

MISSISSIPPI PRESCRIPTION MONITORING PROGRAM GUIDELINES

**Submission or reporting of dispensing information shall be mandatory and required every 24 hours or next business day by the State Board of Pharmacy for any entity dispensing controlled substances in or into the State of Mississippi. This includes dispensing physicians and mail order pharmacies:*

***Errors are required to be corrected and resubmitted to the database as soon as possible and no later than 7 days of the notice of error by the clearinghouse.*

Pharmacies and their vendors must have a process in place for error correction including:

- The reporting of dispensations of prescriptions and zero reports to the Appriss Clearinghouse
- The receipt of information regarding prescriptions which contain invalid or missing data fields
- That reject or load with error to the Appriss Clearinghouse and any records that contain errors
- Revision of erroneous record(s) in the pharmacy/dispenser computer system
- Reporting of revisions, voids, or new prescriptions to the MSPMP via the APPRISS Clearinghouse
- Correction to be made in Rx Management

MSPMP staff cannot change any information in the MSPMP database. All changes must be made via the APPRISS Clearinghouse or via Rx Management by the dispensing entity who originally reported the information.

Non-Controlled substances should not be reported to the MSPMP unless otherwise specified. Zero reporting to the clearinghouse is required should a facility have a period of no prescriptions, as defined, to report to the clearinghouse.

Registration for individuals shall be done personally by the individual wishing to become a user. All licensed practitioners as defined under 73-21-73 shall register as users of the MSPMP. All registrants will use an email address that is personal/private and not shared with other individuals. MSPMP staff may request documentation of certain criteria for any registrant for verification purposes.

All communications concerning a user's account must be discussed directly with the account holder. Any changes made to a user account must be submitted in writing via email. A registrant will not share their username or password information with anyone. The sharing of accounts, account information, usernames and passwords is strictly prohibited and is considered misuse. No one shall log in to a PMP account except the owner of that account.

Delegates are allowed for pharmacists, physicians, physician assistants, nurse practitioners, and dentists in Mississippi. A pharmacist is required to have pharmacy technician, all other prescribers may have delegates as defined by their respective Board***.

A delegate must personally register for their own account using the appropriate delegate role and list each supervisor for which they will run queries. You must list each supervisor you will need associated

with your account. Reports may not be pulled under one supervisor for multiple providers/dispensers. A prescriber or dispenser shall cancel the delegate's access to the database upon the end of the prescriber/dispenser relationship. A prescriber/dispenser may have as many delegates as he or she feels can be properly supervised. The selected supervisor is responsible for all MSPMP queries run by the delegated individual. A delegate may have more than one supervisor. A facility/clinic may not hold one account that all staff members share. A delegate may not log into their supervisor's, or anyone else's account for any purpose.

A practitioner, dispenser, or his/her delegate must have had recent contact with a patient for care or be actively providing medical care or dispensing medications to the patient to run a MSPMP report. MSPMP reports may be run back to 36 months. The MSPMP report is solely to be used by practitioners for providing medical and pharmaceutical care to patients.

After proper registration and approval, local, state and federal law enforcement officials in the state of Mississippi may utilize the MSPMP while engaged in the administration, investigation or enforcement of the laws governing illicit drug use – A MSPMP report is a TOOL and shall not be used in court. All information should be verified from the source i.e. physician records and prescriptions. A case number is required to be provided and documented in the system along with the request before law enforcement runs a MSPMP report. Information obtained from the database may be shared with other law enforcement personnel or prosecutorial officials only upon the direction of the officer or agent who originally requested it and may only be shared with law enforcement personnel from other law enforcement agencies who are directly participating in an official joint criminal investigation. Law enforcement should never ask a prescriber, pharmacist, or delegate to run a MSPMP report for them. Proper protocol must be followed.

MSPMP collected prescription information will be given to judicial authorities under grand jury subpoena for investigation and prosecution of criminal conduct. MSPMP collected prescription information will NOT be provided by the Board of Pharmacy for any civil proceeding.

The MSPMP report shall never be provided to anyone not involved in treating that same patient. Should a person want a copy of their MSPMP profile report, they shall contact the MSPMP directly. Any person wanting to obtain a copy of his or her personal profile is required to make this request through MSPMP staff and follow the steps required - this includes a notarized form and a copy of photo identification. Users of the MSPMP are not permitted to print his or her profile to use for personal reasons or personal use. Should a user of the MSPMP need a copy of their personal PMP profile, they must follow the state requirements as well to gain a copy of their personal profile.

It is not a HIPAA violation to discuss information contained in the MSPMP report with the patient and/or any practitioner or dispenser listed on the report. If a prescriber or patient believes there are errors on a MSPMP report, please contact the dispensing entity for correction first before contacting MSPMP staff.

If a practitioner believes an individual is diverting controlled substances, he/she should contact MBN (Mississippi Bureau of Narcotics) or the MS Board of Pharmacy.

If a practitioner feels an individual is addicted, internal protocol for treatment/referral should be followed.

If a MSPMP report is printed by a user, it shall be reviewed and either destroyed or placed in the medical record of the patient. At that point, it becomes part of the medical record and should be treated as such.

Using the MSPMP in a manner other than specified and/or distributing MSPMP information to individuals not authorized to view MSPMP information is considered misuse. Those misusing the MSPMP will be brought before the Board for possible fines up to \$50,000 per violation and referral to any licensing or regulatory authority for further action*. Read the acknowledgement box that is checked before a report is requested.

Administrative or back-end audit information will NOT be provided to any entity or individual. This includes who has run a MSPMP report on a specific individual. This information is not public information and will not be released.

A “MyRx” can be run as far back as 36 months by a prescriber on his/her personal DEA number within their MSPMP account. A collaborating physician or medical director may request his mid-level practitioner run a “MyRx” and that report may then be given to the supervisor **in person**. **This report may not be emailed, faxed, or mailed via any mailing service** to the collaborating physician, the medical director, nor to anyone else. No one may run a “MyRx” for another prescriber. The “MyRx” is tied to the user account and DEA # of the prescriber only. If there are prescriptions attributed to your DEA # but not written by you, please contact the dispensing entity listed on the “MyRx” report first for possible DEA # errors. The reporting entity is required to correct the error. If the entity refuses or does not correct the issue, please contact the MSPMP staff. If these prescriptions are believed to be forgeries, please contact a Board of Pharmacy compliance agent and the Mississippi Bureau of Narcotics.

Prescription Monitoring Program Record Retention: The Board shall retain the prescription information submitted to the PMP database from the date the controlled substance was dispensed for three years prior. This data will be used for review by persons authorized to access such information. All data prior to three years shall be transferred to archives.

**In Statutes 73-21-127 or 73-21-103*

***In Regulations Article XLIII*

****All users are required to adhere to the rules and regulations set forth by their own licensing/regulatory board relating to the registration and use (mandated or suggested) of the MSPMP. Please visit your licensing authority for guidance and additional requirements. For those who fall under the Board of Pharmacy, please see the Pharmacy Regulations on our webpage, specifically Article XLIII for the Prescription Monitoring mandatory registration and use regulations.*