



Florida's Prescription Drug Monitoring Program

Implementation of Florida's PDMP

Rebecca Poston
Program Manager



EFORCSE

Electronic-Florida
Online Reporting of
Controlled Substances
Evaluation



Disclaimer

I have no relevant financial relationships or commercial interest in the content presented in this program.



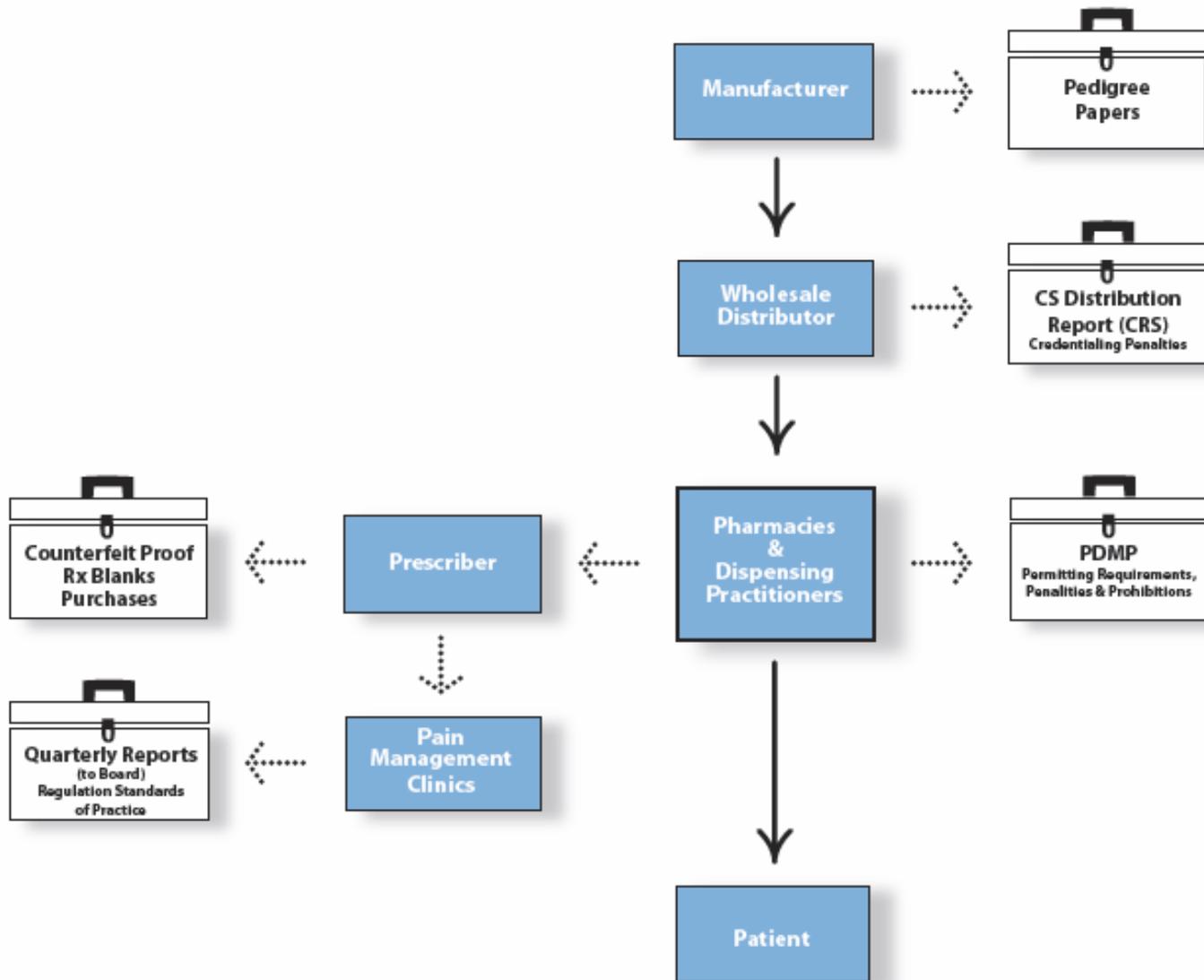


Learning Objectives:

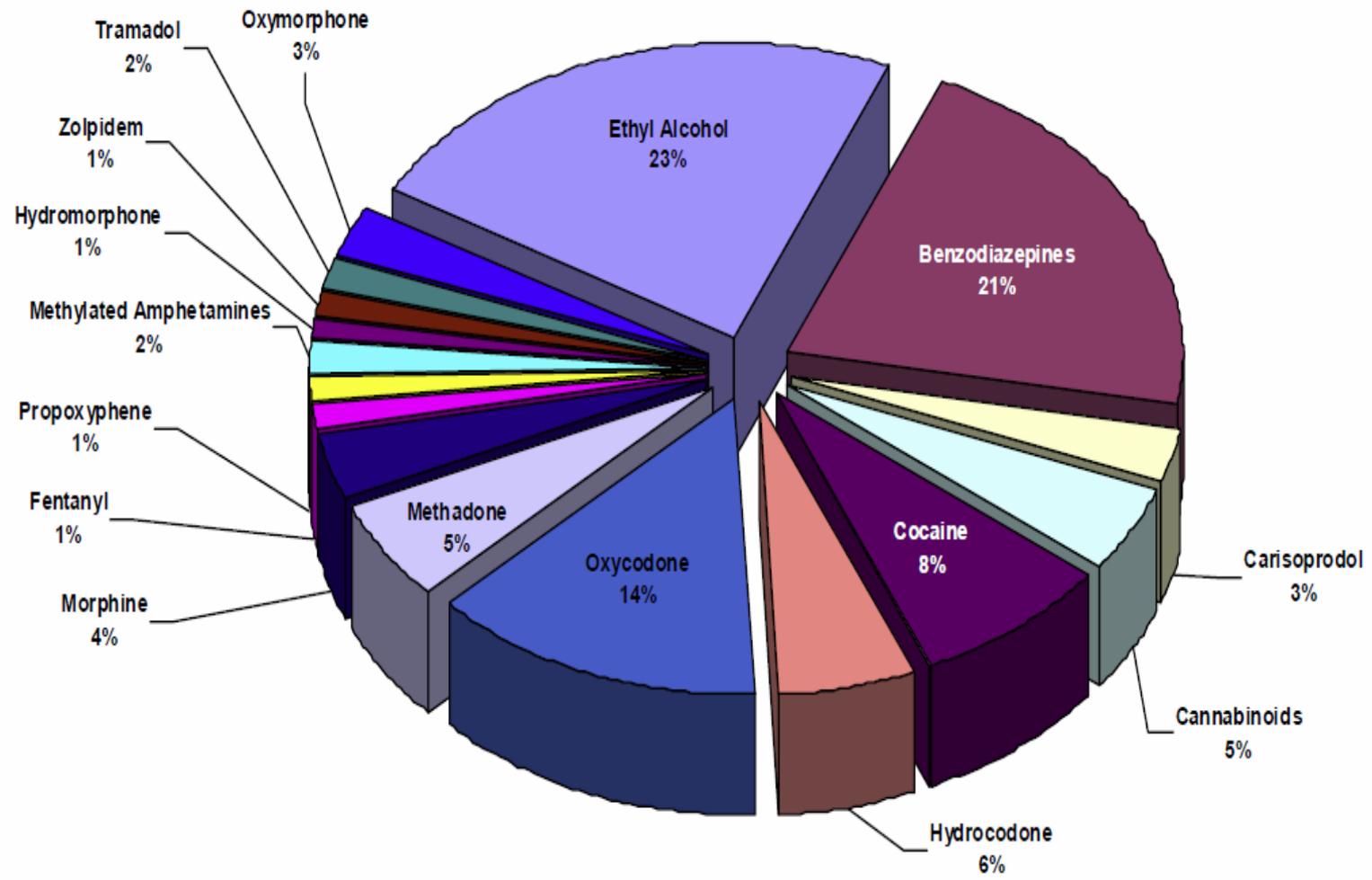
- Provide overview of Florida's Prescription Drug Monitoring Program regulations
- Discuss data reporting requirements
- Demonstrate practitioner/pharmacist registration
- Demonstrate Pharmacist/Practitioner Query for Patient Advisory Report
- Discuss performance measures and outcomes



FLORIDA'S DRUG DISTRIBUTION SYSTEM TOOLBOX



Frequency of Occurrence of Drugs in Decedents January - December 2010





Background:

The purpose of the PDMP is to provide the information collected in the database to health care practitioners to guide their decisions in prescribing and dispensing these highly-abused prescription drugs.





