

Message

**From:** RetailHubMail [RetailHubMail@walgreens.com]  
**Sent:** 11/20/2019 7:39:42 AM  
**To:** Select.DMs [Select.DMs@walgreens.com]; Select.HCS [Select.HCS@walgreens.com]  
**CC:** Select.DPR [Select.DPR@walgreens.com]; Select.RHD [Select.RHD@walgreens.com]  
**Subject:** Inform: Walgreens Electronic Good Faith Dispensing (GFD) Pilot- Pharmacy  
**Attachments:** eGFD Pilot Store List RHM.xlsx; eGFD FAQs v9.docx; eGFD Job Aid v9.docx

Select Field Leaders,

In order to make things better, simpler, faster for our pharmacy team members, the GFD paper checklist is now an electric process within IC+. This will provide all pharmacy team members visibility into a patient's full GFD history.

All pharmacy team members will be required to complete the Good Faith Dispensing requirements electronically in IC+. The Good Faith Dispensing Review Worksheet in IC+ will replace the manual paper GFD Checklist that is currently completed for all target drugs. The Good Faith Dispensing Review Worksheet will be used to identify and document red flags and pharmacist corresponding responsibility documentations in a standardized process and format that must be completed for all Target Drugs and any other prescription drugs that you deem necessary prior to dispensing.

**What you need to know:**

- A store in your region, area, or district was selected for the GFD pilot, which will begin on 12/09/2019 and run through the new year.
- A new, electronic Good Faith Dispensing Review Worksheet in Intercom Plus will replace the paper TD-GFD Checklist
  - Used to identify and document resolution for Red Flags, Corresponding Responsibility Documentation (CRD) and pharmacists' clinical notes
- IC+ will now systematically auto trigger a GFD Review Worksheet for all Target Drug prescriptions during Data Entry for all technicians and Product Review for all pharmacists during the GFD 2.0 Pilot.
- The use of the paper GFD Checklist is no longer necessary.
- Pharmacy team members must follow the GFD training documents posted on StoreNet
  - *StoreNet> Rx Ops> Rx Integrity> Good Faith Dispensing*
- All pharmacy team members must provide feedback via the Team Member Feedback Application.
- Attached is the store pilot deployment list, the GFD Job aid, and FAQs

**Why this is important:**

- Provides enhanced ability for pharmacists to document their Good Faith Dispensing Review.
- Thorough GFD evaluation and detailed documentation ensures patient safety and protects Walgreens and our pharmacists.
- This new process will allow for GFD chain wide reporting and monitoring at the Corporate Support Center and more efficient reporting to federal and state entities including the DEA.
- There will now be increased transparency for our pharmacy team members into a full patient profile that includes all GFD documentation.

**How you can support:**

<b>Next steps:</b>	<b>HCS</b>	<b>DM</b>	<b>Due by</b>
Ensure all Pilot Stores have reviewed all training documents	R, A	R, A	12/08/2019
Encourage Pilot Store to provide feedback via the Team Member Feedback Application	R, A	R, A	
Provide your feedback via the Team Member Feedback Application	R, A	R, A	

**Questions or feedback:**

If you have any questions or feedback, please use the following [Team Member Feedback Application](#) path: *Pharmacy > Compliance / RxIntegrity/ Good Faith Dispensing*



Thank you.

**Produced In Native Format**

## Electronic Good Faith Dispensing (GFD) FAQs

### GFD Overview FAQs

**1. What is *Good Faith Dispensing (GFD)* and how does it relate to corresponding responsibility?**

Corresponding responsibility is the legal obligation that pharmacists must ensure the proper prescribing and dispensing of controlled substance medications. *Good Faith Dispensing* is the name of the *Walgreens* process for evaluating prescriptions and documenting information to meet the corresponding responsibility requirements.

