



**WEST VIRGINIA  
SECRETARY OF STATE**

**NATALIE E. TENNANT**

**ADMINISTRATIVE LAW DIVISION**

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OFFICE OF  
WEST VIRGINIA SECRETARY OF STATE

**FORM 3 -- NOTICE OF AGENCY APPROVAL OF A PROPOSED RULE AND FILING WITH THE  
LEGISLATIVE RULE-MAKING REVIEW COMMITTEE**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

THE ABOVE PROPOSED LEGISLATIVE RULE HAVING GONE TO A PUBLIC HEARING OR A PUBLIC COMMENT PERIOD IS HEREBY APPROVED BY THE PROMULGATING AGENCY FOR FILING WITH THE SECRETARY OF STATE AND THE LEGISLATIVE RULE-MAKING REVIEW COMMITTEE FOR THEIR REVIEW.

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

**Yes**  
**David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 15-08



Rule Id: 10213



Document: 28819



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 1)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

**PRIMARY CONTACT**

David E. Potters  
2310 Kanawha Boulevard East

Charleston, STATE ZIP

David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 1)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

**AUTHORIZING STATUTE(S) CITATION**

**West Virginia Code Sections 30-5-7 and 60A-9-6**

**DATE FILED IN STATE REGISTER WITH NOTICE OF HEARING OR PUBLIC COMMENT PERIOD**

**Friday, July 01, 2016**

**WHAT OTHER NOTICE, INCLUDING ADVERTISING, DID YOU GIVE OF THE HEARING?**

**None. We worked with stakeholders during drafting.**

**DATE OF PUBLIC HEARING(S) OR PUBLIC COMMENT PERIOD ENDED**

**Thursday, August 04, 2016**

**David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 15-08



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 2)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

ATTACH LIST OF PERSONS WHO APPEARED AT HEARING, COMMENTS RECEIVED,  
AMENDMENTS, REASONS FOR AMENDMENTS.

**Attached**

DATE YOU FILED IN STATE REGISTER THE AGENCY APPROVED PROPOSED LEGISLATIVE RULE  
FOLLOWING PUBLIC HEARING: (BE EXACT)

**Thursday, August 18, 2016**

**David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in  
accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 15-08



Rule Id: 10213



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 3)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

IF THE STATUTE UNDER WHICH YOU PROMULGATED THE SUBMITTED RULES REQUIRES CERTAIN FINDINGS AND DETERMINATIONS TO BE MADE AS A CONDITION PRECEDENT TO THE PROMULGATION. GIVE THE DATE UPON WHICH YOU FILED IN THE STATE REGISTER A NOTICE OF THE TIME AND PLACE OF A HEARING FOR THE TAKING OF EVIDENCE AND A GENERAL DESCRIPTION OF THE ISSUES TO BE DECIDED.

**David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 15-08



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**FORM 10 -- LEGISLATIVE QUESTIONNAIRE (Page 4)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

DATE OF HEARING OR COMMENT PERIOD

ON WHAT DATE DID YOU FILE IN THE STATE REGISTER THE FINDINGS AND DETERMINATIONS  
REQUIRED TOGETHER WITH THE REASONS THEREFOR?

ATTACH FINDINGS AND DETERMINATIONS AND REASONS  
**None**

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

**Yes**  
**David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in  
accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 15-08



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 1)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

**PRIMARY CONTACT**

David E. Potters  
2310 Kanawha Boulevard East

Charleston, STATE ZIP

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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 1)**

AGENCY      Pharmacy  
RULE TYPE    Legislative                      AMENDMENT TO EXISTING RULE    Yes    TITLE-SERIES    15-08  
RULE NAME    Controlled Substances Monitoring Program

CITE AUTHORITY    30-5-7 and 60A-9-6

SUMMARIZE IN A CLEAR AND CONCISE MANNER WHAT IMPACT THIS MEASURE WILL HAVE ON COSTS AND REVENUES OF STATE GOVERNMENT.

The changes referenced are merely updates in language and definitions to account for the requirement that opioid antagonist dispensing be reported to the CSMP, to prepare for capturing the "date delivered or date sold" field in the future as the date actually delivered to the patient or patient's agent, to clarify language on "zero reports" when there are no controlled substances dispensings from the reporter in a period, and to account for reporting of corrections to the system directly by reporters within 7 days of finding any error by the reporter. This will not have any effect on the costs or revenue as the system is already set up to receive these reportings. If we are successful in seeking a legislative change to require date sold/delivered to be reported, we will have minor programming changes to pay for which will come from grant funds and not cost the state any money.

