

**STATE STATUTES AND REGULATIONS RELATING TO PRESCRIPTION DRUG MONITORING PROGRAMS – SCHEDULES MONITORED**

DRUGS MONITORED	AL	CA	CO	CT	HI	ID	IL	IN	IA	KY	LA <sup>5</sup>	ME	MA	MI	MS	NV	NM	NY	NC	ND <sup>8</sup>	OH	OK	PA	RI	SC	TN	TX	UT	VT	VA	WA	WV	WY	
Schedule II							X						X										X				X							
Schedules II and III		X <sup>2</sup>																					X											
Schedules II, III and IV					X <sup>3</sup>	X			X <sup>4</sup>			X				X	X								X				X <sup>11</sup>	X			X	X
Schedules II, III, IV and V	X <sup>1</sup>		X	X				X		X				X	X <sup>6</sup>			X <sup>7</sup>	X		X	X <sup>9</sup>				X <sup>10</sup>		X						
Determined by overseeing agency					X <sup>3</sup>																													
Determined by disciplinary authority																																	X <sup>12</sup>	
Schedules or Classes to be monitored are listed in state statute	X	X	X	X			X		X	X		X		X	X	X		X	X			X		X	X	X	X	X	X	X			X	X
Authority to designate Schedules or Classes to be monitored lies with state regulatory agency					X	X		X			X		X				X				X		X										X	

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1. The Alabama Controlled Substances Prescription Database uses the term(s) “Class(es)” II through V instead of “Schedule(s)” II through V.
2. The reporting of Schedule III controlled substance prescriptions to the Controlled Substance Utilization Review and Evaluation System (CURES) shall be contingent upon the availability of adequate funds from the Department of Justice. CAL. HEALTH & SAFETY CODE § 11165(b) (West 2006).
3. At this time, the Department of Public Safety has determined that the State of Hawaii will currently monitor Schedule II, Schedule III and Schedule IV substances.
4. In addition to all Schedule II controlled substances, the advisory council and board of pharmacy examiners can require regulation of Schedule III and IV controlled substances under the program if it is determined that the substance can be addictive or fatal if not taken under the proper care and direction of a prescriber.
5. Legislation to establish a prescription monitoring program was recently enacted; the state board of pharmacy and an advisory council (to be established) will determine through regulation which schedule(s) of controlled substance(s) will be regulated by the program.
6. The Mississippi legislature recently enacted specific language authorizing the Board of Pharmacy to develop and implement a computerized program to track prescriptions for controlled substances – please note that this language has yet to be incorporated into the state’s code. This language was enacted pursuant to the Board of Pharmacy’s existing regulatory authority in the state Controlled Substance Act – MISS. CODE ANN. § 41-29-101 et seq. (2006).
7. New York includes certain other substances that are specifically named in N.Y. COMP. CODES & REGS. Tit. 10, § 80.67 (2006)
8. Implementation and development of a prescription monitoring program is contingent upon receipt of federal funds.
9. Exception: Schedule V substances that contain any detectable quantity of pseudoephedrine, its salts or optical isomers, or salts of optical isomers.
10. Tennessee requires the monitoring of Schedule V controlled substances identified by the controlled substance database advisory committee as demonstrating a potential for abuse.
11. Vermont’s legislation to establish a program was recently enacted and has yet to be incorporated into the state’s code.
12. The program in place in Washington applies to licensed practitioners and is used for disciplinary purposes or for disciplinary board supervision.