**2. Why is Walgreens changing the *GFD Review* process?**

The *GFD Review* process has changed from paper-based to an electronic process within *IC+*. This new process will allow team members to see a patient's full *GFD* history, displaying worksheets for previously dispensed prescriptions **and** refusals within the *GFD Info* tab. This includes pharmacist notes, red flags identified and corresponding responsibility documentation.

**3. What is corresponding responsibility documentation (CRD)?**

This enhancement allows pharmacist to document additional relevant information pertaining to why the dispensed therapy is appropriate in addition to documenting red flags.

**4. Why is documenting Red Flags and CRD Important?**

Thorough and appropriate documentation of this information on the *Good Faith Dispensing Review Worksheet* ensures that the legal corresponding responsibility requirements are met.

**5. Who in the pharmacy is responsible for *Good Faith Dispensing*? Who is responsible for the *GFD Review Worksheet*?**

Everyone in the pharmacy has a role in ensuring that the elements of *Good Faith Dispensing* are met. While all pharmacists and technicians have an obligation to assist with validation of *Good Faith Dispensing* requirements during the dispensing process, the pharmacist that accepts or refuses the *GFD Review Worksheet* is ultimately responsible for ensuring that the elements of *Good Faith* have been met.

**6. Do I still need to use the paper *TD-GFD Checklist*?**

No. All *GFD* documentation must now be completed and documented within *IC+*. You must use the paper *TD-GFD Checklist* only if the system is down and you cannot access the electronic *GFD Worksheet*.

**7. At what step(s) in the prescription fulfillment process will *GFD* review occur?**

During *Product Review*, the pharmacist is validating that the medication is correct **and** that all red flags have been identified, the resolution of those red flags has been documented and that all clinically relevant CRD information is entered on the worksheet appropriately.

**8. When will a *GFD Review Worksheet* be required to be completed?**

A *GFD Review Worksheet* is required for tablets and capsules of single entity methadone, oxycodone, and hydromorphone, which are currently the *Target Drugs*.

**9. Can I complete a GFD Review on a drug that does not require a GFD Review Worksheet in IC+?**

While a GFD Review Worksheet may not be required for other drugs, it can be accessed and completed on any prescription. To do so, locate the prescription in the *Work Queue* and open the *Options* menu to select *GFD Review Worksheet* once the prescription is in Entered status.

**10. What is our policy on dispensing emergency prescriptions for opioids?**

Follow the emergency CII policy and laws and regulations in your state. All controlled substance prescriptions need to go through the *GFD* process.

**11. Do I need to notify the DEA of a refused prescription?**

No, this is optional. If in your professional judgement, you determine to notify the DEA of a refused prescription do so via the DEA website below.

<https://apps2.dea.diversion.usdoj.gov/rxaor/spring/main?execution=e1s1>

**12. Is a pharmacist required to speak directly to the prescriber to verify the prescription and ask questions or can they speak to any staff member?**

The pharmacist can speak to the prescriber or any clinical staff member. The pharmacist must feel that their questions have been sufficiently answered and must use their professional judgment in filling GFD prescription. If the pharmacist does not feel that questions were answered by a clinical staff member, pharmacist should speak to the prescriber. The pharmacist must document the name of the person that they spoke to and the items clarified on hard copy prescription prior to scanning, annotate the prescription, or document on the *GFD Review Worksheet*.

**13. What do I do if a prescription appears to be altered or forged?**

You must contact the prescriber to validate the prescription. Do not return the prescription to the patient if you suspect or confirm that the prescription is fraudulent. Do not fill a fraudulent prescription under any circumstances. Dispensing a prescription that the pharmacist knows is fraudulent is a violation of state and federal law.

**14. What if the DEA or local law enforcement wants the pharmacy to fill a fraudulent prescription as part of a DEA investigation or sting on a prescriber?**

Do not fill a fraudulent prescription. Inform your District Manager and Asset Protection Manager before assisting the DEA or local law enforcement with any investigations.

