

Board of Veterinary Examiners,

Thank you for allowing me and the Board of Pharmacy Executive Administrator, Laura Carrillo, an opportunity to work with the Board of Veterinary Examiners during your July 7th board meeting to discuss the Prescription Drug Monitoring Program and how we can best assist you and your licensees.

The following represents a recap of what I took away from today's board meeting to assist the Board of Veterinary Examiners:

1) Prescription numbers are not part of the required fields in 17.30.200(b), therefore, when entering a prescription for submission to the PDMP a veterinarian can enter any non-duplicative Rx number they choose to identify this prescription. We have reached out to the vendor on your behalf and although the prescription number is not a state requirement, the vendor requires this number as a component of the process to ensure the prescription has not been previously submitted, i.e. duplicative data. One recommendation the vendor made is to use a YYYYMMDD# format. This allows any submitter to track historical submissions should there be a need to review the submission. Ex: 202007081, 202007082, 202007083 would show three prescriptions submitted on 7/8/2020. Again, the format and number is completely up to the veterinarian so long as they are not duplicated.

2) We have also reached out to the vendor to answer your questions about control substance compounds. When entering a compound in the database, click the "compound" box next to the NDC number field. This will open further fields to include the NDC number and quantity for each control substance included in the compounded medication.

3) AAG Harriet Milks answered the Board's question/concern about HIPAA and indicated that veterinarians are not covered entities, and thus performing an owner / client search does not represent any conflict with the Health Insurance Portability and Accountability Act (HIPAA).

4) The Board of Veterinary Examiners felt that disciplinary action around failing to register for the PDMP seemed straight forward. However, there was concern around actions associated with reviewing PDMP failures. AAG Harriet Milks advised that the Department of Law could work with the Board of Veterinary Examiners on the creation of an accountability matrix, similar to the Board of Pharmacy, but that investigations would continue.

5) The Board of Veterinary Examiners can communicate with their licensees about guidance they have received over time to educate them on PDMP matters; it does not have to wait until a regulation is passed. The Board of Pharmacy has successfully used guidance statements, listserv emails, PDMP emails, and physical mailings to communicate important information to keep licensees up to date and may be a consideration to help get information to licensees.

6) Having a veterinarian include a maximum daily dose or days' supply on prescriptions going to pharmacies would greatly improve communication and intent of how long a prescription should last.

My professional recommendation to the Board of Veterinary Examiners, to assist your licensees in complying with AS 17.30.200, is to draft a guidance document with pertinent, up to date information that the board has obtained from various stakeholders to address immediate concerns, including, but not limited to:

a. **Reviewing** the PDPM:

i. A veterinarian should search **the client** in the PDMP and searching a client in the PDMP is not a HIPAA violation. This is the "who" veterinarians should be reviewing in the PDMP and thus is critical for your licensees to know. I would recommend the board further establish in detail this component in your regulations.

1. Client=owner on record?
2. Client=the person bringing the animal in to be seen?

3. Client=if more than 1 person bringing the animal in, all adults bringing the animal in?
4. These are the details that your board will need to clearly clarify for your licensees.
 - ii. is limited to federally classified Schedule II and III control substance only, therefore, tramadol and phenobarbital do not require a PDMP review.
 - iii. veterinarians are not required to review or interpret NarxCare scores; it is a clinical tool only.
- b. **Registering** with the PDMP is mandatory if the licensee possesses a DEA registration number.
- c. **Submitting** data to the PDMP:
 - i. Prescription numbers can be any non-duplicated number the veterinarian chooses to use to identify that prescription.
 - ii. Use the "*compound*" checkbox when entering compounded control substances into Appriss for submission to the PDMP.
- d. Writing prescriptions:
 - i. It greatly assists pharmacists to have more information in the sig that relates to days' supply; i.e. include a max daily dose or an intention that it lasts a certain length of time. The national standard in determining a days' supply of any prescription is calculated from the quantity of drug taken and its frequency relative to the quantity dispensed.
Example:
Drug A 10mg
SIG: 1cc po q4h prn
DISP: 30cc

National Standard Days Supply Calculation: $1\text{cc} \times 6 \text{ times a day} = 6\text{cc per day}$
 $30\text{cc} / 6\text{cc per day} = 5\text{-day supply}$
- e. Disciplinary Matrix:
 - i. There is never the ability to reach and maintain 100% compliance. Therefore, I would recommend the creation of a disciplinary matrix for a consistent and fair approach to non-compliance situations. This is the approach that the Board of Pharmacy and other impacted professionals have taken.