David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



Title-Series: 15-08



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FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 2)

AGENCY Pharmacy  
 RULE TYPE Legislative AMENDMENT TO EXISTING RULE Yes TITLE-SERIES 15-08  
 RULE NAME Controlled Substances Monitoring Program

CITE AUTHORITY 30-5-7 and 60A-9-6

FISCAL NOTE DETAIL -- SHOW OVER-ALL EFFECT IN ITEM 1 AND 2 AND, IN ITEM 3, GIVE AN EXPLANATION OF BREAKDOWN BY FISCAL YEAR, INCLUDING LONG-RANGE EFFECT.

Effect Of Proposal	Current Increase/Decrease (use ' - ')	Next Increase/Decrease (use ' - ')	Fiscal Year (Upon Full Implementation)
ESTIMATED TOTAL COST	0	0	0
PERSONAL SERVICES	0	0	0
CURRENT EXPENSES	0	0	0
REPAIRS AND ALTERATIONS	0	0	0
ASSETS	0	0	0
OTHER	0	0	0
ESTIMATED TOTAL REVENUES	0	0	0

David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 3)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

3. EXPLANATION OF ABOVE ESTIMATES (INCLUDING LONG-RANGE EFFECT). PLEASE INCLUDE ANY INCREASE OR DECREASE IN FEES IN YOUR ESTIMATED TOTAL REVENUES.

**None**

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**FORM 11 -- FISCAL NOTE FOR PROPOSED RULES (Page 4)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

PLEASE IDENTIFY ANY AREAS OF VAGUENESS, TECHNICAL DEFECTS, REASONS THE PROPOSED RULE WOULD NOT HAVE A FISCAL IMPACT, AND OR ANY SPECIAL ISSUES NOT CAPTURED ELSEWHERE ON THIS FORM.

**None**

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.



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**FORM 12 -- BRIEF SUMMARY AND STATEMENT OF CIRCUMSTANCES (Page 1)**

AGENCY **Pharmacy**  
RULE TYPE **Legislative** AMENDMENT TO EXISTING RULE **Yes** TITLE-SERIES **15-08**  
RULE NAME **Controlled Substances Monitoring Program**

CITE AUTHORITY **30-5-7 and 60A-9-6**

SUMMARIZE IN A CLEAR AND CONCISE MANNER CONTENTS OF CHANGES IN RULE AND STATEMENT OF CIRCUMSTANCES REQUIRING THE RULE.

SB 454 (2016) made changes to the authorizing Act for the West Virginia Controlled Substances Monitoring Program (the CSMP), and therefore, the Board made rules revisions to account for the new requirement that opioid antagonist dispensing be reported to the CSMP. In addition, the Board desires to work toward a clear requirement that the date the controlled substance dispensing is actually delivered to the patient or patient's agent be the date reported, so we added a definition of "date sold" which is part of the national reporting formats optional fields. The Board also sought to clarify language about filing "zero reports" when there are no controlled substance dispensings from a reporter, and to account for reporting of corrections to the system within 7 days of finding any error by a reporter.

BY CHOOSING 'YES', I ATTEST THAT THE PREVIOUS STATEMENTS ARE TRUE AND CORRECT.

**Yes**  
**David E Potters -- By my signature, I certify that I am the person authorized to file legislative rules, in accordance with West Virginia Code §29A-3-11 and §39A-3-2.**



Title-Series: 15-08



Rule Id: 10213



Document: 28819

TITLE 15  
LEGISLATIVE RULE  
WEST VIRGINIA BOARD OF PHARMACY

SERIES 8  
CONTROLLED SUBSTANCES MONITORING PROGRAM

**§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 §§ 30-5-7 and 60A-9-6.

1.3. Filing Date. -- ~~April 16, 2015~~ \_\_\_\_\_.

1.4. Effective Date. -- ~~May 17, 2015~~ \_\_\_\_\_.

1.5. Sunset Date. -- These rule will Sunset effective 10 years from the effective date.

**§15-8-2. Definitions.**

2.1. Except as otherwise indicated, the definitions applicable to the Uniform Controlled Substances Act set forth in West Virginia Code § 60A-1-101 apply to this Series.

