PMP FAQs

Last Updated: May 25, 2025

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GENERAL FAQs

Question: What is the Iowa Prescription Monitoring Program (PMP)?

Answer: The Iowa PMP collects records of controlled substance (Schedules II through V) prescriptions dispensed by Iowa-licensed pharmacies and dispensing prescribers and makes that information available to registered prescribers and pharmacists (practitioners) to assist them in making informed decisions about a patient's care and treatment. The PMP can be used to assist the practitioner in identifying potential diversion, misuse, or abuse of controlled substances without impeding the appropriate medical use of controlled substances.

Question: Who is responsible for oversight and operation of the PMP?

Answer: The Iowa Board of Pharmacy manages the Iowa PMP along with the guidance of the PMP Advisory Committee.

Question: What is the website or web address for the PMP?

Answer: iowa.pmpaware.net

Question: How is the confidentiality of prescription information protected?

Answer: Before anyone is permitted to access the PMP, the individual must complete and submit a registration application. Qualifications of the individual, including professional license number, DEA registration number, and other identifiers are reviewed and verified prior to approval of the registration. All registrants agree to the terms of use and confidentiality before accessing or requesting any information from the PMP. PMP data is protected by the highest data security standards and access to data is restricted to authorized, registered individuals.

Question: What is the legal authority for the PMP?

Answer: The PMP was established and operates in accordance with the provisions of lowa Code sections §124.550 through §124.558 and lowa Administrative Code (IAC) section 481 Chapter 556.

Question: As a patient, can I opt out of having my data in the PMP?

Answer: No - Iowa Code section §124.552 requires that dispensers report all controlled substance prescriptions, unless prohibited under federal law, to the PMP. The Code <u>does not</u> include provisions for opting out of including a patient's controlled substance prescriptions in the PMP data.

Question: What information is contained in the Iowa PMP database?

Answer: Records of all Schedule II through V controlled substance prescriptions, including OTC scheduled products, dispensed to patients by lowa pharmacies and dispensing prescribers are included in the PMP. This <u>does not</u> include the sale of OTC pseudoephedrine which must be recorded in the electronic pseudoephedrine tracking system (PTS) run by the Office of Drug Control. In addition, records of prescriptions for and administration of opioid antagonists, such as naloxone, are included in the lowa PMP.

Question: Who is submitting the prescription data?

Answer: Iowa-licensed pharmacies, including in-state and nonresident pharmacies, submit prescription data. Dispensing prescribers report controlled substances dispensed to patients by the prescriber. Any pharmacy, prescriber, or first responder who dispenses or administers an opioid antagonist, such as naloxone, also submits those records to the PMP.

Question: How long is information retained in the PMP database?

Answer: Information and records are maintained in the PMP for at least four (4) years from the date of the record.

Question: Who has access to the PMP data?

Answer: Pharmacists and prescribers may access a patient's PMP records if the pharmacist or prescriber is actively engaged in the patient's healthcare.

Question: Are prescribers and/or dispensers required to use the PMP database?

Answer: All Prescribers who are credentialed to prescribe and/or administer controlled substances in Iowa must also register to use the PMP. The Iowa Boards of Medicine, Nursing, Physician Assistants, Optometry, Podiatric Medicine, and the Iowa Dental Board all have mandates requiring use of the PMP before authorizing an opioid prescription. Please see the respective licensing Board regulations for requirements and exceptions. (e.g., hospitalized patients, hospice patients, long-term care residents, et al).

Question: Can Law Enforcement request PMP data?

Answer: Yes. However, release of PMP data must be pursuant to an order, subpoena, or other means of legal compulsion based upon a determination of probable cause in the course of a specific investigation of a specific individual.

Question: Can a patient request their own PMP (prescription history) data?

Answer: Yes. The form to be completed by the patient or the patient's legal agent is available on the Board's <u>website</u> under Patient Request For PMP Information.

Question: Can a person request prescription history be sent to a third party (e.g., attorney's office)?

Answer: Yes, a person may request their own prescription history be sent to the person's legal agent.

Question: I received my prescription history report and the information is incorrect, how do I get the information corrected?

Answer: Please contact the pharmacy or dispensing prescriber that reported the incorrect information and request they verify and resubmit a corrected record.

Question: Does the PMP limit a patient's access to prescription drugs?