**15. What do I do if a DEA investigator or board of pharmacy inspector requests GFD information for a prescription?**

Follow all notification procedures should your store receive a visit from any of these entities. If prescription GFD information is requested, submit the request (with the subpoena or written request from agency) to the Rx Integrity team via [DEARecordsRequest@walgreens.com](mailto:DEARecordsRequest@walgreens.com)

StoreNet> Policy & Procedure> Compliance Reports> Regulatory Contact and Inspections Process

- 16. What should I do when a patient calls to check the stock status of a controlled substance?**  
When answering a call for controlled substances, verify that the patient is in IC+ and ask the patient for the exact quantity needed. Do not disclose the quantity you have on hand to the patient, but only whether you do or do not have enough to fill their prescription.
- 17. What should I do when a patient calls to check the status of a controlled substance and they are not found in IC+?**  
Do not provide inaccurate information. Instead, inform the patient that since there is not an established relationship, you are unable to provide stock information over the phone.
- 18. Why have select controlled substances been removed from the inventory on hand tool?**  
These drugs have been removed to help protect the safety of the pharmacy and store staff from burglaries and robberies.
- 19. How do I calculate MME (Morphine Milligram Equivalents)?**  
Refer to the *Opioid Dosage Calculator* and the CDC handout *Calculating Total Daily Dose and Safer Dosage* found on StoreNet/Rx Ops/Rx Integrity/Target Good Faith Dispensing
- 20. How can I fill naloxone without a prescription?**  
Review your state-specific Naloxone Policy for dispensing procedures found on StoreNet/Patient Care/Clinical Services/Naloxone Program/State Specific Requirements.
- 21. How can I offer naloxone to a patient with bedside delivery when the pharmacist does not have any contact with the patient or caregiver?**  
You can notate “No,” indicating that naloxone was not offered and document that the patient had bedside delivery on the *GFD Review Worksheet*.
- 22. Do I need to offer naloxone for every Target Drug fill?**  
No. Pharmacists must offer naloxone to patients when the MME for a prescription is greater than 50. For subsequent fills, if a patient has naloxone on-hand or has recently declined a naloxone offer, use your professional judgement, and document the date offered in the *Notes* section of the *GFD Worksheet*.
- 23. If I am not the pharmacist on duty when the patient picks up their prescription, how can I ensure the pharmacist on duty offers naloxone to the patient?**  
The pharmacist has a few options to ensure naloxone is offered to the patient on *GFD* prescriptions exceeding 50 MME. The pharmacist may offer naloxone to the patient at prescription drop off, the prescription can be blocked from being sold by adding a consultation requirement (CAP) block, or the pharmacist may call the patient. All pharmacy team members at your location must follow the same process to reduce any chance of confusion.

**24. Are hospice prescriptions considered exempt from the GFD procedures?**

No. The *GFD Review Worksheet* is required for each Target Drug prescription. The hospice status must be documented in the *CRD* section of the *Worksheet*.

**25. Is it ok to fill a prescription if I know there is a pain contract on file for the patient/clinic?**

A pain contract does not necessarily make it ok to fill the prescription. The pharmacist must identify all red flags and resolve them prior to dispensing a controlled substance.

**26. What should I do if a patient presents with a discount card for a Target Drug prescription?**

The pharmacist must determine if this is a red flag that they cannot resolve. If they cannot resolve the red flag, then they must refuse the prescription. If the red flag can be resolved, they can dispense the prescription.

**GFD IC+ Process FAQs**

**1. How do I initiate a GFD Review Worksheet?**

The *GFD Review Worksheet* will automatically open when technicians perform *Data Entry* on a Target Drug. The *GFD Review Worksheet* will automatically open during *Product Review* for all Target Drugs and for all prescriptions where a *GFD Review Worksheet* has been started. Note: If the pharmacist completes *Data Entry*, the *GFD Review Worksheet* will not automatically open until *Product Review*.

**2. What if I initiate a GFD Review Worksheet for a drug that does not require a GFD Review Worksheet?**

A *GFD Review Worksheet* can be completed on a non-controlled substance or non-target drug as determined by the pharmacist's professional judgement. Access the *Worksheet* from the *Work Queue* after *Data Entry* is complete. Note: All *GFD Review Worksheets* with saved information must be dispositioned (accepted or refused) by the pharmacist before dispensing.