To help you consider ways of communicating information to your licensees I would recommend the following resources, that I have found successful within the board of pharmacy, including:

- **PDMP notifications:** Laura can isolate just veterinarians to receive any communication related to the PDMP you wish to disseminate. The downside is the notification is only sent to registered PDMP users.
- **Listserv emails:** If the Board of Veterinary Examiners has a listserv it's a useful means to also rapidly communicate information. The downside is the email is only sent to someone who has registered with the listserv.
- **Hard copy mailings:** very effective as it's physically mailed to every licensee.
- **Hybrid of any/all of the above:** employ every communication method at your disposal. Using this approach means the board has used every tool they possibly can and it's now up to the licensee to ensure they remain compliant with statutes and regulations.

I have drafted a mock letter below to possibly assist you in formulating a communication for the Board of Veterinary Examiners to your licensees. You are under no obligation to use this and I only provide it to assist your board in thinking of ways to communicate with your licensees that I have found effective in my experience.

In addition, a board member inquired it that it would be helpful to understand where the licensee non-compliance exists. Therefore, I am including your license registration and reviewing non-compliance rates below with a caveat to remember it relates to registration.

PDMP Registration (as of 7/8/20)

Number of Licensed Veterinarians: 422

Number of Veterinarians Registered w/ PDMP: 277

% Compliance: 65.6%

% Non-Compliance: 34.4%

Note: Not all veterinarians hold a federal DEA registration number. Therefore, it is likely the compliance rate is higher, but it's unknown exactly how much higher at this point because the state licensing system does not account for federal DEA numbers.

PDMP Registration Trend:

2017: 217 registrations

2018: 18 registrations

2019: 15 registrations

Jan 2020 – Present: 17 registrations

Reviewing PDMP (as of 7/8/20)

Between January 2020 and June 2020, PDMP reviewing compliance is 7.5%

Miscellaneous PDMP Data since January 2020:

To give your board an idea on trends, if you use January 2020 as a baseline, veterinarian

- Logins to the PDMP database has decreased 85% and
- Reviewing the PDMP has decreased by 200%

Similarly, a board member inquired as to the mechanism to the reviewing compliance of the PDMP. To answer that question, the PDMP database does contain an analytics module that provides reviewing compliance whereby a report can be queried and filtered by user role or specific DEA number.

If a veterinarian writes a prescription for a schedule II or III controlled substance which is then filled at a pharmacy, the system will query that filled prescription, via the pharmacy submitted practitioner DEA number, to validate whether there was a PDMP review.

- Thus, it is possible to see “x” number of schedule II and III controlled substance prescriptions submitted by a pharmacy (which includes the DEA number of the prescriber) and “y” number of these submitted prescriptions reviewed by the practitioner in advance.
- The report is capable of being filtered to remove exceptions which did not require a review, i.e. prescriptions < 3 days' supply and prescriptions with “O” refills.

I hope this information has been helpful to your board. I would like to thank you for your time as a board to include us in your discussions so we can work through any questions or situations as they arise in order for you to get timely information to your licensees. We appreciate your partnership as a valuable stakeholder. I hope the data and communication example assists your board and licensees.

Professionally,

Richard Holt, BS Pharm, PharmD, MBA
Chair, Board of Pharmacy

Reviewing PDMP Data

[Required for Practitioners Only]

You are prescribing, administering or directly dispensing a **federally scheduled II or III controlled substance**.

NOTE: Federally Scheduled IV or V Controlled Substances are **excluded** from a PDMP review requirement.

Are you dispensing, prescribing, or administering:

(A) a controlled substance to a person who is receiving treatment

(i) in an inpatient setting;

(ii) at the scene of an emergency or in an ambulance; ambulance has the meaning given in AS 18.08.200;

(iii) in an emergency room;

(iv) immediately before, during or within the first 48-hours after surgery or a medical procedure; or

(v) in a hospice or nursing home that has an in-house pharmacist; or

(B) a nonrefillable prescription of a controlled substance in a quantity intended to last for not more than 3 days?