Answer: No, limiting or restricting patient access to needed medications is not the purpose or intent of the PMP. The PMP is designed as a clinical tool to provide practitioners with additional patient level information. A primary goal of the PMP is to lead to more rational prescribing and better patient care. A decrease or an increase in the prescribing of controlled substances for an individual patient is determined by the prescriber.

Question: Is data maintained in the PMP database used to identify "inappropriate" prescribing by practitioners?

Answer: Not directly. Prescribing information and practices are not "policed" for the purpose of identifying inappropriate or indiscriminate prescribing or dispensing. A regulatory agent may request pertinent information from the PMP when the agent attests to and provides a subpoena, order, or warrant, based on a determination of probable cause, in the course of an existing investigation of a specific individual.

PMP REGISTRATION FAQs

Question: Who is required to register for the PMP?

Answer: Iowa practitioners (excluding veterinarians and researchers) who hold an Iowa Controlled Substances Act (CSA) registration are required to register for the PMP at the time they renew or are issued a new CSA registration. Standard of care practice for Iowa-licensed pharmacists who are involved in patient care would require them to register when they become licensed or renew their license.

Question: What is the website to register for the PMP?

Answer: iowa.pmpaware.net

Question: Does it cost anything to register for the PMP?

Answer: No, there is no cost to register for the PMP.

Question: Do I need to renew my PMP registration on a periodic basis?

Answer: No. However, users are notified annually to review and update their information as appropriate and are expected to periodically review delegates.

Question: I am a fully-licensed practitioner but I do not have my own DEA number. Can I register to use the PMP? If so, what role do I select during the registration process?

Answer: Yes. You may register under the role "Prescriber-Institution Affiliate/No Independent DEA Number." You will be required to enter your institution's DEA number followed by the unique suffix (e.g., CLP or NPI) they have assigned you.

Question: I am a resident physician and prescribe under my hospital's institutional DEA and CSA number. Can I register to use the PMP? How do I register?

Answer: Yes. You may register under the role "Medical Resident with Prescriptive Authority." You will be required to enter your institution's DEA number followed by the unique suffix (e.g., CLP or NPI) they have assigned you.

Question: I am registered as a medical resident but am now a licensed physician. Do I need to register again?

Answer: No. The role on your existing account can be changed by PMP staff. Please contact a PMP administrator at 515-281-5944 or pmp@iowa.gov with your permanent professional license number and personal DEA number so your account can be updated.

Question: How do I register as a delegate?

Answer: In Iowa you must be a credentialed healthcare professional to qualify for a delegate account. All users, including delegates, register online at <u>iowa.pmpaware.net</u>. Delegate users will select the role "Prescriber Delegate - Licensed" or "Pharmacist Delegate - Licensed." You must upload your license/certification/registration number as a healthcare professional and identify at least one supervising provider by entering their <u>PMP email address</u>. The supervising provider(s) will receive an email notifying them that you have registered. You will be granted access when the supervising provider(s) log into their PMP account and approve you.

(For more information, see (Delegate user FAQs)

Question: Can out of state pharmacists have access to the PMP?

Answer: Yes. If they are dispensing to lowa patients, they may register under the role "Out of State Pharmacist." They must provide their professional license and employer DEA number when registering.

Question: Can out of state prescribers have access to the PMP?

Answer: Yes. They may register under the role "Out of State Prescriber." They must provide their professional license when registering.

Question: I am new to practicing or prescribing controlled substances in Iowa and do not have a DEA or Iowa CSA yet. How do I register?

Answer: You must have an active DEA registration to be eligible for an Iowa PMP account. You will need to first apply for and be issued your Iowa CSA registration. Your CSA registration will be issued in "Pending - PMP" status allowing you to request your Iowa DEA registration. Once you have been issued your Iowa DEA registration, you must provide those credentials when registering to use the PMP. <u>Of note: Your Iowa CSA will not be considered active until you have completed your registration with the Iowa PMP.</u>

Question: What should I do if I tried to create a new account and got an error message that said, "There was a problem with the email you attempted to use. If you believe there is already an account associated with this email address, use the reset password feature to continue your registration."?

Answer: At the PMP website, click "Reset Password." You will be required to enter the email address associated with your existing PMP account. A link will be emailed to you to set up a new password.