**3. If one pharmacist refuses to fill a prescription based on GFD, can another pharmacist fill the same prescription if they determine it meets GFD requirements?**

Yes, another pharmacist may fill the prescription as long as they identify and resolve red flags, and document resolution of those red flags. Pharmacist must review *GFD history* prior to dispensing.

**4. Does a "refused GFD" mean that we can never fill for that patient again?**

No, a refusal is only by a specific pharmacist for a specific prescription. You must use your professional clinical judgement when dispensing all controlled substances including those prescriptions previously refused.

**5. What should I do if the prescription is too soon to fill but would pass GFD on all other points?**

A prescription that is too soon to fill may not be considered a true refusal. If it is too early to fill the prescription, pharmacists may refuse the prescription on the *GFD Review Worksheet* and store the prescription on the *Patient Profile* or keep it in the *Work Queue* until the appropriate time to dispense the prescription.

If it is a hard copy prescription and the patient has requested it back, you must refuse the prescription on the *GFD Worksheet*, documenting the reason for the refusal, delete the prescription from the Work Queue and return the prescription to the patient.

Prescriptions kept in the *Work Queue* must be updated to modify the *Effective Date* to match the appropriate dispensing date. The prescription must be annotated to document the reason for the future *Effective Date*.

**6. Why isn't the prescription automatically deleted after the GFD Review Worksheet is refused?**

A *GFD* refusal does not invalidate a prescription. The pharmacist must determine the appropriate next steps once a prescription is refused. This may mean storing the prescription on the *Patient Profile* or deleting the prescription and returning the hardcopy prescription back to the patient.

**7. How long will I be able to view refusal documentation?**

IC+ will display all *GFD* history for 18 months on the *GFD Info* tab of the *Patient Profile*. This includes all accepted and refused worksheets.

**8. Can I refuse for a patient without entering the prescription into the system?**

Unless there is a security concern, you must always process the prescription and complete the refusal in IC+.

**9. What do we do if we call the prescriber and receive no response in 24 hours (72 hours if on a weekend) to our inquiry? If the patient does not want to wait and asks for the hard copy back, would we treat it like a refusal and complete the GFD Review Worksheet?**

If the prescriber has not called back and the patient wants their prescription back, it is okay to give the prescription back to the patient to take to another pharmacy. You must process the prescription with a *GFD Review Worksheet* refusal and comment on the *GFD Review Worksheet* that you were waiting for prescriber clarification. This will allow Walgreens pharmacy team members to know that you are refusing because you have not received clarification from the prescriber.

**10. What if the patient has a GFD Refusal for a different prescription than the one they are currently trying to fill?**

If the patient has a refusal for a different prescription, the current prescription should not be treated as an automatic refusal. Use your professional judgment regarding a *GFD Refusal* for a different prescription if it is a point of concern.

**11. What if the prescription is refused and the pharmacist is busy at the time the patient returns?**

The technician should inform the patient that the pharmacist will be with them shortly. Only the pharmacist should inform the patient of a refusal using the following refusal language:

*"Walgreens is working hard to ensure the safe dispensing of controlled pain medications. Based on my clinical review and professional judgment, this prescription does not meet the requirements"*

*Walgreens has put in place for dispensing these medications. Therefore, I cannot fill this prescription in good faith. I apologize for any inconvenience.”*

**12. What if I refuse a prescription in the system in error? Is there a way to complete a new GFD Review Worksheet and accept the prescription?**

Yes, locate the prescription in the exception queue and reprocess. Document the refusal you made in error on the *GFD Worksheet* for the dispensed medication. Note: The refusal will be visible in the Patient Profile under the *GFD Info* tab.

