

**WEST VIRGINIA
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ADMINISTRATIVE LAW DIVISION**

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WEST VIRGINIA
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Form #6

**NOTICE OF FINAL FILING AND ADOPTION OF A LEGISLATIVE RULE AUTHORIZED
BY THE WEST VIRGINIA LEGISLATURE**

AGENCY: West Virginia Board of Pharmacy TITLE NUMBER: 15

AMENDMENT TO AN EXISTING RULE: YES NO

IF YES, SERIES NUMBER OF RULE BEING AMENDED: 8

TITLE OF RULE BEING AMENDED: CONTROLLED SUBSTANCES MONITORING

IF NO, SERIES NUMBER OF RULE BEING PROPOSED: _____

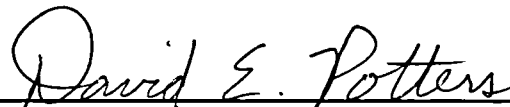
TITLE OF RULE BEING PROPOSED: _____

THE ABOVE RULE HAS BEEN AUTHORIZED BY THE WEST VIRGINIA LEGISLATURE.

AUTHORIZATION IS CITED IN (house or senate bill number) HB 2639

SECTION 64-9-1(b), PASSED ON March 12, 2011

THIS RULE IS FILED WITH THE SECRETARY OF STATE. THIS RULE BECOMES EFFECTIVE ON THE
FOLLOWING DATE: July 1, 2011



Authorized Signature



Board of Pharmacy

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APPROVAL OF FINAL FILING OF RULES

BE IT HEREBY KNOWN that the West Virginia Board of Pharmacy approves the final filing of the following modified and legislatively amended rules with the Secretary of State in accordance with HB 2639, 2011 Regular Legislative Session:

- (1) Series 1, "Board of Pharmacy Rule Regarding Licensure and the Practice of Pharmacy"; and
- (2) Series 8, "Controlled Substances Monitoring".

Signed this 27th day of June, 2011,

BY:



 George Karos, President

TITLE 15
LEGISLATIVE RULE
WEST VIRGINIA BOARD OF PHARMACY

DEPARTMENT OF HEALTH AND HUMAN SERVICES
SECRETARY OF STATE

SERIES 8
CONTROLLED SUBSTANCES MONITORING

§15-8-1. General.

1.1. Scope. -- This rule establishes requirements for the recordation and retention in a single repository of information regarding the prescribing, dispensing and consumption of certain controlled substances.

1.2. Authority. -- W. Va. Code §60A-9-6.

1.3. Filing Date. -- June 28, 2011.

1.4. Effective Date. -- July 1, 2011.

§15-8-2. Definitions.

2.1. "Central repository" refers to the central repository designated by the Board for the collection of the transmitted information, which may be a vendor designated by the Board and under contract with the Board to act as the central repository.

2.2. "Dispense" means to deliver a controlled substance to an ultimate user or research subject by or pursuant to the lawful order of a practitioner, including the prescribing, administering, packaging, labeling or compounding necessary to prepare the substance for that delivery.

2.3 "Duly authorized agent" means an individual, who is an employee of any of the covered persons or entities permitted to have access to the central repository pursuant to Rule 15-8-7.3 of this rule, who is specifically designated by the duly authorized representative of the covered person or entity to access the central repository on behalf of the covered person or entity.

2.4. "Electronic access" means the ability to connect with and view the information in the central repository maintained by the Board using the Internet or some other electronic means, such as an Intranet or satellite connection which permits real-time connectivity to the central repository the same as if connected through the Internet.

2.5. "Identification number" means any of the following:

- (a) The birth date of the recipient.

2.6. "Internet" means an interconnected system of networks that connects computers around the world via the Transmission Control Protocol (TCP) and the Internet Protocol (IP) established by the Internet Society (ISOC).

2.7. "Intranet" means a privately maintained computer network that can be accessed only by authorized persons, especially members or employees of the organization that owns it.

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2.8. "Logo" means a symbol used by an individual, a pharmacy, professional practice, professional association or hospital.

2.9. "Medical Services Provider" means a licensed practitioner with the legal authority to dispense Controlled Substances.

2.10. "Practitioner" means:

(a) A physician, dentist, veterinarian, scientific investigator or other person licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to, or to administer a controlled substance in the course of professional practice or research in this state; and

(b) A pharmacy, hospital or other institution licensed, registered or otherwise permitted to distribute, dispense, conduct research with respect to, or to administer a controlled substance in the course of professional practice or research in this state.

2.11. "Recipient" means an individual for whom a controlled substance is dispensed or filled.

2.12. "Recipient representative" means an individual to whom a controlled substance is dispensed or filled if the recipient is either less than 18 years of age or unavailable to receive the controlled substance.

2.13. "Reporter" means any medical services provider, health care facility, pharmacist, or pharmacy that is required to submit the information outlined in section 4 of this rule.

2.14. "Schedule II, III, or IV Controlled Substance" means a controlled substance classified in those categories under W. Va. Code §§60A-2-206, 208 and 210.

2.15. "Security prescription blank" means a prescription blank that complies with the requirements of Section 15-1-27 of the West Virginia Code of State Rules.

2.16. "Universal Claim Form" means a nationally recognized standard form developed by the National Council for Prescription Drug Programs used for billing drug claims to insurance plans.

§15-8-3. Prescription Monitoring Program.

