

For Informational Purposes:

RE: Medication Exception Request Procedure

A Medication Exception Request allows a SC RPP participant to request to take a prescribed medication that is otherwise not permitted by the Abstinence Policy Statement, which you signed when you began monitoring with SC RPP. Depending on your licensing Board's preference, you may be eligible to participate in a Medication Exception Request. Your Recovery Specialist can provide more information about your licensing Board's preference. Please note that this is a request and can be approved or denied. You are welcome and encouraged to share this letter with your physician or healthcare provider to facilitate this process.

Prescribed medications in this category include, but are not limited to: stimulant medications, opioid medications, medications for Opioid Use Disorder, sedative-hypnotics, certain muscle relaxants, and benzodiazepines. In general, this process does not apply to over-the-counter medications and herbal supplements.

To submit the Medication Exception Request, the following information is needed:

- 1) The name of the medication, the dose, the frequency of administration, the route of administration, the indication for the medication, and the prescriber's name, credential, and discipline and how long you have been a patient of the prescriber. (For example: Adderall ER 20 mg daily for ADHD prescribed by John Smith, MD, psychiatrist.)
- 2) A letter from you to RPP that includes:
 - a) the medical condition or diagnosis for which the medication is prescribed;
 - b) the prescriber's name, credential, and discipline who initially diagnosed you with this condition and who you have seen for treatment since that time. Please include any pertinent testing that you have completed related to this diagnosis or condition (i.e. sleep study, neuropsychological testing, etc.);
 - c) how the condition or diagnosis impacts your personal and professional life;
 - d) medication, therapy, and other treatment modalities received since the diagnosis was made; and
 - e) a request for permission to practice while continuing to take the medication, to include the duration of permission requested.
- 3) A copy of your patient record from the responsible healthcare provider.

The patient record must detail the basis for a diagnosis, the dose of medication prescribed, and what efforts have been made to try an alternative therapy or medication not prohibited by the policy on abstinence, along with its effectiveness. You should request the records that will reflect the breadth of your treatment for this condition. (I.e. If you sought treatment with a new physician or provider two years ago that continued a previously prescribed medication without a description of the condition and associated symptoms, that would be considered insufficient records.) The participant must sign a consent for release of their medical records with the prescribing physician or healthcare provider. The patient record must detail the basis for a diagnosis (ie: if a psychiatric condition, criteria from the Diagnostic and Statistical Manual, 5th edition (DSM 5), should be utilized.)

4) Previous records that support the diagnosis and request for exception.

You may provide your patient record from previous physicians or healthcare providers that detail the diagnosis, any information to support the diagnosis (i.e. to include neuropsychological testing that assessed for Attention Deficit Disorder, sleep study, specialty consultation, etc), medications prescribed, and their effectiveness, etc.

5) A letter from your prescribing physician or provider directed to SC RPP Medical Director that includes:

- a) confirmation that the physician or provider is aware of your participation in RPP, setting forth the medical condition or diagnosis, to include the nature, extent, and severity of how the diagnosis impacts the participant's personal and professional life, and detailing the efforts to find an acceptable alternative treatment or medication;
- b) opining to a reasonable degree of medical certainty that a specific medication is medically necessary;
- c) attesting to a reasonable degree of medical certainty that the participant is safe to practice while taking the prescribed substance or medication, and;
- d) documenting the duration of anticipated use.

It is to your advantage for the responsible physician or healthcare provider to indicate a willingness to communicate verbally with the RPP Medical Director.

I appreciate that compilation of these records and letters requires effort and time. This process helps us to maintain the integrity of our monitoring program and the preference of your particular licensing Board, while advocating for our participants, when appropriate, for use of medications to treat medical or mental health conditions.

Sincerely,



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