Definitions:

- Section 893.055(1), F.S.:
 - A “dispenser” means a pharmacy, a dispensing pharmacist, or a dispensing health care practitioner.
 - A “health care practitioner” means any practitioner who is subject to licensure or regulation by the department under chapters 458, 459, 461, 462, 464, 465, or 466, F.S.





Definitions (cont.):

- Section 893.02(1), F.S.:
 - “Administer” means the direct application of a controlled substance, whether by injection, inhalation, ingestion, or any other means, to the body of a person or animal.





Reporting Requirements:

- Beginning September 1, 2011, ALL dispensers of scheduled controlled substance prescriptions in schedules II, III, & IV began to report weekly
- The PDMP program requested that dispensers report retroactive data, from December 1, 2010 to August 31, 2011.





Reporting Requirements (cont.):

The following information must be reported for each controlled substance dispensed to a patient:

- Patient Info:
 - Demographics
 - Date of Birth
 - Gender
- Prescriber Info:
 - Demographics
 - NPI number
 - DEA Number
 - License Number





Reporting Requirements (cont.):

- Dispensing Info:
 - Dispenser's DEA number
 - Rx Number
 - Date written, date filled
 - Refill number (if applicable)
 - NDC
 - Quantity/Strength Dispensed
 - Payment Type





Exemptions:

- When **administering** a controlled substance directly to a patient if the amount is adequate to treat the patient during that particular treatment session
- When **administering** a controlled substance dispensed to a patient receiving care in a
 - Hospital
 - Nursing home
 - Ambulatory Surgical Center
 - Hospice
 - Intermediate care facility for the developmentally disabled





Exemptions (cont.):

- When a controlled substance is **administered** or **dispensed** in the health care system of the Department of Corrections
- When **administering** a controlled substance directly to the patient during treatment or in the emergency room of a hospital





Exemptions (cont.):

- When a controlled substance **administered or dispensed** to a patient under the age of 16 years old
- When **dispensing** of a one-time 72 hour emergency resupply of a controlled substance to a patient





Zero Reports:

- If a dispenser usually dispenses controlled substances in Florida but has no dispensing transactions to report for the preceding seven (7) day period, the dispenser must report this information to E-FORCSE by filing a zero report.





Waivers & Exemptions:

- Exemption from Reporting – if a dispenser is registered as a “dispensing practitioner” in the state of Florida, but does not dispense controlled substances.
- Waiver from Electronic Reporting - if a dispenser is unable to report to the FL RxSentry database electronically.





Penalty for Non-Compliance:

- A health care practitioner who willfully and knowingly fails to report the dispensing of a controlled substance as required by section 893.055, F.S., commits a **first degree misdemeanor**.





Dispenser's Implementation Guide:



Dispenser's Implementation Guide Version 1.6

Florida Department of Health
Prescription Drug Monitoring Program



August 2011

Note
This document may be updated prior to the implementation of E-FORCSE on September 1, 2011. Please refer to the Florida PDMP website, <http://www.hidinc.com/flodmp> for the most current version of this document.

This project was supported by Grant No. 2009-PH-BX-4004 awarded by the Bureau of Justice Assistance, Office of Justice Programs, U.S. Department of Justice.

This document is formatted for duplex printing.

- Reporting requirements
- Submission methods
- Creating an upload account
- Creating a data file
- Reporting data
- Errors & Definitions





Accessing the Database:

- Section 893.055(7)(b), F.S.:
 - A pharmacy, prescriber, or dispenser shall have access to information in the prescription drug monitoring program's database which relates to a patient of that pharmacy, prescriber, or dispenser for the purpose of reviewing the patient's controlled substance prescription history.





Patient Advisory Reports (PARs):

- Section 893.055(1)(a):
 - “information provided by the department in writing, or as determined by the department, to a prescriber, dispenser, pharmacy, or patient concerning the dispensing of controlled substances.”
 - Provided for informational purposes only and impose no obligations of any nature or any legal duty on a prescriber, dispenser, pharmacy, or patient.
 - Not subject to discovery or introduction into evidence in any civil or administrative action.





Patient Advisory Reports (PARs):

- Section 893.055(2)(a), F.S.:
 - Requires DOH to provide prescription information to a patient's health care practitioner and pharmacist who inform the department that they wish the PAR provided to them.
 - The system shall be designed to provide information regarding dispensed prescriptions of controlled substances and shall not infringe upon the legitimate prescribing or dispensing of a controlled substance by a prescriber or dispenser acting in good faith and in the course of professional practice.