Yes

You are **NOT** required to review the PDMP.

No

You **ARE** required to review the PDMP.

Notes for Veterinary Examiners:

- From a reviewing data perspective, legal review by the Department of Law has indicated your “patient” is not defined in statute. It is reasonable to assume it is the person responsible for the animal who is in front of you today; the Board may want to consider establishing a definition in the Board of Veterinary Examiner regulations.
- It is **not** a violation of the Health Insurance Portability and Accountability Act (HIPAA) to review the responsible person.
- There is **no** impact on the file of the person you reviewed based on what you are submitting into the database of the animal. You would **never** submit data to the PDMP with the responsible persons name and date-of-birth, only the animal. Because animal data and human data are separate profiles, these prescriptions will not be comingled if reported accordingly.
- The clinical tools that are built into the PDMP to assist practitioners in **interpreting** data (clinical alerts, NarxCare, etc) are **not** required to be analyzed or interpreted by a Veterinary Examiner, or any other practitioner. There are no requirements in 17.30.200 to use any additional clinical tools built into the PDMP.
 - The requirement is only to “review the information in the database to check a patient’s prescription record¹”.
 - Reviewing prescription history of the owner satisfies the query mandate in AS 17.30.200(k).

¹ Board of Pharmacy Statutes and Regulations, 17.30.200(k)(4). Accessed June 24, 2020 [Internet], page 59. Available from: <https://www.commerce.alaska.gov/web/portals/5/pub/PharmacyStatutes.pdf>



PDMP TEMPLATE FOR VET AND PHA RX SUBMISSIONS

(CAN BE USED AS A REFERENCE FOR CHECKING OWNER RX HISTORY)

PART I. PATIENT

PART II. PHARMACY

PART III. PRESCRIBER

PART IV. PRESCRIPTION

PART IV. DRUG

PART IV. PHARMACIST

PART IV. OTHER (DISPENSATION SURROGATES)

August 2, 2018

BOARD MEMBER NAME: _____

DATE: _____

PART I. PATIENT

Manual Submission Form

Patient

Patient Type: <input type="radio"/> Human <input checked="" type="radio"/> Animal	Animal Name* <input type="text"/>	
First Name* <input type="text"/>	Address* <input type="text"/>	ID Type <input type="text"/>
Middle Name <input type="text"/>	Address Line 2 <input type="text"/>	ID Number <input type="text"/>
Last Name* <input type="text"/>	City* <input type="text"/>	Patient Location <input type="text"/>
DOB* <input type="text" value="mm/dd/yyyy"/>	State* <input type="text" value="Select State"/>	Phone Number <input type="text"/>
Gender* <input type="text" value="Unknown"/>	Postal Code* <input type="text"/>	

NOTES:

PART II. PHARMACY

Pharmacy

Pharmacy Name*	<input type="text"/>	Pharmacy DEA #*	<input type="text"/> <input type="button" value="Q"/>
Address*	<input type="text"/>	Pharmacy NPI #	<input type="text"/> <input type="button" value="Q"/>
Address Line 2	<input type="text"/>	Pharmacy NCPDP #	<input type="text"/> <input type="button" value="Q"/>
City*	<input type="text"/>	Pharmacy Chain Site ID	<input type="text"/>
State*	<input type="text" value="Select State"/> <input type="button" value="v"/>	Permit Number	<input type="text"/>
Postal Code*	<input type="text"/>	Contact Name	<input type="text"/>
		Contact Phone	<input type="text"/>

NOTES:

PART III. PRESCRIBER

Prescriber

First Name*	Address One	Prescriber DEA #*
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="button" value="Q"/>
Middle Name	Address Two	Prescriber XDEA #
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name*	City	DEA Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number	State	Prescriber NPI #
<input type="text"/>	Select State <input type="button" value="v"/>	<input type="text"/> <input type="button" value="Q"/>
	Postal Code	State License #
	<input type="text"/>	<input type="text"/>

NOTES:

PART IV. PRESCRIPTION

Prescription		
Prescription Number* <input type="text"/>	Electronic Rx Order # <input type="text"/>	Payment Type* <input type="text"/>
Fill Date* <input type="text" value="mm/dd/yyyy"/>	Electronic Rx Reference # <input type="text"/>	Date Sold <input type="text" value="mm/dd/yyyy"/>
Written Date* <input type="text" value="mm/dd/yyyy"/>	RxNorm Code Type <input type="text"/>	Rx Transmission Form <input type="text"/>
Refills* <input type="text"/>	RxNorm Code <input type="text"/>	Directions <input type="text"/>
Authorized Refills* <input type="text"/>	Rx Serial # <input type="text"/>	Treatment Type <input type="text"/>
Days Supply* <input type="text"/>	Rx Serial # Issuer <input type="text"/>	Diagnosis Code (ICD-10) <input type="text"/>
Partial Fill <input type="text"/>	Quantity Prescribed <input type="text"/>	

NOTES:

PART V. DRUG

Drug		
NDC Number*	Quantity*	Units*
<input type="text"/>	<input type="text"/>	<input type="text"/>

NOTES:

PART VI. PHARMACIST

- Pharmacist	
First Name <input type="text"/>	Prescriber NPI # <input type="text"/>
Middle Name <input type="text"/>	State License # <input type="text"/>
Last Name <input type="text"/>	

NOTES:

PART VII. OTHER

Other (Dispensation Surrogates)

First Name

Patient Relationship

Middle Name

Drop-off/Pick-up Type

Last Name

Drop-off/Pick-up ID #

NOTES:



PDMP TEMPLATE FOR VET AND PHA RX SUBMISSIONS

This document is being provided to assist the Board of Veterinary Examiners in establishing reporting criteria and to inform reviewing standards.

PART I. PATIENT

PART II. PHARMACY

PART III. PRESCRIBER

PART IV. PRESCRIPTION

PART IV. DRUG

PART IV. PHARMACIST

PART IV. PICK-UP/DROP-OFF PERSON

BOARD MEMBER NAME: _____

DATE: _____

PART III. PRESCRIBER

Prescriber

First Name PRE06*	Address One	Prescriber DEA # PRE02
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="button" value="Q"/>
Middle Name PRE07	Address Two	Prescriber XDEA # PRE09
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name PRE05*	City	DEA Suffix PRE03
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number PRE08	State	Prescriber NPI # PRE01
<input type="text"/>	Select State <input type="button" value="v"/>	<input type="text"/> <input type="button" value="Q"/>
	Postal Code	State License # PRE04
	<input type="text"/>	<input type="text"/>

NOTES: _____

PART IV. PRESCRIPTION

Prescription

Prescription Number DSP02* <input type="text"/>	Electronic Rx Order # DSP21 <input type="text"/>	Payment Type DSP16* <input type="text" value="v"/>
Fill Date DSP05* <input type="text" value="mm/dd/yyyy"/>	Electronic Rx Reference # DSP20 <input type="text"/>	Date Sold DSP17 <input type="text" value="mm/dd/yyyy"/>
Written Date DSP03* <input type="text" value="mm/dd/yyyy"/>	RxNorm Code Type DSP18 <input type="text" value="v"/>	Rx Transmission Form DSP12 <input type="text" value="v"/>
Refill # DSP06* <input type="text"/>	RxNorm Code DSP19 <input type="text"/>	Directions DSP23 <input type="text"/>
Authorized Refills DSP04* <input type="text"/>	Rx Serial # AIR02 <input type="text"/>	Treatment Type DSP24 <input type="text" value="v"/>
Days Supply DSP10* <input type="text"/>	Rx Serial # Issuer AIR01 <input type="text" value="v"/>	Diagnosis Code (ICD-10) DSP25 <input type="text"/>
Partial Fill DSP13 <input type="text" value="v"/>	Quantity Prescribed DSP22 <input type="text"/>	

NOTES: _____

PART V. DRUG

Drug			
NDC Number DSP08/CDI03*	<input type="checkbox"/> Compound	Quantity DSP09/CDI04*	Units DSP11/CDI05
<input type="text"/>		<input type="text"/>	<input type="text" value="v"/>

