

## PRESCRIPTION MONITORING PROGRAM STATE PROFILES – DISTRICT OF COLUMBIA

## Research current through July 2014.

This project was supported by Grant No. G1399ONDCP03A, awarded by the Office of National Drug Control Policy. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the Office of National Drug Control Policy or the United States Government.

## DISTRICT OF COLUMBIA

## Contact info pending

- Status of Program not yet operational
- Housing Entity Department of Health
- Advisory Commission yes
- Funding not provided in the PMP statutes
- Drugs Monitored Schedules II V and non-controlled/non-scheduled substances
- Who's Required to Report Dispensing Information all dispensers, which includes physicians, dentists, advanced practice nurses, veterinarians, and pharmacies
- Exemptions from Reporting hospital or institutional pharmacies providing inpatient care; direct administration of covered substances; wholesale distributors; clinical researchers; dispensing of a covered substance in a licensed narcotic maintenance program; dispensing to hospice inpatients
- Nonresident Pharmacies Required to Report yes
- Veterinarians Required to Report yes
- Data Collection Interval daily/24 hours
- Notice to Consumers yes
- Interstate Sharing with other PMPs
- Persons Authorized to Receive Information county coroners or medical examiners; law enforcement; grand jury; licensing boards; District Medicaid program, DC Health Care Alliance, or any other public health care program; Medicaid Fraud Control Unit; patient or parent of minor child; prescribers; dispensers
- Delegates Allowed yes
- De-identified Data Provided yes
- Unsolicited Reports to prescribers only
- Training Required no
- Mandatory Enrollment no
- Mandatory Access no

- § 48-853.02. Program establishment; Director's authority.
- (a) There is established the Prescription Drug Monitoring Program within the Department. The Program shall:
- (1) Establish, maintain, and administer an electronic system to monitor the dispensing of covered substances;
- (2) Provide dispensers with a basic file layout to enable electronic transmission of the information required under this chapter; and
- (3) Establish and maintain a process for verifying the credentials of and authorizing the use of prescription information by those individuals and agencies listed in § 48-853.05(b) and (c).
- (b) The Director may contract with another District agency or a private vendor as may be necessary for the implementation and maintenance of the Program. Any such contractor shall be bound to comply with the provisions regarding confidentiality of data in this chapter and shall be subject to the penalties specified in this chapter.
- (c) The Director shall also establish a multi-discipline advisory committee, which shall function under the Department to assist in the implementation and evaluation of the Program.

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§ 48-853.03. Reporting requirements; exceptions.

- (a)(1) Each dispenser shall submit to the Program the required reporting information for each prescription dispensed for a covered substance within 24 hours after the covered substance is dispensed, unless otherwise established by the Director through rulemaking, but this does not include merely placing the covered substance prescription into a bin for pickup by the ultimate user or his or her agent.
- (2) Any dispenser located outside the boundaries of the District that is licensed or registered by the District, shall submit the required reporting information to the Program for each prescription dispensed for a covered substance to an ultimate user who resides within the District within 24 hours after the date that the covered substance is dispensed, unless otherwise established by the Director through rulemaking.
- (b) The failure of any person subject to the reporting requirements of this chapter to report the dispensing of a covered substance, unless otherwise exempted under this chapter, or the willful failure to transmit accurate information shall constitute grounds for:
- (1) The revocation, suspension, or denial of a District controlled substances registration;
- (2) Disciplinary action by the relevant health occupations board pursuant to § 3-1205.14(c); and
- (3) The imposition of civil fines pursuant to § 2-1801.04.
- (c) Upon dispensing a covered substance, the dispenser of the covered substance shall report the following information to the Program:
- (1) Patient name;
- (2) Patient address;
- (3) Patient date of birth;
- (4) Patient gender;
- (5) Dispenser identification number;
- (6) Prescriber identification number;

- (7) Date prescription was issued by prescriber;
- (8) Date prescription was dispensed;
- (9) Prescription number;
- (10) Prescription type, whether the prescription is new or is a refill;
- (11) National Drug Code for the drug dispensed;
- (12) Quantity dispensed;
- (13) Number of days' supply dispensed;
- (14) Number of refills ordered;
- (15) Source of payment for the prescription; and
- (16) Any other required information as specified in the regulations promulgated by the Director to implement this chapter, or as required for the Program to be eligible to receive federal funds.
- (d) Each dispenser shall transmit the required reporting information in accordance with the manner, format, standards, and schedules established by the Director through rulemaking.
- (e) The reporting requirements of this chapter shall not apply to the dispensing of covered substances when the dispensing is limited to the following:
- (1) Administering covered substances;
- (2) Dispensing covered substances within an appropriately licensed narcotic maintenance program;
- (3) Dispensing covered substances to inpatients in hospitals or nursing facilities licensed by the Department or facilities that are otherwise authorized by law to operate as hospitals or nursing homes in the District;
- (4) Dispensing covered substances to inpatients in hospices licensed by the Department; or
- (5) Dispensing covered substances as otherwise provided in the Department's regulations.

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§ 48-853.04. Authority to access database.

- (a) A prescriber or dispenser authorized to access the information in the possession of the Program pursuant to this chapter may delegate, pursuant to regulations promulgated by the Director to implement the provisions of this section, such authority to up to 2 health care professionals who are:
- (1) Licensed, registered, or certified by a health occupations board; and
- (2) Employed at the same facility and under the direct supervision of the prescriber or dispenser.