<http://www.hidinc.com/flpdmp>

FL RxSentry

[RxSentry Practitioner's Site](#)

[RxSentry Practitioner's Training Guide](#)

[RxSentry Practitioner Forms](#)

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Florida Prescription Drug Monitoring Program

Welcome to E-FORCSE, the State of Florida's Prescription Drug Monitoring Program!

The Electronic - Florida Online Reporting of Controlled Substances Evaluation program (E-FORCSE) is Florida's Prescription Drug Monitoring Program (PDMP). The PDMP was created by the 2009 legislature in an initiative to encourage safer prescribing of controlled substances and to reduce drug abuse and diversion within the state of Florida.



E-FORCSE has selected Health Information Designs, Inc., to develop a database that will collect and store prescribing and dispensing data for controlled substances in Schedules II, III, and IV. The purpose of the PDMP is to provide the information that will be collected in the database to health care practitioners to guide their decisions in prescribing and dispensing these highly-abused prescription drugs.

Section 893.055, Florida Statutes, requires health care practitioners to report to the PDMP each time a controlled substance is dispensed to an individual. This information is to be reported through the electronic system as soon as possible but not more than 7 days after dispensing. This reporting timeframe ensures that health care practitioners have the most up-to-date information available.

E-FORCSE will comply with the Health Insurance Portability and Accountability Act (HIPAA) as it pertains to protected health information (PHI), electronic protected health information (EPHI), and all other relevant state and federal privacy and security laws and regulations. The information collected in the system will be used by the PDMP to encourage safer prescribing of controlled substances and reduce drug abuse and diversion within the state of Florida.



Practitioner/Pharmacist Site:

Practitioner / Pharmacist

Terms and
Conditions

Access Request Site

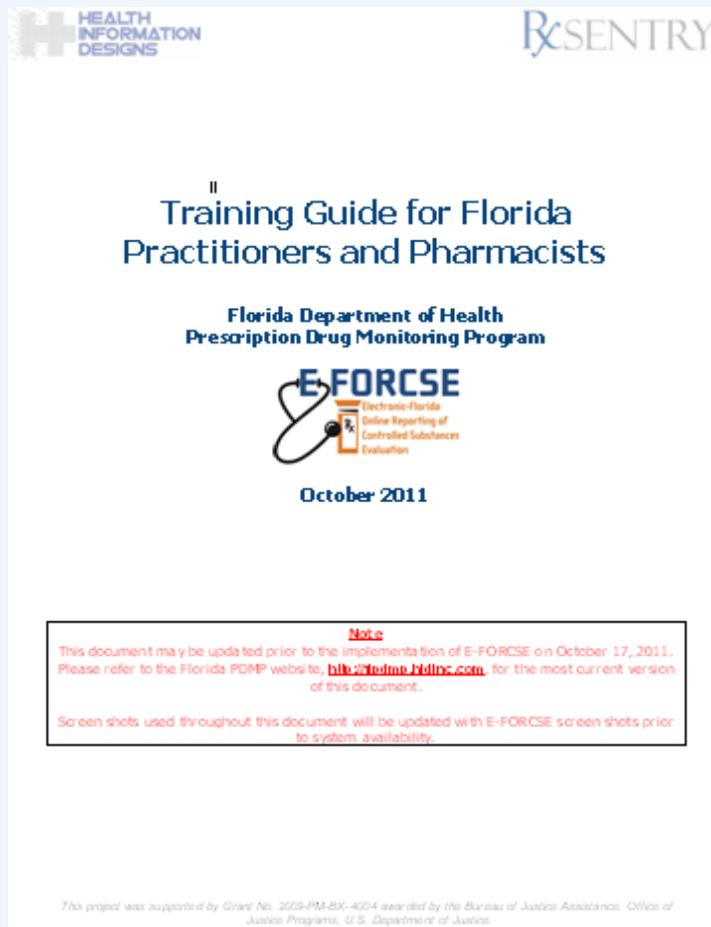
User's Guide for
Practitioners &
Pharmacists

Practitioner &
Pharmacist Query
Site





Training Guide for Practitioners & Pharmacists:



- Requesting an Account
- Creating query requests
- Viewing query request status
- Generating reports
- Viewing patient reports





Practitioner/Pharmacist Site:

Practitioner / Pharmacist

Terms and
Conditions

[Access Request Site](#)

User's Guide for
Practitioners &
Pharmacists

Practitioner &
Pharmacist Query
Site





Logging on to FL RxSentry® (cont.):

- User Name: newacct
- Password: welcome

A screenshot of a Windows login dialog box. The title bar reads "Connect to fipdmp-reporting.hidinc.com". The dialog has a blue header with a key icon. The main text says "The server fipdmp-reporting.hidinc.com at webuse requires a username and password." Below this are two input fields: "User name:" with a dropdown menu showing a person icon, and "Password:" with a text box. A checkbox labeled "Remember my password" is checked. At the bottom are "OK" and "Cancel" buttons.



Provider/Pharmacist Account Request Form

* Name (as used for licensure and DEA registration):

* Date of Birth (MM/DD/YYYY):

* State License Number:

* License Type:

* Date Licensure Expires (MM/DD/YYYY):

* DEA Number (Practitioners):

NPI (If applicable):

* Facility/Practice Name:

* Mailing Address:

* City:

* State:

* Zip Code:

County:

* Email Address:

* Phone #:

Fax #:

Submit



Logging on to FL RxSentry®:

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Pharmacists

Practitioner &
Pharmacist Query
Site





Florida Prescription Drug Monitoring Menu

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- [Practitioner/Pharmacist Query](#)
- [View Query Status](#)

[Log Out](#)

WWW based Prescription Drug Monitoring System Practitioner/Pharmacist Access Website

Welcome to the Health Information Designs system for monitoring Controlled Substance Use for Florida.





Practitioner/Pharmacist Query:

Practitioner/Pharmacist Query

Practitioner/Pharmacist Certification Statement

I certify that I am licensed to prescribe, dispense, or administer controlled substances in the State of Alabama and have been approved by the Alabama Department of Public Health to access information in the controlled substance database.

I certify that the patient on whom I am requesting information is a current or prospective patient of mine. I understand inappropriate access or disclosure of this information is a violation of Alabama law and may result in disciplinary action by my licensing board and/or revocation of database access privileges

I understand that the Prescription Monitoring Program data is for informational purposes and users should not make a determination without verifying the information with the prescribers and dispensers due to the fact that the information is only as accurate as reported to the program.

I accept the above conditions

You must accept the above conditions before you can continue



Practitioner/Pharmacist Query

Report Format:	Recipient Query			
	Name Selection	Demographic Focus	County Selection	Zipcode Selection (blank for all)
Recipient *Last Name *First Name	Begins with Sounds like Fastest: Last Name = and First Name Begins <input type="text"/> <input type="text"/>	Gender: All ▾ *Target DOB: <input type="text"/> mm/dd/yyyy Within: Exact Match ▾	Statewide Autauga Baldwin Barbour Select statewide for best results	<input type="text"/> <input type="text"/>
Alias #1 Name:	Last: <input type="text"/>	First: <input type="text"/>	DOB: <input type="text"/>	
Alias #2 Name:	Last: <input type="text"/>	First: <input type="text"/>	DOB: <input type="text"/>	
Alias #3 Name:	Last: <input type="text"/>	First: <input type="text"/>	DOB: <input type="text"/>	
Primary Address:		<input type="text"/>	City: <input type="text"/>	
Other Address 1:		<input type="text"/>	City: <input type="text"/>	
Other Address 2:		<input type="text"/>	City: <input type="text"/>	
*Dispensed Timeframe From: <input type="text" value="12/03/2010"/> mm/dd/yyyy		*Dispensed Timeframe To: <input type="text" value="06/01/2011"/> mm/dd/yyyy		
Preset Timeframe Ranges <input checked="" type="button" value="Custom Timeframe"/> <input type="button" value="Past Month"/> <input type="button" value="Past Three Months"/> <input type="button" value="Past Six Months"/> <input type="button" value="Past Year"/>				
*Required Field All required fields must be filled in. However, for the best search results, fill in as many fields as possible.				