**13. How should I handle refusing an e-Rx?**

You should handle an e-Rx as you would a hard copy prescription. You can refuse the GFD Review Worksheet and delete or store the prescription with a MSC exception from the work queue. The refusal will be displayed in the “GFD Info” tab of the patient profile.

Note: once the e-Rx has been deleted, you must contact the prescriber for a new e-rx prescription.

**14. How do I document the MME value for a non opioid drug?**

Enter zero as the MME value.

**15. What if the *Data Entry*, *Data Review*, or *DUR* was completed at a different location?**

The GFD Review Worksheet must still be completed during *Product Review*.

**16. What if I do not have enough information to complete the GFD Review Worksheet?**

You can use the *Save* button to save information at any time and return to *the GFD Review Worksheet* up until *Product Review*.

**17. What happens when I store a prescription for a Target Drug?**

A *GFD Review Worksheet* is required every time a Target Drug prescription is dispensed. When a stored Target Drug prescription is re-opened, IC+ will automatically display a new, blank *GFD Review Worksheet* at *Product Review* that must be completed.

**18. What happens if the refused prescription is deleted or closed?**

All dispositioned (accepted or refused) *GFD Review Worksheets* will be saved in the *GFD Info* tab of the patient profile even if the prescription is closed or deleted.

**19. If I need to update the prescription, do I need to complete a new GFD Review Worksheet?**

No, but you must *Accept* or *Refuse* the existing GFD Review Worksheet again, if the update to the prescription prompts *Data Review*.

**20. What should I be documenting in the red flags and corresponding responsibility sections?**

You must identify all red flags, document resolution of all red flags if resolution is possible, and provide supporting information in the corresponding responsibility section, including conversations you may have had with the patient or prescriber.

**21. What should I be documenting in the notes section?**

The notes section must contain any additional comments that you feel are clinically appropriate.

**22. Why is the accept button disabled?**

The accept button is only available to the pharmacist. The accept button only becomes enabled when all red flags have been resolved, meaning there are comments in the text field associated with each selected red flag. There must also be an *MME* value present on the *GFD Review Worksheet*.



# Electronic *Good Faith Dispensing Review Worksheet* Job Aid

ATRH: Pharmacy > Compliance > RxIntegrity > Good Faith Dispensing  
StoreNet: StoreNet> Rx Ops> Rx Integrity> Good Faith Dispensing

## What Is *Good Faith Dispensing*?

The responsibility for appropriate prescribing of controlled substances lies upon the prescriber but a **corresponding responsibility** rests with the pharmacist who dispenses the prescription

- To be valid, prescriptions must be issued for a legitimate medical purpose by a practitioner acting in the usual course of professional practice
- This means that pharmacists and doctors share an **equal responsibility** to ensure that prescriptions are properly prescribed and dispensed

Walgreens process for evaluating and documenting prescriptions to ensure corresponding responsibility requirements are met is known as *Good Faith Dispensing (GFD)*

- Since all clinical situations are unique, the *GFD* policy allows pharmacists use their clinical judgment to balance patient safety and health outcomes while always adhering to regulatory requirements
- Pharmacists **must** use the elements of *Good Faith Dispensing* in conjunction with state and federal controlled substance laws when filling **all** prescriptions
  - *Target Drugs* **require** documentation of the *Good Faith Dispensing Review* using the new, electronic worksheet
  - Pharmacists may **choose** to document their *GFD Review* using the worksheet for **any** prescription, including non-controls such as gabapentin
- The act of documentation helps protect the license of the dispensing pharmacist by recording actions taken to meet corresponding responsibility requirements

While all team members have a role in ensuring the elements of *GFD* are met, **the pharmacist who accepts or refuses the *GFD Review Worksheet* will be held accountable.**

This job aid is supplemental to the referenced [Walgreens Good Faith Dispensing Policy](#) and contains operational guidance for using the new electronic *Good Faith Dispensing Review Worksheet* to document compliance information in *Intercom Plus*.