2.2. The following words and phrases have the following meanings:

2.2.1a. "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.

2.2.2b. "Controlled Substances Monitoring Program" or "CSMP" means the database maintained through the central repository for the information required to be transmitted by this rule.

2.2.3c. "Date sold" means, for purposes of American Society for Automation in Pharmacy (ASAP) standard prescription drug monitoring program reporting formats, the date a prescription is delivered to the patient or the patient's caregiver or agent on behalf of the patient, Provided that, for prescriptions delivered by mail or other common carrier, it is the date placed in the mail or for delivery.

2.2.3d. "Deliver" or "delivery" means the actual, constructive or attempted transfer from one person to another of: (1) A controlled substance, whether or not there is an agency relationship; (2) a counterfeit substance; or (3) an imitation controlled substance.

2.2.4e. "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. Dispensing has not occurred for purposes of this definition until the controlled substance is actually delivered to the recipient or recipient representative.

2.2.5f. "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 covered person or duly authorized representative of the covered entity to access the central repository on behalf of the covered person or entity.

2.2.6g. "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.

2.2.7h. "Government-issued photo identification card" means an identification card of an individual that provides a photograph of him or her and is issued by a State or the Federal Government of the United States of America, or a document that, with respect to identification, is considered acceptable for purposes of sections 274a.2(b)(1)(v)(A) and 274a.2(b)(1)(v)(B) of title 8, Code of Federal Regulations.

2.2.8i. "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).

2.2.9j. "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.

2.2.10k. "Medical Services Provider" means a licensed practitioner with the legal authority to dispense controlled substances.

2.2.1. "Opioid antagonist or opiate antagonist" means drugs approved by the federal Food and Drug Administration for treatment of drug overdose which have a high affinity for opiate receptors but do not activate these receptors, and which block the effects of exogenously administered opioids such as morphine, heroin, meperidine, and methadone, or of endogenously released endorphins and enkephalins.

2.2.11m. "Patient", for purposes of access to the CSMP, means an individual who:

2.2.11a.1. has a valid ongoing practitioner-patient relationship; or

2.2.11b.2. has not yet established an ongoing practitioner-patient relationship, but:

2.2.11b.1.2.A. has requested to establish such a relationship with the practitioner; or

2.2.11b.2.2.B. has been referred to that practitioner for evaluation or care by another practitioner.

2.2.12n. "Recipient" means the patient (ultimate user or research subject) for whom a controlled substance is dispensed or filled.

2.2.13o. "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.

2.2.14p. "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.

2.2.15q. "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.

2.2.16r. "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.

2.2.17s. "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 or opioid antagonist is dispensed for out-patient use, the medical services provider, health care facility, or pharmacy that dispensed the controlled substance shall transmit to the central repository the information required by West Virginia Code § 60A-9-4. This includes the following:

~~(a)~~3.1.a. The name, address, pharmacy prescription number and Drug Enforcement Administration controlled substance registration number of the dispensing pharmacy or the dispensing medical services provider;

~~(b)~~3.1.b. The full legal name, address and birth date of the recipient. When reporting the full legal name, address, and date of birth of the recipient, the reporter shall include any middle name or initial and any suffix (e.g., Jr., II, III) as listed on the patient's government-issued photo identification card, Provided that, if the patient does not have such an identification card, such as a minor, then the reporter shall obtain and input the information to the best of its knowledge and ability based upon the information available to it from the prescription, the patient profile or record, and any other information known to the reporter. Examples of acceptable forms of ID include, but are not limited to: driver's licenses, non-driver identification cards, passports, and military IDs;

~~(c)~~3.1.c. The Drug Enforcement Administration controlled substances registration number of the practitioner writing the prescription. By providing this registration number, the Controlled Substances Monitoring Program database will extract the prescriber's name and address required by statute; therefore, the reporters do not need to additionally supply the prescriber's name and address in addition to the prescriber's DEA number;

~~(d)~~3.1.d. The national drug code number of the Schedule II, III and IV controlled substance or opioid antagonist dispensed. By providing this NDC number, the Controlled Substances Monitoring Program database will extract the name and dosage or (strength) of the controlled substance required by the statute such that the reporters do not need to additionally supply the name and dosage;