Practitioner/Pharmacist Query

Report Format:	Recipient Report																								
Recipient Name Equals <i>Smith, First</i> Name Begins <i>L</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;">06/06/84</td> <td style="width: 5%;">2</td> <td>6229 Sonhaven Dr, Shreveport LA 71119 (Caddo)</td> </tr> <tr> <td></td> <td>06/13/82</td> <td>2</td> <td>32387 cane Market rd, walker LA 70785 (Livingston)</td> </tr> <tr> <td></td> <td>06/09/84</td> <td>2</td> <td>7852 Vennie Dr, Denham Springs LA 70706 (Livingston)</td> </tr> <tr> <td></td> <td>06/09/84</td> <td>2</td> <td>7852 Vennie Dr, Denham Springs, Denham Springs LA 70706 (Livingston)</td> </tr> <tr> <td></td> <td>11/25/81</td> <td>2</td> <td>105 Cole Pl, Sterlington LA 71280 (Ouachita)</td> </tr> <tr> <td></td> <td>11/25/81</td> <td>2</td> <td>2870 Swartz Fairbanks rd, Monroe LA 71203 (Ouachita)</td> </tr> </table>		06/06/84	2	6229 Sonhaven Dr, Shreveport LA 71119 (Caddo)		06/13/82	2	32387 cane Market rd, walker LA 70785 (Livingston)		06/09/84	2	7852 Vennie Dr, Denham Springs LA 70706 (Livingston)		06/09/84	2	7852 Vennie Dr, Denham Springs, Denham Springs LA 70706 (Livingston)		11/25/81	2	105 Cole Pl, Sterlington LA 71280 (Ouachita)		11/25/81	2	2870 Swartz Fairbanks rd, Monroe LA 71203 (Ouachita)
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	11/25/81	2	2870 Swartz Fairbanks rd, Monroe LA 71203 (Ouachita)																						
DOB <i>01/25/83</i> For Zip codes beginning	Recipient Query Limit (50) Reached																								
Dispensed Timeframe From: <i>01/01/2010</i>	Dispensed Timeframe To: <input type="text" value="01/20/2011"/>																								
Primary Address:	City:																								
Other Address 1:	City:																								
Other Address 2:	City:																								

SORT by Date Only
 SORT by Recipient by Date



Practitioner/Pharmacist Query:

Recipient Report													
SMITH, [REDACTED] DOB: 04/13/1963 - [REDACTED]													
Dispensed From 01/01/2007 to 12/30/2007													
Map Results													
Date Dispensed	Date Prescribed	Quantity Dispensed	Days of Supply	Authorized Refills	NDC	Drug Name	Prescriber	Prescription Number	Dispenser	Dispenser City	Recipient Last Name	Recipient First Name	Date of Birth
07/19/07	?	30	0	0	66991071402	ZOLPIDEM TARTRATE 10 MG TABLET	UNC HOSPITALS AND PHARMACY	0000205	RITE AID PHARMACY #11366	CHAPEL HILL	[REDACTED]	[REDACTED]	04/13/63

Query 14121 has been created. View Query Status to retrieve report when query finishes running.





View Query Status:

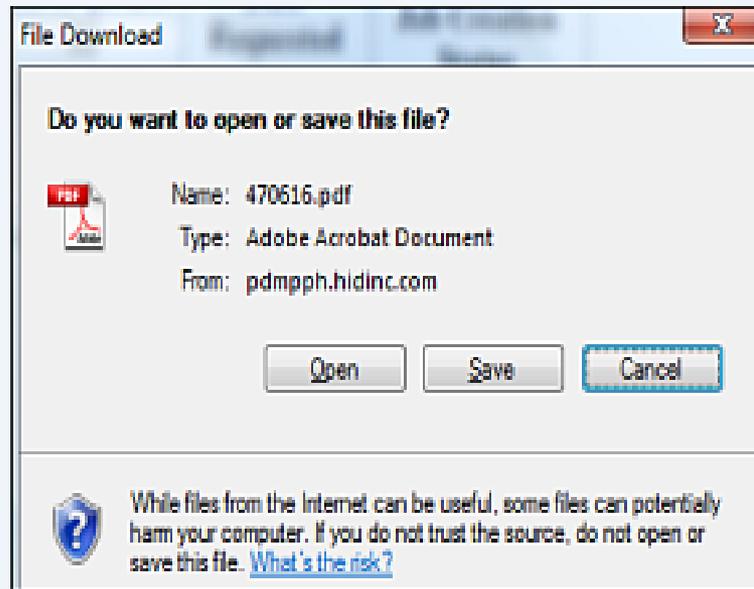
<i>Request Status</i>					
Query Number	Job Sequence ID	Date Requested	Query Status/ Job Creation Status	Report Desc Or Denial Reason	Output
91503	470616	02/10/09	Approved / Done	Recipient Report [REDACTED] - Gadsden Healthcare Dispensed From 08/12/2008 to 02/10/2009	file-pdf

- Approved/Queued – the query has been approved and is processing.
- Approved/Done – the query has been approved, processed, and is available for viewing.