Question: What should I do if I am retired, have moved out of state, allowed my CSA registration or pharmacist license to lapse, or am reaching out on behalf of a deceased provider?

Answer: Please contact a PMP administrator at 515-281-5944 or pmp@iowa.gov for deactivation of your account.

Question: Why am I required to select a healthcare specialty when registering with the PMP?

Answer: Practitioners are required to select a healthcare specialty when registering for the PMP to facilitate comparison reports, research and data analytics.

ACCESSING AND USING THE PMP FAQs

Question: I'm registered with the PMP, but I don't remember my password. What should I do?

Answer: At the PMP website, click "Reset Password." You will be required to enter the email address associated with your PMP account. If applicable, you may be asked to pick between a mobile phone number or email address to reset your password, A link will be sent to you to set up a new password. If you no longer have access to the email on file and have not registered a mobile phone number, please contact a PMP administrator at 515-281-5944 or pmp@iowa.gov.

Question: I no longer have access to the email address on my account and my password has expired. What should I do?

Answer: Please contact a PMP administrator at 515-281-5944 or pmp@iowa.gov.

Question: How do I reactivate my account?

Answer: Please contact a PMP administrator at 515-281-5944 or pmp@iowa.gov.

Question: Can I view data from other states?

Answer: PMP users registered as healthcare professionals (i.e.prescribers, pharmacists, delegates) may query other states' PMPs by selecting those states at the bottom of a patient request in the section titled "PMP InterConnect Search." To set up your patient request to automatically select other states, log in to your account and click your name in the top right of your screen. Click on "Default PMPi States" from the drop down menu, and select which state(s) you would like to automatically include in every patient search.

Question: As a prescriber, can I search for prescriptions dispensed with my DEA number?

Answer: Yes. When logged in to your PMP account, click "Menu," then click "MyRx" (under "RxSearch") and enter the date range you would like to search.

Question: Why do I not see a prescription dispensed for my patient when I know my patient filled the prescription?

Answer: If you know which pharmacy filled the prescription, please contact them directly to verify the prescription record and the pharmacy's submission to the PMP.

Question: What if a prescription reported to the PMP was reported or dispensed incorrectly?

Answer: The prescriber should contact the dispensing pharmacy or reporting dispenser for additional details about the prescription. Upon notification of a potential error in PMP information, the pharmacy or dispensing prescriber is required to promptly correct the record in the PMP.

Question: What if a patient has had prescriptions filled under multiple names?

Answer: Patient IDs can be manually consolidated by the PMP administrator. Please contact the PMP administrator at 515-281-5944 or pmp@iowa.gov.

Question: Can I place a copy of the PMP report in the patient's EHR/EMR?

Answer: Yes, it is acceptable to copy and place a PMP report or a synopsis into a patient chart if the purpose of doing so is related to that patient's healthcare, subject to the privacy policy and procedures of your facility, office, or pharmacy.

Question: Does the PMP include data from the Veterans Administration (VA) Pharmacies?

Answer: Yes, VA pharmacies are required to submit prescription data to the PMP.

Question: What should I do if I am concerned about my patient's controlled substance use?

Answer: Discuss your concerns with the patient and other practitioners involved in the patient's care. The NarxCare® Report contains resources such as communication with the patient's other providers and links to treatment facilities. If prescription fraud is suspected, contact your local law enforcement.

Question: How far back in a patient's prescription history can I request a PMP report?

Answer: PMP data is retained and can be queried up to 4 years from the date of the request.

Question: What is a NarxCare® Report?

Answer: NarxCare® is a tool and care management platform that helps prescribers and dispensers by automatically accessing the PMP data, analyzing and scoring it, and generating an interactive report that enables providers to quickly comprehend the patient's controlled substance use history.

PMP REPORTING FAQs

Question: Which prescriptions must be reported to the PMP?

Answer: A "reportable prescription" refers to any record of a controlled substance dispensed by a practitioner, over the counter schedule V products (excluding PSE), and record of an opioid antagonist dispensed by a practitioner or administered by a first responder.

Question: What prescription information is reported to the PMP?

