August 25, 2016

Dear Provider,

As Executive Director of the Office of Professional Licensure and Certification, I have been asked by the Governor’s Office and the Attorney General’s Office to remind you of recent legislative changes that may affect your practice. As you are aware, there have been a number of policy initiatives, through both legislation and board rules, to set forth safety measures and best practices with respect to the prescribing of opioids to patients. The purpose of this letter is to remind you of relevant provisions in two laws requiring the mandatory use of the Prescription Drug Monitoring Program (“PDMP”); for all licensees who have a NH DEA license.

First, SB 576, which takes effect on September 1, 2016, mandates that those prescribers that are required to register with the PDMP query the program for a patient’s initial prescription when prescribing schedule II, III, and IV opioids for the management and treatment of pain, and then periodically and at least twice per year. This provision makes exceptions for when (1) controlled medications are to be administered to patients in a health care setting; and (2) treating acute pain associated with serious traumatic injury, post-operatively, or with an acute medical condition, with clear objective findings by the practitioner, for no more than 30 days.

Next, HB 1423 takes effect on January 1, 2017. Through this piece of legislation, all prescribers that are required to register with the PDMP, regardless of whether they are prescribing for chronic or acute pain, must query the program when writing an initial schedule II, II, or IV opioid prescription for the management or treatment of a patient’s pain and then periodically at least twice per year. This provision makes exceptions for: (1) controlled substances administered to a patient in a health care setting; (2) when the PDMP may be inaccessible or not functioning properly; and (3) when an emergency department is experiencing a higher than normal patient volume, and to query the PDMP would materially delay care. Note, however, that when (2) or (3) is applicable, the prescriber must document the exception in the patient’s record.

Put simply, starting September 1, 2016, all those who prescribe schedule II, III, and IV opioids for chronic pain are required to use the PDMP; treatment of acute pain is specifically exempted from this mandate. However, starting January 1, 2017, the mandatory usage of the PDMP is in effect for those prescribing schedule II, III, or IV opioids, regardless of whether the prescriber is treating for chronic or acute pain.
In preparation for these laws requiring mandatory use of the PDMP, a number of State agencies and boards have worked together on a number of steps to assist prescribers in complying with the laws including: offering live and webinar training on use of the PDMP, providing information on each professional boards’ website about the legal requirements with links to the PDMP website; and the legislative funding for the purchase of upgrades to the database system (HID) the State uses. In addition, the Office of PDMP will be offering one-hour webinars in the Fall. The webinars and other materials will be available on the PDMP website, located at http://www.nh.gov/pharmacy/prescription-monitoring/index.htm. In addition, the PDMP Help Desk can be reached at 855-353-9903.

The OPLC and the individual boards are committed to making sure that all licensees comply with the mandatory requirements and, in the near future, will be outlining mechanisms in place to confirm compliance. We are also committed to working with our licensees as they, and their delegates, work to become more proficient with the PDMP system.

Sincerely,

[Signature]

Peter Danles
Executive Director
Office of Professional Licensure and Certification