Prescription Medication Refill Procedure

House of Hope Minnesota’s pharmacy of choice:
Thrifty White Pharmacy.
321 West Main Street
Marshall, MN 56258
507 532 5754

Intake Procedure:
• Within seven days prior to your daughter’s intake date please contact Thrifty White Pharmacy to transfer your daughter’s current medication order. This will ensure that your daughter does not have a lapse in medication during her transition.
• Proper medication distribution is important to your child’s well-being, especially during her transition into our program. This pharmacy transfer must be done prior to intake regardless of her current supply.
• If your child is on a controlled substance medication that requires a hard copy to be mailed out for each refill, and your doctor is not local, please advise of her med refill date for said medication at intake.
• Please indicate to the pharmacist that your daughter is a resident at House of Hope Minnesota.

Medication Payment:
• All families are required set up a charge account with Thrifty White for medication payments. This will include the pharmacy holding a credit card number on your account to charge when scripts are picked up.
• Even if your insurance plan covers prescriptions fully, please have a card on file in the event of a change in your coverage, or another non-script need.
• House of Hope Minnesota will not pay for medications on a reimbursement plan. If an account is not set up, your child may have lapse in medication distribution.
• At time of med pickup, staff (generally Program Coordinator) will sign for the med and receive the medication. Please notify Program Coordinator if you would like text message confirmation before charging meds to your account, or if you would like us to keep receipts for your records.

Other:
• If your daughter is not currently on any prescriptions, we still suggest that you set up this account in the event she needs medication during her stay at House of Hope Minnesota.
• If your coverage (ie SDMA) is only accepted at certain pharmacies please notify staff and we will set up an account at Hy Vee Pharmacy (900 East Main Street Marshall, Minnesota 56258; 507 532 2556).
• Please direct any questions regarding med refill procedure to Program Coordinator Melissa Bruns.

I have received and understand House of Hope Minnesota’s policy on prescription medication refill procedure.

Parent/Guardian ___________________________ Date ___________________________

I contacted Thrifty and set up the transfer and charge account on (date) ___________________ (initial) ________

Notes/Special Circumstances: __________________________________________________________
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