Answer: The information required for each prescription includes, at a minimum, the following items:

- a. Dispenser DEA number
- b. Date the prescription is dispensed or administered
- c. Prescription number or unique identification number
- d. NDC number of the drug dispensed or administered
- e. Quantity of the drug dispensed or administered
- f. Number of days of drug therapy provided by the drug dispensed or administered
- g. Patient legal first and last names
- h. Patient address including street address, city, state, and ZIP code
- i. Patient phone number
- j. Patient date of birth
- k. Patient gender
- I. Prescriber name and DEA number
- m. Date the prescription was issued by the prescriber
- n. Method of payment
- o. Form of transmission or prescription "origin"

- p. Refill number
- q. Number of refills authorized
- r. Indication as to whether the prescription is new or a refill

Question: How frequently must data be submitted to the program?

Answer: A record of each reportable administration or prescription dispensed must be submitted by each dispenser no later than the next regular business day following administration or dispensing.

Question: Are hospital pharmacies required to report to the PMP when dispensing for inpatient use?

Answer: No. Dispensing by a licensed hospital pharmacy for the purposes of <u>inpatient</u> hospital care is exempt. However, medications dispensed by the hospital for outpatient use (e.g. 72 hour supply dispensed in the ER upon discharge) must be reported.

Question: When is reporting to the PMP not required?

Answer: Reporting of dispensing or administration of a controlled substance is not required when dispensed for inpatient hospital care, for long term care or hospice facility patient care, or when *administered* by a prescriber for outpatient procedures or treatment.

Question: Is anyone exempt from reporting to the PMP?

Answer: Yes, a pharmacy that does not dispense controlled substances to patients in Iowa, a licensed veterinarian who administers or dispenses a controlled substance in the normal course of professional practice, a registered hospice facility, and a DEA registered narcotic treatment program subject to the record-keeping provisions of federal law are all exempt from PMP reporting requirements.

Question: I have a pharmacy but I rarely dispense controlled substances. Do I still need to report?

Answer: Yes, unless otherwise exempt, a pharmacy that did not dispense any reportable prescriptions during a reporting period (i.e., a business day) is required to <u>submit a zero</u> report no later than the next regular business day.

Question: Are dispensing prescribers required to report dispensations to the PMP?

Answer: Yes, unless otherwise exempt, a dispensing prescriber is required to submit to the PMP a record of each reportable controlled substance dispensed no later than the next regular business day. The prescriber shall be duly identified as the dispenser (pharmacy) *and* prescriber when reporting to the PMP.

Question: How do dispensing prescribers report to the PMP?

Answer: Dispensing prescribers have two options to report to the PMP.

- Records may be submitted through the prescriber's AWARxE® account: log in to PMP AWARxE® > Click Menu > Data > Rx Management and New Rx. The prescriber shall be identified duly as the dispenser (pharmacy) and prescriber. This submission is suggested for minimal or infrequent dispensing done by the provider.
- Prescribers may choose to register for a PMP Clearinghouse account at: <u>https://pmpclearinghouse.net/users/sign in</u>. A registered prescriber or delegate can submit records using an electronic Universal Claim Form or submit records via sFTP. This type of submission is suggested for frequent (daily) dispensing done by the provider.

More information can be found on the <u>lowa PMP website</u> under User Guides or in the <u>PMPAWARxE® Support Center</u>.

Question: If a prescriber dispenses a "starter pack," would this be considered prescriber dispensing?

Answer: Yes, starter packs meet the definition of a reportable prescription and are required to be reported to the PMP.

Question: Are methadone treatment clinics required to report in-office dispensing?

Answer: DEA-registered narcotic treatment programs subject to federal record-keeping provisions of 21 CFR Section 1304.24 are exempt from PMP reporting.

Question: Are prescriber in-office dispensations of Suboxone® required to be reported?

Answer: Yes, unless the prescriber is subject to federal record-keeping provisions of 21 CFR Section 1304.24.

Question: Do I have to notify patients that their prescription information is being reported to the PMP?

Answer: No, although some entities do include such a notification in their HIPAA disclosure.

Question: How do I correct an error in a previously submitted record? e.g. the prescription was filled and previously reported using the wrong Dr. Smith.

Answer: Corrections may be made by data submitters by uploading a new file via sFTP, having your software vendor submit a corrected report on your behalf or by logging directly into their AWARxE® account. If making corrections via an AWARxE® account (usually the easiest approach to correct a single prescription), log in to PMP AWARxE®, Click Menu > Data > Rx Management > Rx Maintenance, then submit the changes.