### What Is Changing?

A new, electronic *Good Faith Dispensing Review Worksheet* in *Intercom Plus* will replace the paper *TD-GFD Checklist*

- Used to identify and document resolution for *Red Flags, Corresponding Responsibility Documentation (CRD)* and pharmacists' clinical notes

Completed *Good Faith Dispensing Review Worksheets* are automatically saved to the *Patient Profile (F7)* and displayed on a new *GFD info* tab

- Includes all information entered by the pharmacist who accepts or refuses the *Good Faith Dispensing Review Worksheet*
- May be used to identify previous refusals on prescriptions at alternate locations

### Why Did We Do It?

Provides enhanced ability for pharmacists to document their *Good Faith Dispensing Review* and provides visibility of refused prescriptions to pharmacists at other locations.

- Improved ability for subsequent pharmacists to review documentation

Thorough *GFD* evaluation and detailed documentation ensures patient safety and protects Walgreens and our pharmacists.

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## Key elements of the GFD Review Worksheet

1. Prescription Morphine Milligram Equivalents (MME)
  - a. Pharmacists must enter calculated value using an [MME Calculator](#)
2. IC+ Data Entry information
3. Red Flags
  - a. Factors that may negatively impact prescription validity
  - b. Pharmacists must identify and document resolution of all Red Flags
  - c. Once a Red Flag is selected, a resolution comment is required
4. Corresponding Responsibility Documentation (CRD)
  - a. Factors that positively impact prescription validity
  - b. Once a CRD is selected, a resolution comment may be entered, but not required.
5. Notes
  - a. Area designated for additional documentation, e.g. clarification with the prescriber or patient
  - b. Since the CRD and Red Flag prompts are not all inclusive, Notes must be used for additional documentation
  - c. Only pharmacists may enter Notes
6. Pharmacist attestation, confirming adherence to GFD policy
7. View PDMP
8. Accept
  - a. Documents pharmacist approval to dispense the prescription and completes the Worksheet
  - b. Only enabled once all required elements are populated
9. Refuse
  - a. Always enabled for pharmacists to document refusal to dispense the prescription and completes the Worksheet

The screenshot shows the GFD Review Worksheet interface for a prescription of Hydromorphone 8mg ER Tablets. The patient is Patricia Thomas, born 12/19/1978. The prescriber is Anita B Naoshad. The interface includes fields for patient and prescriber information, drug details, quantity, and various flags. The Red Flags section shows two flags selected: 'Patient address, pharmacy, or prescriber office not within geographical proximity' and 'Patient is using discount card or paying cash'. The Corresponding Responsibility Documentation section shows one CRD selected: 'Patient resides in hospice care, is using bedside delivery, or institutional care'. The Notes section is empty. The Pharmacist Attestation section contains the text: 'I attest I have used the Target Drug Good Faith Dispensing Worksheet validation procedures and my professional judgement to review this prescription.' The interface also includes buttons for 'View PDMP', 'Accept', 'Refuse', 'Save', and 'Cancel'.

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# Electronic Good Faith Dispensing Review Worksheet Job Aid

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## Accessing the GFD Review Worksheet from Data Entry and the Work Queue

### Good Faith Dispensing Review | Data Entry

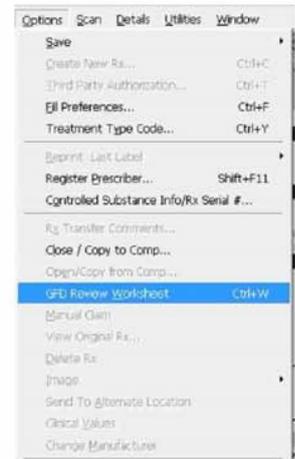
Upon completion of *Data Entry*, after selecting the *Fill* button, the *GFD Review Worksheet* will automatically open only for *Target Drugs* that require completion of a worksheet

- Technicians must read *CRD* and *Red Flags* items designated with the technician identifier, *T* (e.g., T1, T2, T3)
  - Select the checkbox for all items that pertain to the prescription
  - Select the *Save* button when complete.
  - All information saved will be displayed to the pharmacist during *Product Review*

