E-prescribing Controlled Substances

Introduction
The days of maintaining a separate paper process for controlled substance prescriptions are coming to an end. In March 2010, DEA issued an interim final rule with request for comment, “Electronic Prescriptions for Controlled Substances.” The rule is available online at http://www.deadiversion.usdoj.gov/fed_regs/rules/2010/fr0331.pdf. The tentative date that it will go into effect is June 1, 2010. This rule will finalize the proposed rule on e-prescribing controlled substances that was released in June of 2008. It will give prescribers the option of issuing electronic prescriptions for controlled substances, schedule II through V, and will also allow pharmacists to receive, dispense, and archive electronic prescriptions for controlled substances.1,2 These new rules focus on the creation and electronic transmission of scheduled prescriptions only. Existing rules pertaining to the dispensing of prescription for controlled substances have not changed. This document reviews basic information for getting started with e-prescribing controlled drugs, with answers to some miscellaneous questions, and resources that can provide you with more information.

Getting Started
If you are not currently e-prescribing and want to get set up to do so, there’s a nice resource at http://www.ehealthinitiative.org/sites/default/files/e-Prescribing_Clinicians_Guide_Final(1).pdf, A Clinician’s Guide to Electronic Prescribing. We also have general information about e-prescribing in our document, E-Prescribing Update.

If you are currently e-prescribing, here’s a summary of the steps you’ll need to take before you can use e-prescribing for controlled substances.

For Prescribers:1,3
• Your electronic prescription application or electronic health record application (software) will need to comply with DEA’s requirements. Your software vendor will need to make sure this is the case, and issue a report to you saying your software is compliant.
• You will need two forms of identification (i.e., a two-factor authentication) to sign e-prescriptions for controlled substances. This will provide extra security, to prevent hacking and unauthorized use. This two-factor authentication must include two out of three of the following: something you have, like a USB key; something you know, like a PIN or password; or a physiologic identifier (e.g., a fingerprint). You can get this two-factor authentication from certain federally approved credential service providers or certification authorities. You may also be able to get it from internal credentialing authorities at your institution. At this point only your identity and not your DEA registration will be verified.
• You will need to be able to access your software with your two-factor authentication so that you can sign prescriptions for controlled substances. The first time you use your two-factor authentication, two individuals within your practice will need to give you access to the system. One of these people must be a DEA registrant, using his or her two-factor authentication. This is when your DEA registration will be verified.

For Pharmacists:1,3
• Your software will need to be compliant with the DEA’s new requirements. Your software vendor will need to make sure this is the case, and issue a report to you saying your software is compliant.

Miscellaneous Q&A
There’s an excellent question and answer document from the DEA which contains more specific information about compliance of software, the logistics of issuing and filling

More . . .
e-prescriptions for controlled substances, and record keeping available at http://www.deadiversion.usdoj.gov/ecomme RXR/xfaq/faq.htm. Following are a few questions that are not currently included in the DEA’s Q&A.

Will it still be possible for prescribers to write multiple C-II Rxs on the same day for the same patient? Yes. One of the requirements of the software is that it must accommodate DEA requirements for paper prescriptions, such as “do not fill” instructions when multiple C-II Rxs are issued.2

Are there states that will need to change their laws in order for e-prescribing of controlled substances to be legal? E-prescribing of controlled substances is not addressed in a number of states’ laws. In other states, statutes or regulations contain language that may prohibit the e-prescribing of controlled substances to some extent. This might be because prescriptions for some or all scheduled drugs must be handwritten. Or, e-prescribing might be explicitly prohibited for some or all controlled substances. However, it’s expected that states will change their laws to allow e-prescribing of controlled drugs.

More information about statutory and regulatory codes in your state that affect e-prescribing of controlled substances is available at http://healthit.hhs.gov/portal/server.pt/gateway/PTARGS_0_10741_910264_0_0_18/AppA.pdf. Of course, this information is subject to change. Call your state board of pharmacy or state medical board for the most up-to-date information. Your application provider may also be able to give you current information about the legality of e-prescribing controlled substances in your state.

Are there financial incentives from Medicare for using e-prescribing for controlled drugs?

There are currently financial incentives for prescribers who use electronic prescribing. There’s more information about these incentives on the Centers for Medicaid and Medicare Services (CMS) website at http://www.cms.gov/ERXincentive/01_overview.asp. In 2012, CMS will start penalizing prescribers who are not e-prescribing.

Users of this document are cautioned to use their own professional judgment and consult any other necessary or appropriate sources prior to making clinical judgments based on the content of this document. Our editors have researched the information with input from experts, government agencies, and national organizations. Information and Internet links in this article were current as of the date of publication.

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References