DELEGATE USER FAQs

Question: Can unlicensed staff (i.e. receptionists) register for the PMP as delegates?

Answer: No. Only credentialed healthcare professionals directly involved in patient care are eligible for PMP registration. This does not include clerical or administrative staff. A healthcare professional shall be credentialed in a manner that permits verification and regulation of the health care professional's credentials.

Question: Who can register as a PMP delegate?

Answer: Delegate PMP users may include, but are not limited to: RNs, LPNs, certified medical assistants, radiologic technologists, paramedics, dental assistants, certified alcohol and drug counselors, mental health counselors, pharmacist-interns, and certified pharmacy technicians.

Question: The office I work in has numerous prescribers. Do I need to register as a delegate user for each prescriber that I work under? Why is this important?

Answer: **Yes**. When delegate users begin a patient request, they must select the supervisor/prescriber who is requesting the report. It is important that delegate users register under each prescriber for whom they may need to request patient data because this action will be reflected in the audit history of requests for the prescriber identified. Inappropriate use of the PMP by a non-treating physician and/or failure to meet mandatory use requirements could be alleged if the audit trail doesn't accurately reflect a request and who authorized it.

Question: What if I am doing searches for a prescriber who is not currently listed as one of my supervisors?

Answer: You may not perform a search for a prescriber who has not authorized you as their personal delegate.

Question: Why is it important to select the correct supervisor when conducting a PMP search?

Answer: It is vital that the PMP records correctly identify the prescriber who requested the patient's report. This is important to provide an audit trail and may be used to verify a provider's use of the PMP. The identified prescriber is responsible for your actions when conducting a PMP search.

Question: As a delegate, how do I add additional supervising providers?

Answer: In your PMP account under Menu > User Profile > My Profile, additional supervising providers can be added in the "Supervisors" section by entering the provider's <u>PMP email address</u>. The supervising provider(s) will receive an email notifying them that you have registered as their delegate. The supervising provider(s) must then log into their PMP account and approve you.

SUPERVISOR OF DELEGATE(S) FAQs

Question: Can a delegate access data on my behalf?

Answer: **Yes**. A delegate may perform PMP patient searches on behalf of a supervising practitioner who has prescribed or is contemplating the authorization of a prescription for the patient about whom information is requested. The delegate must log into <u>their</u> <u>own account</u> to perform the search and may not access the PMP using a practitioner's account to run the request.

Question: Can I have multiple delegates linked to my account?

Answer: **Yes**. A practitioner may supervise **up to 30** delegate healthcare professionals, who actively work with the practitioner, as registered delegates. They must register under the role of "Prescriber Delegate-Licensed" or "Pharmacist Delegate-Licensed" to obtain access to the PMP. A delegate shall be licensed, registered, certified, or otherwise credentialed as a healthcare professional in a manner that permits verification of the delegate's credentials. The practitioner shall be responsible for the PMP information accessed by their delegates.

Question: How do I approve or reject a delegate?

Answer: You can approve a delegate by logging into your lowa PMP AWARxE® account, click "Menu" > Select "Delegate Management." The Delegate Management page will display new delegates with a status of "Pending." Click the delegate's name to display their information on the detail card at the bottom of the page. Click the "Approve" button to approve the delegate. If you do not wish to approve a delegate request simply click "Reject."

Question: How do I remove a delegate?

Answer: In order to remove a delegate you had previously approved, log into your lowa PMP AWARxE® account > Click "Menu" > Select "Delegate Management" > Click the delegate's name to display their information > Click the "Remove" button. Upon removal, the delegate's status will be returned to "Pending." If you need to completely dissociate a delegate from your account, refresh your page then select the former delegate and click "Reject."

Question: Is there a way to see which patients a delegate searched for under my authorization?

Answer: **Yes**. Within the AWARxE® system, Click "Menu" then find "Requests History" under the RxSearch heading. In the Requests History page, the "Requestor" column will list the name of a delegate if the query was performed by someone other than yourself. The name of the patient that was searched will also be displayed.

Question: I have removed/disabled a delegate(s), can I still audit or view the searches they performed on my behalf?

Answer: **Yes**. Within the AWARxE® system, four years of data is available This history can be found by clicking "Menu" then find "Requests History" under the RxSearch heading. In the Requests History page, the "Requestor" column will list the name of a delegate if the query was performed by someone other than yourself. The name of the patient that was searched will also be displayed.