NOTES: _____

PART VI. PHARMACIST

Pharmacist	
First Name AIR10 <input type="text"/>	Pharmacist NPI # DSP14 <input type="text"/>
Middle Name <input type="text"/>	State License # DSP15 <input type="text"/>
Last Name AIR09 <input type="text"/>	

NOTES: _____

PART VII. Pick-up/Drop-Off Person

– Pick-up/Drop-Off Person

First Name AIR08 <input type="text"/>	Patient Relationship AIR06 <input type="text" value="v"/>
Middle Name <input type="text"/>	Drop-off/Pick-up Type AIR04 <input type="text" value="v"/>
Last Name AIR07 <input type="text"/>	Drop-off/Pick-up ID # AIR05 <input type="text"/>
	ID Jurisdiction AIR03 <input type="text" value="v"/>

NOTES: _____



PDMP TEMPLATE FOR VET AND PHA RX SUBMISSIONS

(CAN BE USED AS A REFERENCE FOR CHECKING OWNER RX HISTORY)

PART I. PATIENT

PART II. PHARMACY

PART III. PRESCRIBER

PART IV. PRESCRIPTION

PART IV. DRUG

PART IV. PHARMACIST

PART IV. OTHER (DISPENSATION SURROGATES)

April 4, 2019

BOARD MEMBER NAME: _____

DATE: _____

PART I. PATIENT

Manual Submission Form

Patient

Patient Type: <input type="radio"/> Human <input checked="" type="radio"/> Animal	Animal Name* <input type="text"/>	
First Name* <input type="text"/>	Address* <input type="text"/>	ID Type <input type="text"/>
Middle Name <input type="text"/>	Address Line 2 <input type="text"/>	ID Number <input type="text"/>
Last Name* <input type="text"/>	City* <input type="text"/>	Patient Location <input type="text"/>
DOB* <input type="text" value="mm/dd/yyyy"/>	State* <input type="text" value="Select State"/>	Phone Number <input type="text"/>
Gender* <input type="text" value="Unknown"/>	Postal Code* <input type="text"/>	

NOTES:

PART II. PHARMACY

Pharmacy

Pharmacy Name*	<input type="text"/>	Pharmacy DEA #*	<input type="text"/> <input type="button" value="Q"/>
Address*	<input type="text"/>	Pharmacy NPI #	<input type="text"/> <input type="button" value="Q"/>
Address Line 2	<input type="text"/>	Pharmacy NCPDP #	<input type="text"/> <input type="button" value="Q"/>
City*	<input type="text"/>	Pharmacy Chain Site ID	<input type="text"/>
State*	<input type="text" value="Select State"/> <input type="button" value="v"/>	Permit Number	<input type="text"/>
Postal Code*	<input type="text"/>	Contact Name	<input type="text"/>
		Contact Phone	<input type="text"/>

NOTES:

PART III. PRESCRIBER

Prescriber		
First Name* <input type="text"/>	Address One <input type="text"/>	Prescriber DEA #* <input type="text"/> <input type="button" value="Q"/>
Middle Name <input type="text"/>	Address Two <input type="text"/>	Prescriber XDEA # <input type="text"/>
Last Name* <input type="text"/>	City <input type="text"/>	DEA Suffix <input type="text"/>
Phone Number <input type="text"/>	State Select State <input type="button" value="v"/>	Prescriber NPI # <input type="text"/> <input type="button" value="Q"/>
	Postal Code <input type="text"/>	State License # <input type="text"/>

NOTES:

PART IV. PRESCRIPTION

Prescription		
Prescription Number* <input type="text"/>	Electronic Rx Order # <input type="text"/>	Payment Type* <input type="text"/>
Fill Date* <input type="text" value="mm/dd/yyyy"/>	Electronic Rx Reference # <input type="text"/>	Date Sold <input type="text" value="mm/dd/yyyy"/>
Written Date* <input type="text" value="mm/dd/yyyy"/>	RxNorm Code Type <input type="text"/>	Rx Transmission Form <input type="text"/>
Refills* <input type="text"/>	RxNorm Code <input type="text"/>	Directions <input type="text"/>
Authorized Refills* <input type="text"/>	Rx Serial # <input type="text"/>	Treatment Type <input type="text"/>
Days Supply* <input type="text"/>	Rx Serial # Issuer <input type="text"/>	Diagnosis Code (ICD-10) <input type="text"/>
Partial Fill <input type="text"/>	Quantity Prescribed <input type="text"/>	