~~(e)~~3.1.e. The quantity of the Schedule II, III and IV controlled substance or opioid antagonist dispensed;

~~(f)~~3.1.f. The date the prescription was written and the date filled;

~~(g)~~3.1.g. The number of refills, if any, authorized by the prescription;

~~(h)~~3.1.h. If the prescription being dispensed is being picked up by a recipient representative on behalf of the recipient, the full legal name, address and birth date of the recipient representative as set forth on the person's government-issued photo identification card. When reporting the full legal name,

address, and date of birth of the person picking up the prescription on behalf of the patient, the reporter shall include any middle name or initial and any suffix (e.g., Jr., II, III) as listed on the person's government-issued photo identification card. If the reporter is unable to input this information to the central repository at the time of reporting, this information shall be retained in either print or electronic form. If the reporter electronically reports the individual's first name, last name, official government-issued photo identification card number and the card's issuing authority or jurisdiction (e.g. United State military, State driver's license, Passport, Green Card, etc.) into the central repository, the reporter shall retain the additional information in print or electronic form for a period of ninety (90) days. If the reporter does not file the listed information into the central repository, the information shall be retained in print or electronic form for a period of at least two (2) years; and

~~(i)3.1.i.~~ The source of payment for the controlled substance dispensed.

~~3.2. Any person reporting more than twenty (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 compact disc; or~~

~~(c) A magnetic tape.~~

~~3.3. Any person reporting less than twenty (20) Schedule II, III, or IV controlled substance dispensings 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 reporter who does not have an automated recordkeeping system capable of producing an electronic report in the established format. A reporter requesting a waiver shall make the request to the board in writing and the board shall grant the request if the reporter agrees to report the data by submitting a completed Universal Claim Form.~~

~~3.5.3.2~~ 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 Within 24 Hours.**

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 within twenty-four (24) hours of the dispensing, Provided that, if the dispensing is done by mail or other postal, courier, or logistics services such as United Parcel Service or Federal Express, then the information shall be submitted at least within forty-eight (48) hours of the time the dispensing is placed in the mail for delivery. ~~If there was no dispensing of any Schedule II, III, or IV controlled substances within up to seven days of the last report, the reporter shall submit a "zero" report no later than seven days after the last date and time reported on the previous report.~~ If a reporter is closed for a holiday, or week-end day, the reporter shall make the required report as soon as is practicable upon reopening, or within forty-eight (48) hours, whichever occurs first. If there are no dispensings of any Schedule II, III, or IV controlled substances or opioid antagonists, then the reporter shall submit a daily "zero" report, Provided that if there are no such dispensings within up to seven days of the last report, the reporter may submit a weekly "zero" report no later than seven days after the last date and time reported on the previous report. If a reporter is unable to make the required reporting in a timely manner due to an emergency, the reporter shall inform the board of the emergency and provide the board with information



on when the reporter believes it will return to full compliance. Such notification may be taken into consideration by any agency, licensing board, or court, when determining if the reporter is in compliance with reporting requirements of West Virginia Code Section 60A-9-3 and Section 3 of this Series, and any penalties that may attach for any violation thereof.

4.2. If a reporter does not possess for the purpose of dispensing any Schedule II, III, or IV controlled substances or opioid antagonists, the dispenser may notify the board in writing by requesting a waiver from reporting on a form supplied by the board. If the waiver is properly filed with and granted by the board, the reporter is not required to submit a zero report unless and until the reporter possesses a Schedule II, III, or IV controlled substance or opioid antagonist for the purpose of dispensing.

4.3. 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 shall be reported accurately. If the reporting individual or entity discovers that information contained in the central repository is not accurate, he or she shall ~~notify the board of the inaccuracy and~~ make the necessary corrections in writing and resubmit the correct information as soon as possible, but in no event longer than ~~fourteen (14) days~~ 7 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 maintain 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)~~7.3.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)~~7.3.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)~~7.3.c. An authorized agent of a local law-enforcement agency who is acting as a member of a Federally affiliated drug task force 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;

~~(d)~~7.3.d. Authorized agents of the federal Drug Enforcement Administration 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;

~~(e)~~7.3.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)~~7.3.f. A person with an enforceable court order or regulatory agency administrative subpoena;