Question: I performed an audit on one of my delegate's PMP queries and discovered inappropriate searches. What do I do now?

Answer: Best practice would be to remove the delegate's access to the PMP under your authority and to report the inappropriate use of the PMP to the organization that licenses or credentials the delegate. (i.e. Board of Nursing, American Association of Medical Assistants, Board of Pharmacy, etc.)

Question: Does the PMP notify supervisors of excessive or improper searches by their delegates?

Answer: **No**. It is the responsibility of the supervising practitioner to ensure their delegated access is appropriate and being used appropriately. Remove your delegated access as necessary.

PRESCRIBER ACTIVITY REPORT (PAR) FAQs

Question: What is a Prescriber Activity Report?

Answer: A Prescriber Activity Report (PAR) is a quarterly snapshot of a practitioner's prescribing practices involving Schedule II-V medications over a six-month period. The report is sent to registered users who have written at least one controlled substance prescription during the prior six-month period. The PAR user guide can be found <u>here</u>.

Question: Why does the Board of Pharmacy's Prescription Monitoring Program (PMP) send out PARs?

Answer: Iowa Code requires the PMP to provide a PAR at least annually to any practitioner who prescribed a controlled substance in the preceding calendar year. The Prescriber Activity Report (PAR) is intended to give prescribers insight into their controlled substance prescribing patterns by supplying a summary of their prescribing along with a comparison to their practice specialty group peers.

Question: How will I receive the Prescriber Activity Report?

Answer: The Prescriber Activity Reports are viewable through the AWARxE platform only. To view your prescriber report, log into your Iowa PMP AWARxE account and navigate to Menu > RxSearch > Prescriber Report. The PAR user guide can be found <u>here</u>.

Question: How often will I receive a Prescriber Activity Report?

Answer: Approximately every three months.

Question: Is the Prescriber Activity Report confidential?

Answer: Yes. The information in the Prescriber Activity Report is confidential.

Question: What information is included in the Prescriber Activity Report?

Answer: Information in the Prescriber Activity Reports includes summary data regarding your prescribing of opioids, top medications prescribed by you, comparisons with healthcare specialty peer groups, PMP usage (patient queries) by you and your delegates, and various prescription and patient data for other controlled substances.

Question: Are prescriptions for Suboxone® included or excluded from the data in the Prescriber Activity Report?

Answer: Prescriptions for Suboxone® dispensed from a pharmacy or non-exempt treatment facility are included in the Prescriber Activity Reports.

Question: Who determined the healthcare specialty used in my Prescriber Activity Report?

Answer: The healthcare specialty was self-selected when you registered for a PMP AWARxE® account.

Question: What if I selected multiple healthcare specialties?

Answer: The Prescriber Activity Report will use only your primary healthcare specialty for peer comparisons.

Question: How do I change the Healthcare Specialty used in my Prescriber Activity Report?

Answer: You may update your Healthcare Specialty within your PMP AWARxE® account. Log in to the PMP AWARxE® website. Click on your name in the top right corner of the home screen. Select "My Profile" and update your Healthcare Specialty by searching in the search bar just below your demographics. Changes will be reflected in the next distribution of your Prescriber Activity Report. ****Be sure your specialty is selected from the correct provider type(e.g. an MD or DO should select under the header "Allopathic & Osteopathic Physicians" vs. an ARNP under the "Physician Assistants & Advanced Practice Nursing Providers").**

Question: How can I view a list of the prescriptions included in my Prescriber Activity Report?

Answer: Log in to the PMP AWARxE® website. Click "Menu" and then "MyRx" under RxSearch. Enter the applicable six-month date range, and select the DEA number associated with your Prescriber Activity Report. This will allow you to see a full list of prescriptions that were included within the report metrics.

Question: What if I believe there is an error on my MyRx prescription history?

Answer: Please contact the dispensing pharmacy directly and have them submit a correction. PMP administrators cannot change pharmacy records.

Question: What should I do if I suspect my DEA number is being used to forge prescriptions?

Answer: Please contact the dispensing pharmacy directly to verify. You should follow up with the appropriate law enforcement agency and the DEA. You can also fill out a DEA "Submit a Tip" at <u>https://www.dea.gov/submit-tip</u> if you discover forgeries have occurred.