NOTES:

PART V. DRUG

Drug		
NDC Number*	Quantity*	Units*
<input type="text"/>	<input type="text"/>	<input type="text"/>

NOTES:

PART VI. PHARMACIST

- Pharmacist	
First Name <input type="text"/>	Prescriber NPI # <input type="text"/>
Middle Name <input type="text"/>	State License # <input type="text"/>
Last Name <input type="text"/>	

NOTES:

PART VII. OTHER

Other (Dispensation Surrogates)

First Name

Patient Relationship

Middle Name

Drop-off/Pick-up Type

Last Name

Drop-off/Pick-up ID #

NOTES:

Veterinary Prescription Reporting Requirements (Addendum to Data Submission Dispenser Guide)

To ensure veterinary prescriptions are being reported consistently across providers, pharmacies and direct dispensing veterinarians must follow these reporting standards **beginning July 1st, 2021**:

Element ID	Description	Must Report As
PAT07	Patient's last name	Animal client's last name (owner)
PAT08	Patient's first name	Client's first name
PAT12	Patient's address	Client's address
PAT20	Species	02 = animal prescription
PAT23	Name of Animal	Animal's first name and client's last name

If the pharmacy is dispensing the controlled substance according to a veterinary prescription order, there may be additional details including the type of animal, e.g.: canine. This is acceptable; however, there is no requirement to report the animal type. There is also no requirement to retroactively correct your data submission. If your existing reporting differs from these standards, please contact laura.carrillo@alaska.gov.

PDMP FAQs for Veterinarians

Q. What are the registration, reviewing, and reporting requirements for veterinarians?

A.

- All veterinarians with active Alaska professional licenses and Drug Enforcement Administration (DEA) authority to prescribe controlled substances **must register** with the PDMP as required by AS 17.30.200(o) and AS 08.98.050(a)(10).
- All veterinarians prescribing a federally scheduled II or III controlled substance **must review** the owner's prescription history prior to prescribing, directly dispensing, or administering the medication. Reviewing is not required if the prescription is intended to not last more than 3 days per AS 17.30.200(k)(4).
- All veterinarians directly dispensing a federally scheduled II – IV controlled substances for a supply intended to last more than 3 days **must report** the prescription data daily per AS 17.30.200(u).

Q. Can I prescribe controlled substances beyond a 3-day supply without being registered?

A. No, it is against the law to prescribe without registering and using the database.

Q. I am not trained to assess or treat human conditions. If I review an owner's prescription history, am I practicing outside of my scope. Am I violating HIPAA?

A. In a legal opinion provided to the Board of Veterinary Examiners in 2018, veterinarians query the owner and not the animal because only the human has the potential to abuse, misuse, or divert the controlled substance prescription. Reviewing the owner does not mean treatment of the owner. The PDMP is not a covered entity, so is not required to comply with HIPAA.

Q. Are veterinarians required to interpret overdose risk scores "NarxScore" provided within the NarxCare report?

A. No. Mandatory review (entry of an individual's first, last name, and date of birth into the PDMP) went into effect in July 2017 and is the only requirement with regards to reviewing prescription information. There is no statutory requirement to interpret overdose risk scores, but these can be referenced at a veterinarian's discretion, and if there are additional indicators noticed that call into question the safety and risk of providing the medication, such as during a veterinarian's assessment for signs of animal abuse.

NarxCare was integrated into the PDMP in September 2019 as an enhancement feature to display a visual snapshot of an individual's overdose risk score. This 2019 update did not replace the original 2017 legislation, and there has been no statutory change requiring use of visual analytics enhancements.

Q. Are NarxScores influenced by animal prescription data?

A. No. Human profiles are separate from animal profiles. If NarxScores (for humans) are changing as a result of animal prescription data, reporting is not being done correctly. Please review the data dispensation submission guide for additional information, and reach out to your licensing board for specific reporting standards.