View Patient Advisory Report:



- Open – open the PAR for viewing and printing (if desired)
- Save – save the PAR to a specific location for viewing and printing (if desired) at a later time.
- Cancel



Patient Rx History Report

DOE, JANE Search Criteria: Last Name 'doe' and First Name 'jane' and D.O.B. = '01/01/83' and Address = '123 Main' and Request Period = '12/01/10' to '02/01/12' - 1 out of 1 Recipient(s) Selected.

Fill Date	Product, Str, Form	Qty	Days	Pt ID	Prescriber	Written	RX#	N/R*	Pharm
03/03/2011	DIAZEPAM 5 MG TABLET	30.000	7	0000000001	BS8292651	03/02/2011	4028684	N	BP8575461
02/09/2011	OXYCODONE HCL 30 MG TABLET	180.000	30	0000000001	FG1128443	02/09/2011	620807	N	BW7758759
02/09/2011	HYDROMORPHONE 8 MG TABLET	60.000	30	0000000001	FG1128443	02/09/2011	620806	N	BW7758759
02/03/2011	ALPRAZOLAM 1 MG TABLET	60.000	30	0000000001	BS8292651	02/03/2011	591314	N	BW7852569
01/28/2011	ZOLPIDEM TARTRATE 10 MG TABLET	30.000	30	0000000001	BS8292651	12/03/2010	120205	R	BG9194527
01/12/2011	OXYCODONE HCL 30 MG TABLET	180.000	30	0000000001	FG1128443	01/12/2011	586661	N	BW7852569
01/12/2011	HYDROMORPHONE 4 MG TABLET	30.000	30	0000000001	FG1128443	01/12/2011	586658	N	BW7852569
12/31/2010	DIAZEPAM 10 MG TABLET	30.000	15	0000000001	BS8292651	12/03/2010	120207	R	BG9194527
12/30/2010	ZOLPIDEM TARTRATE 10 MG TABLET	30.000	30	0000000001	BS8292651	12/03/2010	120205	R	BG9194527
12/22/2010	DIAZEPAM 10 MG TABLET	30.000	15	0000000001	BS8292651	12/03/2010	120207	R	BG9194527
12/15/2010	OXYCODONE HCL 30 MG TABLET	180.000	15	0000000001	FG1128443	12/15/2010	2097679	N	AW2058887
12/03/2010	DIAZEPAM 10 MG TABLET	30.000	15	0000000001	BS8292651	12/03/2010	120207	N	BG9194527
12/03/2010	ZOLPIDEM TARTRATE 10 MG TABLET	30.000	30	0000000001	BS8292651	12/03/2010	120205	N	BG9194527

*N/R N=New R=Refill

Prescribers for prescriptions listed

BS8292651 Doctor 1, address, city, state, zip
 FG1128443 Doctor 2, address, city, state, zip
 AS1837383 Doctor 3, address, city, state, zip

Pharmacies that dispensed prescriptions listed

BG9194527 Pharmacy 1, address, city, state, zip
 AW2058887 Pharmacy 2, address, city, state, zip
 BW7852569 Pharmacy 3, address, city, state, zip
 BW7758759 Pharmacy 4, address, city, state, zip
 BP8575461 Pharmacy 5, address, city, state, zip
 BW8940923 Pharmacy 6, address, city, state, zip
 BH9131436 Pharmacy 7, address, city, state, zip
 BC7975141 Pharmacy 8, address, city, state, zip

Patients that match search criteria

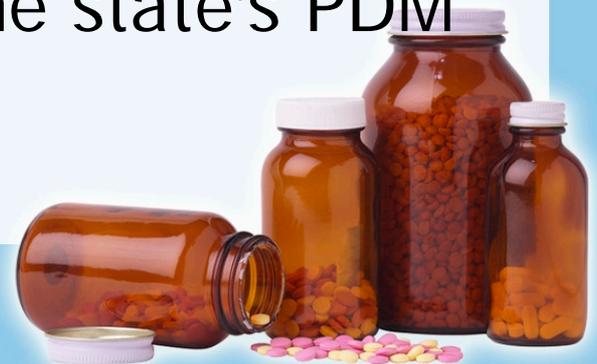
00000001 DOE JANE, DOB 01/01/83; 123 MAIN STREET, ANY CITY FL 33333



Performance Measures

Outcome: Reduction of the rate of inappropriate use of prescription drugs through department education and safety efforts.

