription.

- Dr. B is on shift in the ER.
- The SUN calls Dr. B and explains the scenario. Dr. B checks CURES and it is consistent with patient report. Technically, a change in the original prescription from a 3 day supply to a 4 day supply makes the prescription a new prescription.
- Dr. B tells the SUN to call in a refill for 3 days only and asks the SUN to inform the patient that he will be re-evaluated at his follow up appointment. Alternatively, Dr. B may write a new prescription with a total buprenorphine/naloxone supply for 4 days, sign the prescription, and have the SUN fax the new prescription to the patient's home pharmacy.
- The SUN calls the pharmacy and gives a verbal order per Dr. B's instruction to refill the prescription (or alternatively, faxes the new prescription into the pharmacy).
- Dr. B notes this in the medical chart.

**Alternative to case:** Dr. B writes in the ED chart at the first visit: "OK to refill buprenorphine/naloxone at the current dose and quantity one time if logistical barriers arise preventing attendance to follow up visit with the bridge clinic." As above, the patient calls the SUN and requests an additional 4 day prescription:

- Dr. B is on shift in the ER.
- The SUN reads the above documented note.
- The SUN calls the pharmacy and gives a verbal order per Dr. B's instruction for a refill for a 3 day supply only.
- The SUN calls the patient to inform him that only a 3 day supply may be filled until the SUN can contact the doctor to have the doctor call in a new prescription.
- The SUN notes the refill in the medical chart and contacts Dr. B for next steps.

**Note:** In the alternative to this case, it is preferable that the SUN attempt to contact the provider before calling in the refill if possible in order to confirm that a 3 day supply is appropriate or to see if Dr. B would prefer to call in a new prescription herself or have the SUN fax a new prescription manually signed by Dr. B to the patient's pharmacy with a quantity of 4 day supply. This will prevent the patient from having to pay a second co-pay for an additional 1 day supply should Dr. B decide a new script for 4 days is more appropriate after the refill for 3 days is called in and picked up by the patient.

### Explanation

**The pathway to calling in a maintenance script:** California law<sup>4</sup> authorizes medical assistants to "perform basic administrative, clerical, and technical supportive services." The Medical Board of California interprets this law to allow a medical assistant – under the direct supervision of a physician – to call, email, or fax in routine medication refills that are "exact and have no changes in dosage level."

1. If a SUN is trained by the physician and acts as their assistant,<sup>5</sup> they can qualify under the above regulation. "Prior to performing technical supportive services, a medical assistant shall receive training, as necessary, in the

judgment of the supervising physician, podiatrist or instructor to assure the medical assistant's competence in performing that service at the appropriate standard of care. Such training shall be administered in the following settings: **“under a licensed physician or podiatrist, or under a registered nurse, licensed vocational nurse, a physician assistant or a qualified medical assistant...”**

Additional details:

- a. A medical assistant that **does NOT train other medical assistants** does NOT require a license.<sup>5</sup>
  - b. Medical assistants are not licensed, certified, nor registered by the state of California to perform procedures within their **“scope of practice”**.<sup>3</sup>
2. Prescriptions are only called in within the restrictions of a clear procedure. Under the direct supervision of the physician, **a medical assistant may call in routine refills that are exact and have no changes in the dosage levels**.<sup>3</sup> However, the medical assistant or staff person **can NOT call in new prescriptions or change prescriptions**.<sup>4</sup>

To be compliant with California law and to ensure patient safety:

- The supervising physician should provide a procedure to be followed by a medical assistant in transmitting a prescription refill to a pharmacy.
- The medical assistant must be trained and demonstrate competence in performing the task of transmitting prescription refills to a pharmacy.
- The supervising physician must authorize the medical assistant to transmit a prescription refill to a pharmacy by writing a patient-specific order or with a standing order in the patient’s medical record.
- The medical assistant must document the medication refill in the patient’s medical record, including the medical assistant’s name or initials, the date and time, a description of the task performed, and the name of the physician authorizing the refill.

## REFERENCES

1. U.S. Department of Justice, 21 CFR § 1306 (2010).
2. California State Board of Pharmacy. (2019). *California Pharmacy Lawbook*. Retrieved from [https://www.pharmacy.ca.gov/laws\\_regs/lawbook.pdf](https://www.pharmacy.ca.gov/laws_regs/lawbook.pdf)
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4. McLain, A. (2018, December 10). May medical assistants call in new prescriptions or refills to a pharmacy? Retrieved from <https://www.caphysicians.com/articles/may-medical-assistants-call-new-prescriptions-or-refills-pharmacy>
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