



Emergency Preparedness, Prescription Medications, and Medical Supplies

Make a medication list: Keep an updated list of all medications that includes the drug name, strength, dosage form, and regimen along with phone numbers for the prescribing doctor(s) and pharmacies with you at all times and in a waterproof bag or container in your emergency kit.

Carry your prescription card: Keep your health insurance or prescription-drug benefit card with you at all times, as your pharmacy benefit provider or health plan can help you obtain an emergency supply of any lost or damaged medication.

Order early: Reorder on the first day you become eligible for a refill, rather than waiting until the day you run out. Consider ordering a 60 - 90-day supply of medication so that you're more likely to have extras on-hand. Consider ordering through your plan's home-delivery pharmacy to ensure a full stock.

Keep your medications together: Keep medications in original containers with original labels and place prescription bottles in a waterproof bag or container.

Prepare for special needs: If your medication requires refrigeration or electronic equipment, have a plan for temporary storage and administration.

Make a plan: Discuss your medication disaster plan with your doctor, especially if your medication has special shipping or electronic equipment requirements. Also discuss plans for your child's medication with your child's daycare provider or school.



Maintain an emergency healthcare kit: Stock a supply kit with any nonprescription medications you may need such as pain relievers, cold medications and antacids.

Medication safety: Inspect your medication regularly to see if the look or smell of it has changed, as excessive moisture or heat can contaminate the drugs. Replace any out-of-date supplies. If you are unsure about its safety, contact a local pharmacist or healthcare provider.

Skipping doses: If you haven't been able to take your medication, contact a pharmacist or doctor as soon as possible even if you're not experiencing any negative health effects. Never take additional doses to make up for those you've missed before talking to a healthcare practitioner.

How to store: It is recommended to have a **minimum seven day supply of medicines**, with a 30-day supply being even better.

Have a conversation with your doctor about your emergency preparation effort. Explain what you're doing and tell them the meds will be going into storage.

The ability of your doctor to write prescriptions is regulated by the states with federal laws governing certain types of controlled medications. There may be some variations in different parts of the country. Most states will not allow a full month supply of medication to be held on a continued basis. Also, most if not all insurance plans do not allow or will not pay for a renewal until a short time before the drugs run out which means that you can't put away a supply of medications for emergency planning.

Many insurance companies only cover a 30-day supply so you may need to pay out-of-pocket. If the medication is expensive, ask for a generic substitute for use during an emergency.

Storing medications

- **Ask your doctor for pill or medications**, they will last longer than a liquid form. Vacuum seal the pills and store them in a cool, dry place



to preserve effectiveness as long as possible. Pills can last 1 to 2 years beyond the expiration date in these conditions.

- **Have a mortar and pestle in your emergency kit** if you are on any liquid medications. Liquids may crystallize in storage, and the mortar and pestle will allow you to break up the crystals and reconstitute the medicine.
- **Label all medications clearly** so if you are incapacitated and unable to take the medicine, someone else can dispense it to you. State who the medication is for, what time of day you take it, and any special instructions.
- **Preserve refrigeration medications (like insulin), in a Ziploc baggie in your toilet tank** – NOT the bowl. If the power goes out, the fridge will stay cold for 12-24 hours. After that, you can keep the medications cool in the tank of the toilet, which is 15-20 degrees cooler than the ambient temperature.
- **Talk to your doctor about a prescription for an epi-pen** if anyone in your family has severe allergies to bees, peanuts, etc. The pen will last for a year if stored in a cool, dry location.

Colorado Medicaid: *(Tom Leahey, Pharmacy/DME Policy Supervisory 11/09/2016)*

- *Member may have difficulty because of utilization edits:*
 - *Refill too soon*
 - *Max Dosage Exceeded*
 - *Unit limit*
- *Overrides generally not approved if only justification is to compile emergency supply*
- *Refill prescriptions as soon as allowed under refill policy*
 - *For controlled drugs – after 85% of days supply has lapsed*
 - *For non-controlled drugs – after 75% of days supply has lapsed*
- *Members could request pharmacy to dispense a 90-day supply for maintenance drugs if allowable under the prescription.*
- *Consider using a pharmacy which provides mail delivery.*
- *In cases of medication being destroyed, Medicaid will provide a onetime override to get med refilled.*



- *Medicaid has a history of lifting certain utilization restrictions and granting overrides to help members dealing with natural disasters.*

If you are unable to obtain an emergency supply due to restrictions, ask your insurance company if they have provisions for emergencies, and to assist in obtaining and maintaining enough medication and supplies to have on hand for an unexpected emergency. The same rules generally apply to online purchases.

Individuals who pay cash for medications can let the pharmacy know that they are preparing for an emergency.

Vacation refills don't allow the insured to set aside medication, it only allows the insured to obtain prescriptions early.

Wear medical alert tags or bracelets to help identify your disability.

If dependent on dialysis or other life sustaining equipment, know the location and availability of more than one facility.

Teach others how to operate necessary equipment.

Label equipment (wheelchairs, scooters, walkers, canes, and other assistive technology) with name and contact information. Include out-of-state contact in case you are separated from equipment.



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Made possible by NIDRR Grant #H224A40014 and

The Colorado Developmental Disabilities Council



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