### Good Faith Dispensing Review | Work Queue

Once *Data Entry* is complete, the *GFD Review Worksheet* may be viewed, started, or updated from the *Work Queue*

- Highlight the prescription in the *Work Queue* and select *Options* then *GFD Review Worksheet*
- This allows a *GFD Review Worksheet* to be completed for any prescription, not only *Target Drugs*



### Good Faith Dispensing Review | Product Review

A *GFD Review Worksheet* will be automatically opened at *Product Review* for:

- All *Target Drugs*
- Any prescription with an in-progress *GFD Review Worksheet*

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Any information entered prior to *Product Review* will be displayed. Prescriptions that did not require *Data Entry* may display a blank *GFD Review Worksheet* (e.g., eRx automated *Data Entry* or stored prescriptions)

The pharmacist must then use their clinical judgment when deciding whether to refuse or dispense the prescription:

- Review all *Red Flags* items, toggling those that pertain to the prescription
  - Note: Always read the text carefully. The wording may change or additional prompts may be added at any time.
  - Note: A Pharmacist has the final review and can turn a Red Flag on or off after a technician may have already done so.

The screenshot displays the 'GFD Review Worksheet' for a patient named Patricia Thomas. Key sections include:
 

- Patient Info:** Name (THOMAS PATRICIA), DOB (12/19/1978), Gender (F), Address (300 WILMOT RD, DEERFIELD, IL, 60015).
- Prescription:** Drug (HYDROMORPHONE 8MG ER TABLETS), Quantity (30), Days Supply (30), Refills (0).
- Red Flags:** A table with columns 'Red Flags' and 'Resolution Comments'. One flag is checked: 'T2. Patient address, pharmacy, or prescriber office not within geographical proximity'. Resolution comment: 'Prescriber office 2 hrs away'.
- Corresponding Responsibility Documentation (CRD):** A table with columns 'Corresponding Responsibility Documentation' and 'Resolution Comments'. One item is checked: 'T3. Patient resides in hospice care, is using home care delivery, or institutional care'. Resolution comment: 'Patient in hospice care'.
- Notes:** A field for additional comments.
- Buttons:** 'View PDMP', 'Accept', 'Refuse', 'Save', 'Cancel'.

- Document *Resolution Comments* for each selected *Red Flag*
  - Comments must provide a valid rationale for why dispensing is appropriate, if dispensing the prescription
  - Refer to previously completed worksheets displayed on the new *GFD Info* tab in *Patient Profile (F7)*
- Review all *Corresponding Responsibility Documentation (CRD)* prompts, toggling those that pertain to the prescription
  - Documentation of clarifying information is recommended, but optional
- Review *PDMP* information where appropriate or required, looking for additional red flags such as:
  - Evidence of poly-pharmacy or poly-prescriber
  - Completion of cocktails or other inappropriate combinations such as benzodiazepines with opioids
- Use the *Notes* field to document resolution of other *Red Flags* and *CRD*, such as clarifying conversations with the patient or prescriber or comments why dispensing is not appropriate prior to a refusal.

After gathering and documenting all relevant information, the pharmacist must complete their *Good Faith Dispensing Review* and decide whether to accept or refuse the prescription

- When the *Accept* button is selected, the pharmacist is attesting that *Good Faith Dispensing* guidelines have been followed, validated and documented appropriately
  - The screen will close and *Product Review* can be completed
  - The pharmacist who accepts or refuses the GFD Review Worksheet is recorded as the *GFD* pharmacist
  - The worksheet will be saved to the *GFD Info* tab for later viewing