Question: I have delegates conduct searches for all of my patients. Why are these searches not credited in my delegate search count?

Answer: If your delegate has multiple supervisors, it is likely they selected the wrong supervisor. When delegate users begin a patient search, they must select the requesting supervisor/prescriber from the dropdown menu at the top of the screen. This action will credit the selected prescriber with requesting that patient report. It is important to remind delegates to select the correct supervisor when conducting a PMP patient search.

Question: Can my Prescriber Activity Report be used against me?

Answer: No, The Prescriber Activity Report is not subject to discovery, subpoena, or other means of legal compulsion.

Question: Why is it referred to as a "quarterly report," when it appears to be utilizing six months of data?

Answer: The "quarterly report" refers to the time frame in which the reports are sent out, i.e., approximately every three months or quarterly.

PROACTIVE PATIENT ALERT (i.e. Threshold Report) FAQs

Question: What is a Proactive Patient Alert or Threshold Report?

Answer: A Proactive Patient Alert (Threshold Report) is a notification indicating that one or more of your patients has exceeded a set threshold and appears to be receiving multiple Schedule II-V prescriptions from multiple pharmacies and prescribers in a given time period. Iowa Code gives the Iowa Board of Pharmacy the authority to establish criteria for reporting information about a patient to practitioners involved with the prescriptions in question if the threshold criteria are met.

Question: What are the differences between a Prescriber Activity Report (PAR) and a Proactive Patient Alert (Threshold Report)?

Answer: A Prescriber Activity Report is intended to give prescribers insight into their controlled substance prescribing patterns and a comparison with their peers. Reports are provided approximately every three months to all registered PMP users with an active account, a defined role and specialty, who have written at least one controlled substance prescription during the prior six-month period. The data represented includes schedule II-V prescriptions reported to the state PMP during the report period.

A Proactive Patient Alert (Threshold Report) is sent to all prescribers and pharmacies who have prescribed or dispensed controlled substances to patients who meet certain thresholds. Proactive Patient Alerts (Threshold Reports) are disseminated to help ensure that prescribers are aware of the scope of controlled substance use by their patients, thus contributing to optimum patient care.

Question: Who determines the thresholds used to generate the Proactive Patient Alert (Threshold Report)?

Answer: The Iowa Board of Pharmacy, with input from the PMP Advisory Committee, determines the thresholds. The PMP Advisory Committee is comprised of five board-appointed healthcare professionals.

Question: What do I do if I receive a Proactive Patient Alert (Threshold Report)?

Answer: You are not obligated to take any action in response to the alert. You should use your professional judgment in determining any subsequent action.

Question: What if the patient listed on the Proactive Patient Alert (Threshold Report) is not my patient?

Answer: Data submitted to the PMP comes directly from the dispensing pharmacy. If you did not prescribe to the individual in question, log in to the PMP and perform a "MyRx" search. Identify the errant prescriptions attributed to your DEA number and contact the dispensing pharmacy directly. PMP administrators cannot change pharmacy records.

Question: Why should I have to perform a query once I receive a Proactive Patient Alert (Threshold Report)? Can't you just send the patient's prescription history to me?

Answer: The PMP limits patient information sent electronically due to privacy issues. Currently, the PMP does not have the functionality to run a query and save it in your PMP account for you to view.

Question: What if I want to inform the police regarding an individual after receiving a Proactive Patient Alert (Threshold Report)?

Answer: Proactive Patient Alerts (Threshold Reports) are not intended to get individuals in trouble. However, if you confirm fraudulent prescriptions were written or a patient is blatantly misusing the healthcare system, it is your decision on how you want to proceed. Proactive Patient Alerts (Threshold Reports) cannot be shared with law enforcement. Law enforcement can request PMP records, if warranted by an investigation, with a subpoena or court order.

Question: Can I unsubscribe from receiving Proactive Patient Alerts (Threshold Reports)?

Answer: Currently, there is no opting out of receipt of Proactive Patient Alerts (Threshold Reports). The legislature authorizes the Iowa PMP to send these alerts to prescribers and dispensers for their patients exhibiting questionable controlled substance activity to assist in informed determination of appropriate treatment. It is your choice on how to respond to Proactive Patient Alerts.

Click to submit a new FAQ to the Iowa PMP: <u>PMP@iowa.gov</u>