Measure: The number of licensed prescribers, dispensers, and individuals authorized to conduct investigations that were trained in the use of the state's PDM system.





Number of PDMP Registered Users

License Type	Number of Registered Users
Pharmacists	4,453
Medical Doctors	3,575
Osteopathic Physicians	653
Podiatric Physicians	43
Physician Assistants	415
Advanced Registered Nurse Practitioners	469
Dentists	318
TOTAL	9,926





Number of Users Trained on Use of PDMP

How many licensed PRESCRIBERS were trained formally (in a classroom setting) in the use of the PDM system?	265
How many licensed PRESCRIBERS were trained informally (e.g., via the Internet, mass mailings, and so on) in the use of the PDM system?	80,376
How many licensed DISPENSERS were trained formally (in a classroom setting) in the use of the PDM system?	1,785
How many licensed DISPENSERS were trained informally (e.g., via the Internet, mass mailings, and so on) in the use of the PDM system?	30,625





Performance Measures

Measure: The number of coroner reports that indicate controlled substance prescription drug use as the primary or contributing cause of death.

Measure: The number of emergency room admissions that identify accidental controlled substance overdose as the reasons for admission.





Performance Measures

Outcome: Reduction of the quantity of pharmaceutical controlled substances obtained by individuals attempting to engage in fraud and deceit.

Measure: Increase in reports generated.





Month	Number of Queries
October 2011	34,486
November 2011	142,561
December 2011	160,588
January 2012	167,552
TOTAL	505,157





Performance Measures

Outcome: Increased coordination among partners participating in the prescription drug monitoring program.

Measure: The number of licensed prescribers and distributors trained formally in coordination and data sharing.





Performance Measures

Outcome: Involvement of stakeholders in achieving improved patient health care and safety and reduction of prescription drug abuse and prescription drug diversion.

Measure: Percentage of stakeholder (state, federal agencies; professional associations, etc.) involvement





Number of Prescriptions Issued by Florida Prescribers Dispensed Outside the State of Florida

Southeastern States	Number of Prescriptions 2009
Alabama	116,000
Louisiana	16,000
North Carolina	48,000
South Carolina	28,000
Other States	
Arizona	14,000
Vermont	1,700
TOTAL:	223,700

Communication from PMP Center of Excellence dated March 25, 2011.





Questions

How often does a pharmacy need to upload or report dispensing information to the PDMP?

- a. 10 days
- b. 15 days
- c. 7 days





Questions

True or False

A pharmacist, dispensing a controlled substance in schedules II through IV to a patient or resident at a nursing home, is not required to report to the PDMP.





Questions

True or False

I am not required to view my patient's specific controlled substance history prior to dispensing a controlled substance.





Questions

True or False

The Patient Advisory Report (PAR) is provided for informational purposes only and impose no obligations of any nature or any legal duty on a prescriber, dispenser, pharmacy, or patient.





Question

What is the penalty for a health care practitioner that does not report their schedule II-IV controlled substance dispensing data?

- a. Felony
- b. Misdemeanor





Question

What is the penalty for disclosure of confidential information in the E-FORCSE database?

- a. Felony
- b. Misdemeanor





Need Help?

- Technical Support & Assistance:
Health Information Designs, Inc.
Phone: 1-877-719-3120
Email: flpdmp-info@hidinc.com
Website: hidinc.com/flpdmp
8:00 am – 5:00 pm EST





Need Help? (cont.)

- Administrative Assistance:
E-FORCSE Program Staff
Phone: 850-245-4797
E-mail: E-FORCSE@doh.state.fl.us
Website: www.eforcse.com
Rebecca Poston, Program Manager
Erika Marshall, Program Operations
Administrator





Thank you!

