## TREASURE VALLEY ENDOCRINOLOGY P.C. 900 N. LIBERTY, SUITE 201 BOISE IDAHO 83704 PHONE (208) 506-7111, FAX (208) 506-7112

## **Prescription Refill Policy**

You, the patient, are responsible for knowing when medications will need renewal or refilling. Many prescriptions now require prior authorization meaning extra time and paperwork between the office, the pharmacy and your insurance company.

Prescription refills and authorizations are approved between 8:00 am- 3:00 pm Monday - Thursday, and 8:00 am - 12pm on Fridays. No routine prescriptions will be filled on Friday afternoons, weekends or holidays. You are obliged to have been seen in the office by your provider within 12 months of any prescription refill request. You are asked to adhere to guidelines for lab monitoring as requested by your provider.

All requests must be sent to us from your pharmacy. The procedure is as follows:

- 1. Call your pharmacy with your refill request.
- 2. Pharmacy will send electronic or faxed request to our office for provider approval.
- 3. Allow 4 business days for ROUTINE refills. Allow <u>two weeks</u> for medications or supplies needing <u>prior authorization</u>. Please plan ahead in order to be assured that you will not have a lapse in your prescriptions.

I HAVE READ AND UNDERSTAND THIS REFILL POLICY:
PRINTED NAME:
SIGNATURE: