


BHS Policies and Procedures	
 <p style="margin-left: 20px;">City and County of San Francisco Department of Public Health San Francisco Health Network BEHAVIORAL HEALTH SERVICES</p>	<p style="text-align: right;">1380 Howard Street, 5th Floor San Francisco, CA 94103 (628) 754-9500 FAX (628) 754-9575</p>
Policy or Procedure Title: Behavioral Health Services Medication Use Improvement Committee (MUIC)	
<p>Issued By: DocuSigned by: <i>Maximilian Rocha</i> EB51A346C32641B...</p> <p>Maximilian Rocha, LCSW BHS Director of Systems of Care</p> <p>Date: June 6, 2023</p>	<p>Manual Number: 3.02-26</p> <p>References: 9 CCR §1810.225</p> <p>Annual Review Protocol for Specialty Mental Health Services and Other Funded Service. Fiscal Year 2022-2023, California Department of Health Care Services.</p> <p>ASHP Guidelines on the Pharmacy and Therapeutics Committee and the Formulary System, Am J Health-Syst Pharm. 2008; 65:1272-83</p>

Technical Revision. Last reviewed April 16, 2026.

Equity Statement: Behavioral Health Services (BHS) is committed to prioritizing intersectionality, including race, gender identity, sexual orientation, age, class, nationality, language, and ability. BHS strives to become an anti-racist and trauma informed organization. We are committed to ensuring that every policy and procedure leads with an equity lens. We are dedicated to ensuring that our providers are equipped to respond to our members’ diverse needs and lived experiences.

Purpose: Under the direction of the BHS Chief Medical Officer(s), the Medication Use Improvement Committee (MUIC) serves as the oversight body for BHS medication services and is a subcommittee of the BHS Quality Improvement Committee. The purpose is to provide medication use improvement advisement.

Scope: Issues related to medication services improvement and scope of practice in all Behavioral Health Services. The specifics of the scope of oversight are listed within the policy.

Policy:

1. Scope of oversight include but are not limited to:
 - a. Issues related to medication services improvement and scope of practice
 - i. Plans, policies and/or proposals related to improving medication services
 - ii. Recommend training and research activities related to medication services

- iii. Clinical protocols for pharmacists, nurse practitioners, other medical practitioners
- iv. Evaluation of new technologies (medications, supplies, devices)
- b. Issues related to medication services, including plans, policies and/or proposals for:
 - i. E-prescribing.
 - ii. Laboratory electronic ordering and processing of results.
 - iii. Health monitoring.
 - iv. Medical content of consumer portal.
 - v. Monitoring tools and guidelines.
 - vi. Vital signs, medical screening as appropriate.
 - vii. Decision support and alerts.
- c. Issues related to medications
 - i. Medication consents.
 - ii. Plans, policies, and/or proposals related to improving medication use.
 - iii. Patient education and medication adherence.
 - iv. Medication safety, including medication errors and adverse drug reactions.
 - v. Medication and laboratory Formulary management (additions/deletions).
 - vi. Reviewing drug utilization data including review of county-paid (uninsured) prescribing.
 - vii. Medication Use Evaluations (review of prescribing practices for drugs that are problem prone and/or high risk and/or high cost).
 - viii. Safer prescribing medication therapy protocols/guidelines.
 - ix. Distribution and storage of medications at BHS facilities.
 - x. Pharmaceutical industry and medical devices industry related policies and procedures.
 - xi. Training and research activities related to medication use improvement.
- d. Other issues at the recommendation of the Chief Medical Officer(s)

2. Membership

- a. The chairperson and members of the committee shall be appointed by the BHS Chief Medical Officer(s)
- b. The committee shall consist of at least 8 members, the majority of which shall be psychiatrists, and shall include representatives of BHS System of Care providers including physicians and nurse practitioner(s), psychiatric clinical pharmacist(s), and BHS Quality Management personnel. There will be at least one member that is a contractor. The BHS Director of Pharmacy shall be a permanent member and serve or appoint another member as secretary of the committee. To support alignment of Medication Support Services, membership shall include the ZSFG Formulary manager. The Chief Pharmacy Officer shall be a permanent non-voting member
- c. Members of the committee shall serve for one year and are eligible for re-appointment
- d. Members shall complete a Declaration of Disclosure annually to disclose any financial interests in or affiliation with a commercial entity that is a potential conflict of interest. Individuals shall recuse themselves from voting on issues in which there is a potential conflict of interest, and minutes shall note if a member participates in discussion about a topic when there is a potential conflict of interest
- e. Members are expected to actively participate, and to serve for the best interests of BHS members and the organization to support providing the highest quality of care to members

3. Meetings

- a. The committee will meet at least four times a year and shall maintain a written and dated record of its proceedings.
- b. A quorum shall be established prior to voting. A quorum consists of a majority of voting members.
- c. Actions are approved by simple majority unless otherwise specified by the BHS Chief Medical Officer.

4. Duties

- a. MUIC is responsible for
 - i. Developing and the surveillance of medication services policies and practices for the behavioral health system.
 - ii. Advising the BHS Chief Medical Officer(s) regarding issues related to medication services policy.
 - iii. Assisting the BHS Chief Medical Officer(s) in the formation of broad professional policies regarding the evaluation, appraisal, selection, procurement, storage, distribution, use, safety procedures, disposal and all other matters relating to pharmaceuticals for the behavioral health system.
 - iv. Monitoring the safety and effectiveness of medication practices at least annually. Monitor psychotropic medication use, including monitoring of psychotropic medication use for children/youth.
 - v. Responding to medication-related issues identified by the BHS Risk Management Committee. The liaison for the BHS Risk Management Committee is the BHS Director of Pharmacy.
 - vi. Reviewing requests for new technologies (or new use of existing technologies) for medications, medical supplies and medical devices/equipment, and making recommendations for acceptance or denial of the use of new technology.
- b. The BHS Director of Pharmacy shall provide an annual report to the BHS Quality Improvement Committee summarizing MUIC activities
- c. The MUIC Chairperson shall
 - i. Report MUIC activities to the BHS Deputy Medical Directors, at minimum, annually.
 - ii. Participate and/or designate representation at ZSFG Pharmacy and Therapeutics Committee as needed for psychotropic medications with behavioral health indications.
 - iii. Participate as member the Pharmacy and Therapeutics Committee of the San Francisco Health Plan at the SFHP's invitation.

Procedure

1. MUIC will monitor the safety and effectiveness of medication practices through the following annually:
 - a. A Drug Use Evaluation (DUE) of all BHS prescribing with multiple year trends (when available) and breakdowns by age and race categories. It will be inclusive of adults and youth.
 - b. A DUE of JV220 with multiple year trends.
 - c. A DUE of HEDIS measures in foster care.
 - d. A summary of medication quality of care reports from Risk Management.
 - e. An annual peer review with a tool developed by MUIC that includes evaluation of identified clinical meaningful issues from the practice guidelines.
2. If the above monitoring practices determine there are clinically meaningful issues affecting members

system-wide, MUIC will develop workgroups, develop policies and procedures, and form recommendations for the BHS Deputy Medical Directors or other interventions to address the issues.

3. MUIC practice guidelines

- a. MUIC develops practice guidelines with the following requirements:
 - i. Based on valid and reliable clinical evidence or a consensus of health care professionals in the applicable field.
 - ii. Consider the needs of the members.
 - iii. Adopted in consultation with contracting health care professionals.
 - iv. Reviewed every 3 years or sooner as appropriate.
- b. The BHS Director of Pharmacy, or their designee, will disseminate the practice guidelines to all providers by e-mail.
- c. The practice guidelines will be made available to all providers, members and the public through the BHS online public website and made available in print to members upon request.

Contact Person:

BHS Chief Medical Officer(s)

Distribution:

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