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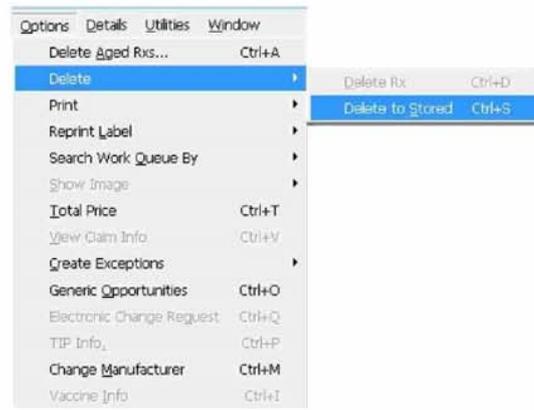
# Electronic Good Faith Dispensing Review Worksheet Job Aid

ATRH: Pharmacy > Compliance > RxIntegrity > Good Faith Dispensing  
StoreNet: StoreNet > Rx Ops > Rx Integrity > Good Faith Dispensing

- *Note: Accept* is only enabled for pharmacists once the MME and all selected *Red Flags* fields have populated comments
- When the *Refuse* button is selected, the prescription will return to *Reviewed* status
  - An MSC exception is automatically created with comments: *GFD refused on MM/DD/YYYY by RPH Initials*
  - The pharmacist who selected the *Refuse* button is recorded as the *GFD* pharmacist
  - The worksheet will be saved to the *GFD Info* tab for later viewing
  - *Note:* Refuse is only enabled once a *Red Flag* has been selected, or the *Notes* section is populated

Refused prescriptions may be:

- Deleted from the *Work Queue* and returned to the patient
  - *Note:* eRx should always be *Stored* then *Closed* rather than deleting to maintain traceability. See below for storing an eRx without placing it in *Ready* status
- Left in the *Exception Queue* until the *Red Flag(s)* have been resolved. For example:
  - It is no longer too early to fill or
  - The prescriber has been contacted and clarified information on the prescription
- *Stored on the Patient Profile*
  - If the prescription may become valid in the future
  - While the prescription is in *Reviewed MSC* status,
    - Update Rx to change the *Do Not Dispense Before Date* to a future date (such as tomorrow)
    - The prescription will undergo another *Data Review*
    - After *Data Review*, the prescription is automatically converted to *MSC* status
    - Highlight the prescription in the *Work Queue*
    - Open the *Options* menu, then select *Delete > Delete to Stored*



Multiple team members may contribute information to an in-progress *GFD Review Worksheet*

- The pharmacist who selects the *Accept* or *Refuse* buttons is accountable for:
  - The accuracy and validity of the final information contained on the worksheet
  - Ensuring *GFD, Corresponding Responsibility* and all other federal, state, and local requirements with regard to *GFD* (e.g., PDMP check) are met

*Note:* Prescriptions that have been updated and require another *Data Review* will also require completion of a *GFD Review Worksheet* again

- Ensure the pharmacist performing the *GFD Review* considers the most recent information when making a determination
- For example, updating the *Directions* will require a pharmacist to complete the *GFD Review* again

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# Electronic Good Faith Dispensing Review Worksheet Job Aid

ATRH: Pharmacy > Compliance > RxIntegrity > Good Faith Dispensing  
StoreNet: StoreNet> Rx Ops> Rx Integrity> Good Faith Dispensing

## Historical GFD Review Worksheet Information

All completed *GFD Review Worksheets* will be saved on the *Patient Profile (F7)*

- Includes *Accepted* and *Refused* prescriptions
- *GFD Review Worksheets* from the previous 18 months will be visible on the new *GFD Info* tab
- Highlight a *Worksheet* to view the full details of the previous GFD Review

Original Date	Drug	Rx Number	Store Number	Fill Number	Prescriber	GF
08/01/2019	OXYCODONE 10MG IMMEDIATE	181000	59282	1	BASHRI,HASAN	09/
09/01/2019	OXYCODONE 10MG IMMEDIATE	181023	59282	1	BASHRI,HASAN	09/
09/15/2019	OXYCODONE 10MG IMMEDIATE	181025	59282	1	BASHRI,HASAN	09/
09/15/2019	OXYCODONE 10MG IMMEDIATE	180998	59282	1	BASHRI,HASAN	09/

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