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- § 48-853.05. Confidentiality of data; disclosure of information; discretionary authority of the Director.
- (a) All data, records, and reports relating to the prescribing and dispensing of covered substances to patients and any abstracts from such data, records, and reports that are in the possession of the Program pursuant to this chapter and any materials relating to the operation or safety of the Program shall be confidential and shall be exempt from disclosure based on requests made pursuant to subchapter II of Chapter 2 of Title 5. Information obtained pursuant to the Program may only be disclosed as provided in this chapter.
- (b) Upon receiving a request for information in accordance with the Department's regulations and in compliance with applicable District and federal laws and regulations, the Director shall disclose information relevant to:
- (1) A specific investigation of a specific patient or of a specific dispenser or prescriber to an agent designated by the Chief of the Metropolitan Police Department to conduct drug diversion investigations;
- (2) An investigation or inspection of or allegation of misconduct by a specific person licensed, certified, or registered by or an applicant for licensure, certification, or registration by a health occupations board or the Department;
- (3) A disciplinary proceeding before a health occupations board or in any subsequent hearing, trial, or appeal of an action or board order to designated employees of the Department;
- (4) The proceedings of any grand jury or additional grand jury that has been properly impaneled in accordance with § 11-1916; and
- (5) A specific investigation of a specific dispenser or specific prescriber to an agent of the United States Drug Enforcement Administration with authority to conduct drug diversion investigations.
- (c)(1) In accordance with the Department's regulations and applicable federal law and regulations, the Director may, at the Director's discretion, disclose:
- (A) Information in the possession of the Program concerning a patient who is over the age of 18 years to that patient, or to the parent or legal guardian of a child aged 18 years or under, unless otherwise prohibited by District or federal law;

- (B) Information on a specific patient to a prescriber for the purpose of establishing the treatment history of the specific patient when the patient is either under care and treatment by the prescriber or the prescriber is initiating treatment of the patient;
- (C) Information on a specific patient to a dispenser for the purpose of establishing a prescription history to assist the dispenser in determining the validity of a prescription when the patient is seeking a covered substance from the dispenser or the facility in which the dispenser practices;
- (D) Information relevant to an investigation or regulatory proceeding of a specific dispenser or prescriber to other regulatory authorities concerned with granting, limiting, or denying licenses, certificates, or registrations to practice a health profession when the regulatory authority licenses the dispenser or prescriber, or the dispenser or prescriber is seeking licensure by a regulatory authority;
- (E) Information relevant to an investigation relating to a specific dispenser or prescriber who is a participating provider in the District Medicaid program, DC Health Care Alliance, or any other public health care program; information relating to an investigation relating to a specific patient who is currently eligible for and receiving, or who has been eligible for and has received medical assistance services; information relevant to the Medicaid Fraud Control Unit of the Office of the Inspector General, or to designated employees of the Department of Health Care Finance, as appropriate;
- (F) Information relevant to the determination of the cause of death of a specific patient to the designated employees of the Office of the Chief Medical Examiner; and
- (G) Information for the purpose of bona fide research or education to qualified personnel; provided, that:
- (i) Data elements that would reasonably identify a specific patient, prescriber, or dispenser shall be deleted or redacted from the information before disclosure; and
- (ii) Release of the information shall only be made pursuant to a written agreement between qualified personnel and the Director to ensure compliance with this chapter.
- (2) For the purposes of a disclosure under paragraph (1)(B) or (C) of this subsection:
- (A) The request shall be made and the information shall be provided in the manner specified by the Director through rulemaking; and
- (B) Notice shall be given to patients that the information described in paragraph (1)(B) or (C) of this subsection, as applicable, may be requested by a prescriber or dispenser participating with the Program.
- (d) Confidential information that has been received, maintained, or developed by a health occupations board or disclosed by the health occupations board pursuant to this chapter shall not © 2014 Research is current as of July 2014. In order to ensure that the information contained herein is as current as possible, research is conducted using nationwide legal database software, individual state legislative websites and direct communications with state PDMP representatives. Please contact Heather Gray at (703) 836-6100, ext. 114 or hgray@namsdl.org with any additional updates or information that may be relevant to this document. This document is intended for educational purposes only and does not constitute legal advice or opinion. Headquarters Office: THE NATIONAL ALLIANCE FOR MODEL STATE DRUG LAWS, 420 Park Street, Charlottesville, VA 22902.

be available for discovery or court subpoena or introduced into evidence in any medical malpractice suit or other action for damages arising out of the provision of or failure to provide services; provided, that this section shall not be construed to inhibit any investigation or prosecution conducted pursuant to this chapter.

§ 48-853.06. Interoperability; Information exchange with other prescription drug monitoring programs..

- (a) The Director may enter into written agreements with other prescription drug monitoring programs, or a third party, approved by the Director, that operates an interstate prescription drug monitoring exchange, for the purpose of interoperability and the mutual exchange of information among prescription drug monitoring programs, and describing the terms and conditions for the sharing of prescription information under this section.
- (b) The Director may provide prescription monitoring information pursuant to such agreements, which shall only use the information for the purposes allowed by this chapter.
- (c) The Director may request and receive prescription drug monitoring information from other states' prescription drug monitoring programs and may use the information under the provisions of this chapter.

§ 48-853.07. Criteria for indicators of misuse; Director's authority to disclose information; intervention.

- (a) The Director may establish through rulemaking:
- (1) Criteria for indicators of misuse; and
- (2) A method for analysis of data collected by the Program using the criteria for indicators of misuse.
- (b) Upon the development of the criteria and data analysis, the Director may, in addition to the discretionary disclosure of information pursuant to this chapter, disclose information using the criteria that indicates potential misuse by recipients of covered substances to their specific prescribers for the purpose of intervention to prevent such misuse.

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