3.1. Each time a Schedule II, III, or IV Controlled Substance is dispensed or filled for out-patient use, the medical services provider, health care facility, pharmacist or pharmacy that dispensed the controlled substance shall transmit to the central repository the following information:

(a) The name, address, pharmacy prescription number and Drug Enforcement Administration controlled substance registration number of the dispensing pharmacy;

(b) The name, including middle initial, address and birth date of the person for whom the prescription is written;

(c) The name, address and Drug Enforcement Administration controlled substances registration number of the practitioner writing the prescription;

(d) The name and national drug code number of the Schedule II, III and IV controlled substance dispensed;

(e) The quantity and dosage of the Schedule II, III and IV controlled substance dispensed;

(f) The date the prescription was filled; and

(g) The number of refills, if any, authorized by the prescription.

3.2. Any person reporting more than 20 controlled substance prescriptions in any given month shall transmit to the central repository the information outlined in section 4 of this rule using one of the following methods:

- (a) An electronic device compatible with the receiving device of the central repository;
- (b) A computer diskette; or
- (c) A magnetic tape.

3.3. Any person reporting less than 20 Schedule II, III, or IV prescriptions in any given month may submit data using a Universal Claim Form or transmit the information using the methods outlined in subsection 3.2 of this section.

3.4. The Board may grant a waiver to a person who does not have an automated recordkeeping system capable of producing an electronic report in the established format. A person requesting a waiver shall make the request to the Board in writing and the Board shall grant the request if the dispenser agrees to report the data by submitting a completed Universal Claim Form.

3.5. The Board and the central repository shall provide for the electronic transmission of the information required to be provided by and through the use of a toll-free telephone line or other Internet connection.

§15-8-4. Information To Be Transmitted Weekly.

4.1. The information required to be submitted by the provisions of this rule may be transmitted at any time, but shall be transmitted at least every week.

4.2. The Board may not penalize a reporter for failure to comply with the program if the Board or the central repository cannot secure adequate funding to implement the program and recover the cost.

§15-8-5. Accuracy of Information Transmitted.

The information required to be transmitted by this rule must be reported accurately. If the reporting individual or entity discovers that information contained in the central repository is not accurate, he or she must notify the Board of the inaccuracy and the necessary corrections in writing as soon as possible, but in no event longer than fourteen (14) days after the discovery of the inaccurate reporting, so that the Board may take the necessary steps to correct the error within the database.

§15-8-6. Central Repository; Designation; Powers and Duties.

6.1. The central repository shall create a database for the information required to be transmitted by this rule. This database shall be referred to as the "Controlled Substances Monitoring Program", or the "CSMP".

6.2. The central repository shall provide the Board with continuous 24-hour a day, on-line access to the database maintained by the central repository.

6.3. The central repository shall secure the information collected by the central repository and the

database maintained by the central repository against access by unauthorized persons.

6.4. If the relationship between the Board and the central repository is terminated by statute, the central repository shall provide to the Board within a reasonable time, all collected information and the database maintained by the central repository.

6.5. The Board may accept a designated grant, public and private financial assistance, and licensure fees to provide funding for the central repository.

§15-8-7. Confidentiality.

7.1. The Board shall carry out a program to protect the confidentiality of the information received by the central repository.

7.2. The Board may disclose confidential information received by the central repository to any person who is engaged in receiving, processing, or storing the information.

7.3. The Board may release confidential information received by the central repository to the following persons:

(a) a duly authorized agent of a board in this state or another state that licenses practitioners authorized to prescribe Schedules II, III, and IV controlled substances who is engaged in an investigation, an adjudication, or a prosecution of a violation under any state or federal law that involves a controlled substance;

(b) members of the West Virginia State Police expressly authorized by the superintendent of the West Virginia State Police to have access to the information;

(c) an authorized agent of a local law-enforcement agency who is acting as a member of a State recognized drug task force;

(d) authorized agents of the federal Drug Enforcement Administration;

(e) the Chief Medical Examiner for the State of West Virginia or his or her duly authorized agent for use in post-mortem examinations;

(f) a person with an enforceable court order or regulatory agency administrative subpoena;

(g) inspectors and agents of the Board;

(h) prescribing practitioners or their duly authorized agents;

(i) pharmacists or a registered pharmacy technician as the agent of the pharmacist; and

(j) a person using the data for compilation of educational, scholarly, or statistical purposes so long as the individually identifiable data of the persons or entities stored in the central repository remains confidential.

7.4. All information released by the Board must be related to a specific patient or a specific individual or entity under investigation by any of the persons set forth in subsection 7.3 (a) through (i) of this section except that practitioners who prescribe controlled substances may request specific data related to their drug enforcement administration controlled substance registration number or for the purpose of

providing treatment to a patient.

7.5. All access to the data collected by the central repository shall be limited to regular business hours of the Board office unless an individual authorized to receive the information proves that an immediate danger to the public exists and immediate access is necessary to prevent further harm, Provided That the Board may permit access at any time to authorized users through the use of a secure connection and through the use of proper security features designed to protect the integrity and confidentiality of the information from unauthorized access or disclosure.

7.6. Any person or entity having access to the central repository and who is permitted to designate a duly authorized agent to have access to the central repository pursuant to this rule must make any such designation on a form to be supplied by the Board. It is the responsibility of the designating individual to insure that the designated agent maintains the confidentiality of the information in the central repository as required. Further, should the designating individual remove the authority of the designated agent to act as the duly authorized agent, or should the designated agent leave the employment of the covered person or entity such that he or she is no longer eligible to act as the duly authorized agent, then the designating individual must immediately notify the Board, at which time the designee's access to the central repository shall be removed.

15-8-8. Access Required. All practitioners who prescribe or dispense Schedule II, III, or IV controlled substances must have electronic access to the central repository in each of their individual places of practice by July 1, 2011.