~~(g)~~7.3.g. Inspectors and agents of the board to carry out the lawful purposes of the CSMP program, for purposes of a pharmacy inspection or drug inventory, or who are engaged in an investigation, an adjudication, or a prosecution of a violation under any state or federal law that involves a controlled substance;

~~(h)~~7.3.h. Prescribing practitioners or their duly authorized agents;

~~(i)~~ 7.3.i. Pharmacists or a registered pharmacy technician as the agent of the pharmacist; and

~~(j)~~7.3.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 shall 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 or dispense controlled substances may also request specific data related to any and all dispensings reported to the database as prescribed and/or dispensed under their drug enforcement administration controlled substance registration number or for the purpose of providing treatment to a patient.

~~(a)~~7.4.a. A practitioner or practitioner's delegate may, prior to affirmatively accepting a patient into the practitioner's practice, obtain confidential information from the CSMP related to that patient for the purpose of determining whether or not to accept the patient and provide treatment.

~~(b)~~7.4.b. If the patient is a newborn child or child being fed human breast milk, a practitioner or practitioner's delegate may obtain confidential information from the CSMP related to the child's mother, wet nurse, or other direct source of human breast milk, as the practitioner believes may be relevant for the purpose of providing treatment to that child-patient.

7.5. All access to the data collected by the central repository shall be limited to regular business hours of the board's 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 shall make the 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 designating individual or entity such that he or she is no longer eligible to act as the duly authorized agent, then the designating individual shall immediately notify the board, at which time the designee's access to the central repository shall be removed.

7.7. A practitioner may file or store copies of any patient-specific report obtained from the CSMP in the patient's confidential medical file or chart maintained by the practitioner. The practitioner may share the information contained in the report with other practitioners providing treatment to the patient, the patient, or the patient's properly authorized guardian or representative for the purpose of providing treatment. However, the information held in the patient file or chart is not subject to discovery in a civil or criminal matter absent a court order. The information is obtainable from the practitioner in a proper regulatory agency administrative matter through a regulatory agency administrative subpoena.

7.8. The board shall review records in the CSMP in accordance with parameters set by the Advisory Committee to identify abnormal or unusual practices of patients who exceed those parameters and are therefore outliers in the CSMP data. The board shall issue reports of the results of these searches to the Review Committee for its regular review and action. Further, the board shall communicate with prescribers and dispensers of the patients who exceed the parameters to inform them of each practitioner's patient's activities as demonstrated in the CSMP reports. All such reports and communications produced by the board shall be kept confidential by the board and the Review Committee, and are not open to inspection except as provided for confidential records and reports of the Review Committee.

7.9. The Review Committee may query the CSMP based on parameters established by the advisory committee to identify abnormal or unusual practices of patients who are outliers in the data according to their controlled substance prescribing, dispensing, or usage patterns or other indicators available in the system. The Review Committee may also query the CSMP based on parameters established by the advisory committee to identify abnormal prescribing and/or dispensing patterns of practitioners indicated by outliers in the system. The Review Committee may also query the CSMP for any relevant prescribing or dispensing records of involved patients or practitioners as it carries out its duty to review notices provided by the chief medical examiner pursuant to West Virginia Code § 61-12-10(h) and determine on a case-by-case basis whether a practitioner who prescribed or dispensed a controlled substance may have resulted in or contributed to the drug overdose, and, if so, if the practitioner may have breached professional or occupational standards or committed a criminal act when prescribing the controlled substance at issue to the decedent. The Review Committee, in accordance with parameters established by the Advisory Committee, may provide any pertinent information in its discretion from the CSMP to the relevant practitioner, the practitioner's licensing board, or law enforcement as permitted by West Virginia Code § 60A-9-5(b). The Review Committee, in accordance with parameters established by the Advisory Committee, may also communicate with pertinent practitioners or patients to make them aware of the

practitioner's own prescribing or dispensing patterns or history, or the patient's own usage patterns or history as reflected in the CSMP in an effort to reduce inappropriate use of prescription drugs in accordance with West Virginia Code § 60A-9-5(3)(C). The information obtained and developed by or on behalf of the Review Committee may not be shared except as provided in West Virginia Code § 60A-9-5(b) and as provided specifically in subsection 7.8 and this subsection of this section.